National Action Plan for Pandemic Influenza and New Infectious Diseases

June 7, 2013
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I. Introduction

1. Enactment of the Act on Special Measures for Pandemic Influenza and New Infectious Diseases Preparedness and Response

An outbreak of pandemic influenza has occurred with a cycle of 10 to 40 years as a result of the emergence of a new type of virus whose immunogenicity is significantly different from that of seasonal influenza viruses. As few people have immunity to such a new type of influenza, there are concerns that an outbreak of pandemic influenza may develop into a global pandemic and cause great health damage and an associated social impact.

Moreover, there is the possibility of an outbreak of a new, unknown infectious disease that may produce as great a social impact as a new type of influenza because of its strong infectiousness.

In the event of an outbreak of pandemic influenza or other new infectious disease, the government should deal with it as a national crisis.

The Act on Special Measures for Pandemic Influenza and New Infectious Diseases Preparedness and Response (Act No. 31 of 2012; hereinafter referred to as the “Act on Special Measures”) specifies the responsibilities of and measures to be taken by the national and local governments, designated public institutions, business operators, etc. as well as special measures to be taken thereby, including pandemic influenza emergency measures, in the event of an outbreak of pandemic influenza with high virulence or other new infectious disease which poses a similar risk, in order to protect the lives and health of the people and minimize the impact on the daily lives of the people and the national economy. This law, together with other laws such as the Act on Prevention of Infectious Diseases and Medical Care for Patients Suffering Infectious Diseases (Act No. 114 of 1998; hereinafter referred to as the “Infectious Diseases Act”), is intended to establish a robust national system to deal with pandemic influenza and new infectious diseases.

2. History of Initiatives to Deal with Pandemic Influenza and New Infectious Diseases

Since before the enactment of the Act on Special Measures, Japan has made several partial revisions to its action plan for pandemic influenza, which was formulated in 2005 in accordance with the WHO Global Influenza Preparedness Plan. In February 2009, Japan revised the action plan in response to the enhancement of its countermeasures against pandemic influenza following the

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1 WHO “Global Influenza Preparedness Plan”: A guidance document issued by the WHO in 2005
enactment in 2008 of the Act to Partially Revise the Act on Prevention of Infectious Diseases and Medical Care for Patients Suffering Infectious Diseases and the Quarantine Act (Act No. 30 of 2008).

In April 2009, the outbreak of pandemic influenza (A/H1N1) was confirmed in Mexico, and it developed into a global pandemic. In Japan, over a period of a little more than a year from the confirmation of the outbreak, around 20 million people are estimated to have contracted the pandemic influenza. Around 18,000 patients were hospitalized and 203 people died\(^2\). While the mortality rate, at 0.16 per 100,000 persons\(^3\), was low compared with the rates in other countries, Japan acquired much knowledge and learned many lessons\(^4\) through the implementation of countermeasures with regard to onsite activities to manage an outbreak and how to deal with a mildly virulent influenza. Although the virulence of A/H1N1 influenza was similar to that of seasonal influenzas, the supply-demand balance of medical resources and necessary goods temporarily became tight in some regions. Therefore, to prepare for the possible outbreak and spread of a highly virulent pandemic influenza, Japan revised the action plan for pandemic influenza in September 2011. In addition, after deliberating legislation to enhance the effectiveness of countermeasures based on the lesson of the A/H1N1 influenza pandemic, Japan enacted the Act on Special Measures in April 2012 as a crisis management law that also covers other new infectious diseases that may pose a similar risk to the one posed by a highly virulent pandemic influenza.

3. Formulation of the National Action Plan

Based on Article 6 of the Act on Special Measures, the Government worked out a draft of the National Action Plan for Pandemic Influenza and New Infectious Diseases

in light of the “Interim Report by the Panel of Experts on Countermeasures against Pandemic Influenza” (February 7, 2013). After seeking the opinions of the Panel of Experts on Countermeasures against Pandemic Influenza, the Government formulated the National Action Plan for Pandemic Influenza and New Infectious Diseases.

\(^2\) The figures are as of the end of September 2010.

\(^3\) The fatality rate per 100,000 population in individual countries: Japan: 0.16; the United States: 3.96; Canada: 1.32; Australia: 0.93; the United Kingdom: 0.76; France: 0.51

However, it should be kept in mind that as the definition of death from influenza varies from country to country, the figures do not provide a precise comparison (according to reference materials compiled by the Ministry of Health, Labour and Welfare).

\(^4\) The results of the verification of the countermeasures against the new type of influenza (A/H1N1) were summarized as a report on the Ministry of Health, Labour and Welfare’s review meeting of countermeasures against the new type of influenza (A/H1N1) in June 2010.
Diseases (hereinafter referred to as the “National Action Plan”). In addition to specifying the basic policy for countermeasures against pandemic influenza and new infectious disease and specific measures to be taken by the national government, the National Action Plan prescribes the matters that serve as standards when prefectural governments formulate their action plans and designated public institutions formulate their operational plans. While keeping in mind how to prepare for and respond to a highly virulent pandemic influenza and new infectious diseases, the National Action Plan presents a range of options that may be adopted as countermeasures under various situations, such as an outbreak of a mildly virulent pandemic influenza or other infectious disease, in light of the characteristics of the disease.

The infectious diseases covered by the National Action Plan (hereinafter referred to as “PI,” which is a short for pandemic influenza, etc.5) are as follows:

- Infectious diseases including pandemic influenza which are specified in Article 6(7) of the Infectious Diseases Act (hereinafter referred to as “pandemic influenza”)
- New infectious diseases which are specified in Article 6(9) of the Infectious Diseases Act and which could produce as great a social impact as pandemic influenza because of their strong infectiousness.

Regarding how to deal with human infection of avian influenza, which is not covered by the Act on Special Measures, “countermeasures against human infection of avian influenza in Japan and abroad” is indicated as a reference in the National Action Plan.

As it is necessary to incorporate up-to-date scientific knowledge concerning PI into the National Action Plan, the national government will revise the plan, when and as appropriate, by verifying the effectiveness of countermeasures against PI.

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5 This includes the re-emerging influenza as specified in Article 6(7)(ii) of the Infectious Diseases Act.
II. Basic policy for Developing Countermeasures against PI

II-1. Purposes of and Basic Strategy for Countermeasures against PI

It is difficult to accurately predict when an outbreak of PI will occur, and it is impossible to prevent the outbreak. If an outbreak of PI occurs somewhere in the world, it is likely to be difficult to prevent the expansion of infection into Japan. If an outbreak of PI that is highly virulent and may spread widely, it could have a great impact on the lives and health of the people and the entire economy. Therefore, while PI is expected to infect a large number of people over a long period of time, it is necessary to regard the development of countermeasures against PI as a critical national crisis management challenge and take measures for the following two major purposes while keeping in mind the risk that if infections are concentrated in a certain period of time, the capacity of provision of medical care may be exceeded.

1) Limit the spread of infection as much as possible to protect the lives and health of the people.
   - Curb the expansion of infection and delay the epidemic peak so as to secure sufficient time to develop a relevant medical care system and produce a vaccine.
   - Minimize the number of patients at the epidemic peak so as to reduce the burden on the medical care system and enable patients requiring treatment to be treated appropriately by strengthening the medical care system so as to prevent the number of patients from exceeding the medical care providing capacity.
   - Reduce the number of severe cases and fatalities by providing appropriate medical care.

2) Minimize the impact on the daily lives of the people and the national economy
   - Reduce the number of absent workers through infection control measures implemented at the local level.
   - Make efforts to maintain the provision of medical care and business operations that contribute to the stability of the daily lives of the people and the national economy through the formulation and implementation of business continuity plans.
II-2. Basic Approach to Countermeasures against PI

It must be taken into consideration that countermeasures against PI should be developed in a flexible manner in accordance with the pandemic phases and changes in the situation. In light of the experience of past influenza pandemics, we could be exposed to huge risk if we focus excessively on a single set of measures. The National Action Plan presents a range of options that may be adopted under various situations, such as the outbreak of a mildly virulent pandemic influenza or other infectious disease, in light of the characteristics of the disease while taking into consideration the need to deal with a highly virulent PI.

Therefore, the national government should aim to formulate a well-balanced strategy that implements a combination of various measures in a comprehensive, effective manner in light of scientific knowledge and countermeasures taken by other countries while taking account of Japan’s geographic conditions, concentration of population in major cities, social circumstances, including the development of transportation systems, the status of the medical care system and the national characteristics, including attitudes toward medical care. Based on that, the national government should formulate a strategy that prepares a series of measures based on the following principles in accordance with pandemic phases from the period prior to the outbreak of PI (pre-outbreak phase) to the post-epidemic period. (Specific measures to be taken in each phase will be described in III.)

If an outbreak of PI has actually occurred, the national government will select
measures to be implemented from out of the options described in the action plan in light of such factors as the characteristics of the disease, including its virulence and infectiousness, the situation of the outbreak, the characteristics of relevant regions while comprehensively taking account of the need to respect human rights, and the effectiveness and feasibility of measures as well as their impact on the daily lives of the people and the national economy.

- In the pre-outbreak period, it is important to make advance preparations such as establishing a system to implement border control measures, stockpiling anti-influenza virus drugs and other necessary goods, developing local medical care systems, conducting research and development concerning vaccines and developing a vaccine supply system, raising public awareness and encouraging government agencies and companies to formulate business continuity plans.

- When an outbreak of PI has occurred somewhere in the world, the national government should immediately shift to a system to implement countermeasures. It is necessary to formulate countermeasures on the premise that if an outbreak of PI has occurred somewhere in the world, it will be impossible to prevent the spread of infection to Japan. In order to establish a robust response system when an outbreak of PI has occurred abroad, it is important to delay the spread of infection as long as possible by taking advantage of the characteristics of Japan as an island country, for example through the enhancement of quarantine.

- In the early phase of a domestic outbreak, the national government should take measures such as hospitalizing patients, treating patients with anti-influenza virus drugs, requesting people at the risk of being infected to refrain from going out and considering the possibility of using anti-influenza virus drugs for such people as a preventive measure and, depending on the virulence of the disease, it may also request the general public to refrain from going out unless it is urgent and unavoidable and restrict the use of some facilities so as to limit the speed of the expansion of infection as much as possible.

- When information concerning the virulence and infectiousness of a PI is limited, such as during the initial phase of an outbreak, the national government should take strong measures on the assumption of the worst case scenario based on knowledge concerning past cases of pandemics. However, the national government should continue to collect new information and evaluate the necessity of countermeasures, and as soon as additional information is obtained, it should shift to more appropriate measures.

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6 As border control measures are implemented due to their expected effectiveness in delaying a domestic outbreak at the most, they are not intended to completely prevent the entry of viruses.
countermeasures. The national government should also revise countermeasures the necessity of which has decreased, including scaling back and discontinuing them, as the situation evolves.

○ When an infection has expanded within Japan, the national and local governments and business operators should cooperate with each other in doing their utmost to secure medical care service and maintain the daily lives of the people and the national economy. However, in that case, various situations could arise due to social tensions. Therefore, things may not go according to plan, so the national government should grasp the social situation and deal with the outbreak in a flexible manner in accordance with the situation.

○ Depending on the circumstances, the national government should enable municipal governments and government agencies to implement countermeasures in a flexible manner based on consultations with the headquarters for countermeasures against PI; hereinafter referred to as the “national headquarters for countermeasures”) so as to make it easier for medical institutions and other entities actually implementing countermeasures to take appropriate actions.

As for countermeasures against PI that could cause significant damage to the lives and health of the people, it is necessary to comprehensively implement a combination of non-medical measures, such as reducing opportunities for people-to-people contact by calling on the general public to refrain from going out unless it is urgent and unavoidable, requesting restrictions on the use of facilities and asking business operators to scale back business operations, and medical measures, including the use of vaccine and anti-influenza virus drugs.

Regarding non-medical infection control measures in particular, adopting a “whole-of-society approach” is expected to be effective. Therefore, it is important for all business operators not only to make voluntary efforts to prevent infection in workplaces but also to proactively consider implementing such measures as narrowing the range of important operations that should be continued from the perspective of preventing the expansion of infection.

It is also necessary to remind the general public of the need to accept the possibility that the level of services provided by business operators may decline significantly for a certain period of time due to infection among employees.

Moreover, in order to prevent the medical care system from being stretched to the limit and avoid social confusion due to the spread of PI, measures taken by the national, prefectural and municipal governments and designated public institutions alone will not
be sufficient. It is necessary for each business operator and each individual person to take appropriate actions and make preparations, including stockpiling necessary supplies, in order to prevent infection and expansion of infection. Countermeasures against PI are based on those against seasonal influenza, such as routine hand washing. In particular, when a new infectious disease against which no treatment or vaccine is available, such as SARS\(^7\), has occurred, public health measures are especially important.

### II-3. Points to Note regarding Implementation of Countermeasures against PI

In preparation for and at the time of an outbreak of PI, the national, prefectural and municipal governments as well as designated (local) public institutions should make sure to appropriately and quickly implement countermeasures against such new diseases in cooperation with each other in accordance with the Act on Special Measures and other laws and regulations, the National Action Plan and their own actions plans and business plans. In this case, they should pay attention to the following points.

#### I. Respect for Fundamental Human Rights

When implementing countermeasures against PI, the national, prefectural and municipal governments should respect fundamental human rights. In cases where restrictions are imposed on the people’s rights and freedoms when the following activities are conducted or the following requests are made, they should be kept to the minimum necessary for implementing countermeasures against PI: using facilities for restricting activities for the purpose of quarantine\(^8\); requesting healthcare professionals to provide medical care service, etc.\(^9\); requesting the people to refrain from going out unless it is urgent and unavoidable; requesting restrictions on the use, etc. of school buildings, entertainment establishments and other facilities\(^10\); using land, etc. for the purpose of opening temporary medical

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\(^7\) On April 3, 2003, SARS (Severe Acute Respiratory Syndrome) was designated as a new infectious disease under the Infectious Diseases Act. On July 14 of the same year, SARS was classified as a designated infectious disease because the virus, infection routes and necessary measures were identified. On October 10 of the same year, the Act to Partially Amend the Infectious Diseases Act and Quarantine Act, which was written in relation to the review of countermeasures against infectious diseases in light of developments related to SARS, was enacted. Under the act, SARS was classified as a Type I Infectious Disease for reasons such as that it poses an extremely high risk when its infectious capability, severity, etc. are comprehensively taken account. Currently, SARS is classified as a Type II Infectious Disease.

\(^8\) Article 29 of the Act on Special Measures

\(^9\) Article 31 of the Act on Special Measures

\(^10\) Article 45 of the Act on Special Measures
facilities\textsuperscript{11}; transporting emergency supplies, etc.\textsuperscript{12}; and requesting sale of specified goods, etc.\textsuperscript{13, 14}

In principle, when implementing the countermeasures, the national, prefectural and municipal governments should provide sufficient explanations to and obtain the understanding of the people on the premise that the countermeasures are based on laws and regulations.

2. The Nature of the Act on Special Measures as Crisis Management Framework

The Act on Special Measures provides an institutional framework for crisis management for unexpected events, which is designed to enable the implementation of various measures in preparation for emergencies. However, even if pandemic influenza or other infectious diseases break out, it may not always be necessary to implement emergency measures to deal with such diseases, depending on the degree of their virulence and the effectiveness of anti-influenza virus drugs or other measures. It must be kept in mind that the emergency measures need not be uniformly implemented in all emergency cases.

3. Ensuring Cooperation between Relevant Organizations

The national, prefectural and municipal headquarters for countermeasures\textsuperscript{15, 16} should implement countermeasures against PI in a comprehensive manner in close cooperation with each other.

When the head of a prefectural headquarters for countermeasures has requested the head of the national headquarters for countermeasures to implement overall coordination concerning countermeasures against PI or when the head of a municipal headquarters for countermeasures has requested the head of a prefectural headquarters for countermeasures to do so, the heads of the national headquarters for countermeasures and the prefectural headquarters for countermeasures should respect the intent of the request and quickly implement overall coordination in the respective cases when necessary.

4. Recording of the decision-making process and maintaining records

The national, prefectural and municipal governments should compile, store and

\textsuperscript{11} Article 49 of the Act on Special Measures
\textsuperscript{12} Article 54 of the Act on Special Measures
\textsuperscript{13} Article 55 of the Act on Special Measures
\textsuperscript{14} Article 5 of the Act on Special Measures
\textsuperscript{15} Article 23 of the Act on Special Measures
\textsuperscript{16} Article 34 of the Act on Special Measures
disclose records regarding the implementation of countermeasures against PI via their headquarters for countermeasures at the time of the outbreak of such disease.

II-4. Anticipated Damage, etc. in the event of an Outbreak of PI

I. Anticipated Damage in the event of an outbreak of PI

Basically, pandemic influenza is presumed to have common characteristics with seasonal influenza, including initial symptoms and routes of infection such as droplets and contact infection\textsuperscript{17}. However, in the case of a new type of highly virulent influenza derived from avian influenza (H5N1), etc., the case fatality rate is likely to be high, raising concerns over possible significant health damage.

When formulating the National Action Plan, we use figures related to the epidemic size, such as an estimated number of patients, as part of the anticipated damage in order to consider effective countermeasures. However, when considering countermeasures, it is important to keep in mind the possibility that the actual number of patients and the extent of other damage may prove to be either greater or smaller than the estimates. The influenza pandemic size will depend on many factors, including factors related to the characteristics of the disease (e.g., the virulence and infectiousness of the pandemic influenza virus, etc.), host-related factors (e.g., the immunity conditions of the people) and the social environment. In addition, the virulence of the new virus may vary from strong to weak. Therefore, it is difficult to accurately predict the epidemic size, the virulence of the virus or the timing of the outbreak.

When we formulated the National Action Plan, we made the following assumptions in light of the scientific knowledge currently available as well as data on past global influenza pandemics.

- If 25\% of the entire population is infected with pandemic influenza, around 13 million to 25 million patients\textsuperscript{18} will visit medical institutions.

- The estimated maximum numbers of hospitalizations and fatalities are around 530,000 and 170,000 million people, respectively, in the case of a medium-level influenza pandemic similar to the Asian flu pandemic, which would have a case fatality rate of 0.53\%. In the case of a severe influenza pandemic similar to the Spanish flu pandemic, which would have a case fatality rate of 2.0\%, the

\textsuperscript{17} WHO “Pandemic Influenza Preparedness and Response”: A guidance document issued by the WHO in 2009
\textsuperscript{18} Based on the estimation model of the U.S. Centers for Disease Control and Prevention, the number of visitors to medical institutions is estimated at around between 13 million and 25 million.
estimated maximum numbers of hospitalizations and fatalities are around 2 million and 640,000 people, respectively.

- On the assumption that 25% of the entire population will be infected and the pandemic will last for around eight weeks, the estimated maximum number of hospitalizations is 101,000 people per day (in the fifth week from the onset of the epidemic) in the case of a medium-level influenza pandemic and 399,000 people per day in the case of a severe influenza pandemic.
- It should be kept in mind that these estimates do not at all take into consideration the impact (effect) of the intervention of pandemic influenza vaccines or anti-pandemic influenza virus drugs, nor the current status of the medical system and sanitary conditions in Japan.
- Regarding the anticipated damage, we will continue to collect up-to-date scientific knowledge and conduct review as necessary, given the presence of various arguments and a lack of sufficient scientific knowledge.
- It is difficult to anticipate damage that may be caused by new, unknown types of infectious disease other than influenza. However, it is necessary to prepare for and respond to PI that could rapidly spread nationwide as a national crisis management measure because its social impact would be significant as in the case of pandemic influenza. As a result, such new types of infectious diseases are also covered by the Act on Special Measures. Consequently, we will consider and implement countermeasures against such new types of infectious diseases as well based on the anticipated damage in the event of an outbreak of pandemic influenza. Therefore, it is also necessary to consider how to prevent and limit airborne infection while continuing to consider how to prevent and limit droplet and contact infections as basic countermeasures in light of the knowledge so far obtained.

2. Social Impact in the Event of an Outbreak of PI

There are various arguments concerning the assumptions of the social impact of PI. The following is an example of the anticipated impact.

- 25% of the population will be infected over an eight-week epidemic period with a peak in between. Infected patients will be absent from work for around a week to 10 days. Most of the infected workers will recover (with immunity acquired) and return to their work after a while.
- During the peak period (around two weeks\(^{19}\)), a maximum of around 5% of all

\(^{19}\) The peak period is set at around two weeks under the U.S. National Strategy for pandemic influenza (Homeland
employees\(^{20}\) will be infected and absent from work. However, some workers are expected to stay at home to care for infected family members or look after children and elderly relatives (for reasons such as temporary closures of schools, nursing facilities and reduction of welfare services and at-home treatment), while other workers may stay at home because of infection worries. As a result, a maximum of around 40% of all employees may be absent from work during the peak period.

### II-5. Division of Roles for Promoting Countermeasures

#### I. Role of the National Government

In the event of an outbreak of PI, the national government is responsible for developing a robust nationwide response system by promptly implementing countermeasures in an appropriate manner and by supporting quick and appropriate implementation of countermeasures by local and designated (local) public institutions\(^{21}\).

The national government should also promote survey and research activities concerning PI and vaccine and other drugs related thereto\(^{22}\). At the same time, it should promote international cooperation related to survey and research activities concerning PI by ensuring collaboration with the World Health Organization (WHO) and other international organizations as well as countries in Asia and other regions\(^{23}\).

Before an outbreak of PI, the national government as a whole should conduct activities in a comprehensive manner under the frameworks of “a ministerial meeting on countermeasures against pandemic influenza and New Infectious Diseases” and “a meeting of relevant ministries and agencies on countermeasures against pandemic influenza and New Infectious Diseases, avian influenza, etc.” (hereinafter referred to as a “meeting of relevant ministries and agencies on countermeasures”).

Designated government agencies should determine in advance specific measures to be taken in accordance with the pandemic phases in fields under their jurisdiction.

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\(^{20}\) Around an estimated 1% of the population visited medical institutions during the peak period of the new influenza pandemic (A/H1N1) that occurred in 2009.

\(^{21}\) Article 3(1) of the Act on Special Measures

\(^{22}\) Article 3(2) of the Act on Special Measures

\(^{23}\) Article 3(3) of the Act on Special Measures
in the event of an outbreak of PI in light of the National Action Plan while maintaining cooperation with each other.

In the event of an outbreak of PI, the national government should determine a basic action policy through the national headquarters for countermeasures and strenuously implement countermeasures. When doing so, the national government should seek the opinions of academic experts, mainly those in such fields as medicine and public health.

2. Role of Local Governments

In the event of an outbreak of PI, local governments are responsible for promptly implementing countermeasures against PI related to their own regions based on the basic action policy and promoting the implementation of countermeasures against PI by relevant organizations in the regions in a comprehensive manner.

【Prefectural governments】

As prefectural governments play the central role in implementing measures based on the Act on Special Measures and the Infectious Diseases Act, they are required to make appropriate judgments and take appropriate actions to ensure the development of local medical care systems and prevent the spread of infection based on the basic action policy.

【Municipal governments】

As municipalities are administrative units that are most familiar to the people, municipal governments are required to appropriately implement countermeasures based on the basic action policy with regard to vaccination of local residents and support for their everyday life and assistance for people who need to be looked after in the event of an outbreak of PI. When implementing countermeasures, municipal governments should closely cooperate with prefectural governments and neighboring municipalities.

Under the Infectious Diseases Act, cities and special wards of Tokyo where public health centers are located are required to play a role similar to the role played by prefectural governments in ensuring the development of local medical care systems and preventing the spread of infection. Therefore, prefectural governments as well as cities and special wards where public health centers are located (hereinafter referred to as “prefectural governments, etc.”) should hold consultations.

24 Article 3(4) of the Act on Special Measures
about the development of local medical care systems so as to maintain cooperation with each other in preparation for an outbreak of PI.\textsuperscript{25}

3. Role of Medical Institutions

From the perspective of minimizing health damage caused by PI, medical institutions are required to promote measures to prevent in-hospital infection and secure medical equipment necessary for treating influenza patients in order to ensure the development of local medical care systems in preparation for an outbreak of PI. In order to ensure the provision of medical care in the event of an outbreak of PI, it is important for medical institutions to formulate plans for continuing medical treatment, including plans for systems to treat infected patients and develop a system for local collaboration concerning medical care.

Medical institutions should make efforts to provide medical care, including strengthening the system to treat patients infected with PI, in accordance with the outbreak situation based on their plan for continuing medical treatment in cooperation with other medical institutions in their regions.

4. Role of Designated (Local) Public institutions

In the event of an outbreak of PI, designated (local) public institutions are responsible for implementing countermeasures against it based on the Act on Special Measures\textsuperscript{26}.

5. Registered Business Operators

It is important that business operators providing medical care services or conducting operations that contribute to the stability of the daily lives of the people and the national economy, which are eligible for the prior vaccination as specified in Article 28 of the Act on Special Measures, proactively make preparations for implementing infection control measures in workplaces and continuing important

\textsuperscript{25} In normal times, it is necessary to implement the following measures:
- When making decisions on matters related to other local governments at the time of the formulation of prefectural action plans, prefectural governments should make sure to implement the cooperative measures prescribed in the Act on Special Measures, including seeking the opinions of the heads of other local governments (Article 7(3) of the Act on Special Measures).
- There are measures to be jointly taken by prefectural governments and cities, etc. in relevant prefectures where public health centers are located other than the measures prescribed by the Act on Special Measures. For example, when providing a forum for seeking the opinions of academic experts in advance (Article 7(8) of the Act on Special Measures) at the time of the formulation of prefectural action plans, representatives from municipalities may be invited to participate.
- Prefectural governments, etc. should conduct joint exercises with other local governments, including cities, etc. in relevant prefectures where public health centers are located (Article 12(1) of the Act on Special Measures).

\textsuperscript{26} Article 3(5) of the Act on Special Measures
business operations in preparation for an outbreak of PI so that they can perform their respective social missions from the perspective of maintaining a minimum necessary standard of life for the people in the event of an outbreak. In the event of an outbreak, such business operators should make efforts to continue those activities.\textsuperscript{27}

6. Ordinary Business Operators

Business operators are required to implement infection control measures in workplaces in preparation for an outbreak of PI. In the event of an outbreak of PI which could cause serious damage to the lives and health of a large number of people, they are required to scale back some business operations from the perspective of preventing infection. In particular, business operators which conduct business operations that draw a large number of people are required to implement thorough measures to prevent infection.\textsuperscript{28}

7. People

In preparation for an outbreak of PI, individual persons should take infection control measures that are implemented against seasonal influenzas, such as wearing a mask,\textsuperscript{29} following “cough etiquette”, washing hands and gargling,\textsuperscript{30} in addition to acquiring knowledge concerning countermeasures to be taken in the event of an outbreak of PI. Individual persons should also stockpile food and necessities in preparation for the outbreak.

In the event of an outbreak of PI, individual persons should obtain information concerning the epidemic phase as well as vaccinations and other countermeasures being implemented and implement infection control measures.\textsuperscript{31}

II-6. Six Major Items of the National Action Plan

The National Action Plan prescribes specific measures to carry out the strategy for achieving the two major purposes of the plan — limiting the spread of infection as

\textsuperscript{27} Article 4(3) of the Act on Special Measures
\textsuperscript{28} Article 4(1) and (2) of the Act on Special Measures
\textsuperscript{29} Patients can reduce the risk of, and opportunity for, infection to other people by wearing a mask. As for the prevention of infection from other people, it has been reported that wearing a mask, if combined with washing hands, is effective to a certain degree as a preventive measure. However, there is both support for and opposition to the theory that it is effective in preventing influenza infection and there is not yet a solid scientific basis for the effectiveness.
\textsuperscript{30} Regarding gargling, although it has been reported that it is effective in preventing respiratory tract infections such as colds, there is not yet a solid scientific basis for its effectiveness in preventing influenza infection.
\textsuperscript{31} Article 4(1) of the Act on Special Measures
much as possible to protect the lives and health of the people and minimizing the impact on the daily lives of the people and the national economy — with regard to the following six items: “(1) implementation system, (2) surveillance and information gathering, (3) communication, (4) infection prevention/preventing infection from spreading32, (5) medical care and (6) ensuring of the stability of the daily lives of the people and the national economy. Countermeasures regarding each item will be described in relation to the pandemic phases. Cross-cutting points to note are as follows:

(1) Implementation System

PI, if it is highly virulent and infectious, could not only cause significant damage to the lives and health of the people but also reduce and stall economic activities, so it is necessary to prepare for and respond to it as a national crisis management challenge. Therefore, the national and local governments and business operators should cooperate with each other in preparing for and responding to it.

Before an outbreak of PI, the progress in preparations should be checked through the frameworks of a ministerial meeting on countermeasures against PI and a meeting of relevant ministries and agencies on countermeasures and the government as a whole should conduct activities while maintaining cooperation between relevant ministries and agencies. Moreover, relevant ministries and agencies, such as the Cabinet Secretariat and the Ministry of Health, Labour and Welfare, should strengthen cooperation with local governments and business operators and proceed with preparations for an outbreak.

In the event of an outbreak of PI, in order for the government as a whole to strenuously promote the implementation of countermeasures, the establishment of the national headquarters for countermeasures (headed by the Prime Minister), comprised of the Prime Minister and all other ministers, should be quickly approved by the Cabinet, be reported to the Diet, and be publicly announced. Depending on the circumstances, a local headquarters for countermeasures against PI (hereinafter referred to as the “national onsite headquarters for countermeasures”) should also be established. Moreover, when an outbreak of PI which could cause serious damage to the lives and health of the people occurs in Japan and it is recognized that rapid and nationwide spread of the epidemic could produce a significant impact on the daily lives of the people and the national economy, a declaration of an emergency

32 In the case of influenza, “preventing infection from spreading” means delaying the peak period as much as possible and reducing the number of patients during the peak period, as it is impossible to completely prevent infection from expanding in light of the characteristics of the disease (presence of latent infection, infectious capability, etc.).
situation regarding PI (hereinafter referred to as a “declaration of emergency”33 should be issued and necessary measures should be implemented based on the Act on Special Measures.

As countermeasures against PI require professional knowledge in a broad range of fields, the national government should seek the opinions of the Panel of Experts on Countermeasures against PI which is comprised of experts in a wide range of fields, including medicine and public health, in preparation for an outbreak of PI when formulating the National Action Plan. The Ministry of Health, Labour and Welfare should seek the opinions of academic experts in the fields of medicine and public health who are members of the Panel of Experts on Countermeasures against PI as necessary with regard to expert matters related to risk assessment, etc. In the event of an outbreak of PI, in order to ensure quick response, the national onsite headquarters for countermeasures should seek the opinions of the Advisory Committee on Basic Action Policies, which is under the Panel of Experts on Countermeasures against PI and which is comprised mainly of academic experts in the fields of medicine and public health, so as to ensure reasonableness from the perspective of medicine and public health. The national onsite headquarters for countermeasures should also ensure social reasonableness and reasonableness from the perspective of policy implementation by seeking the opinions of academic experts in the fields of law and crisis management who are members of the Panel of Experts on Countermeasures against PI as necessary. Prefectural and municipal governments are also required to seek the opinions of academic experts in the fields of medicine and public health when formulating their action plans. In the event of an outbreak, they are required to seek the opinions of such experts as appropriate in a timely manner.

(Guidelines for specific initial actions should be determined at a meeting of relevant ministries and agencies on countermeasures.)

33 A declaration of an emergency situation regarding pandemic influenza and new infectious diseases is required to announce the period for the implementation of emergency measures and the emergency area. Emergency measures to be implemented will be separately determined one by one for implementation during the period of the declaration of emergency and within the emergency area.)
Implementation System of the National Government (before an outbreak)

Ministerial meeting on countermeasures against pandemic influenza and New Infectious Diseases

- Prime Minister (host of the meeting)
- All other ministers

Seek opinions
Provide expert opinions

Panel of Experts on Countermeasures against Pandemic Influenza and New Infectious Diseases

Meeting of relevant ministries and agencies on countermeasures

Cabinet Secretariat

- Important matters (Matters related to multiple ministries and agencies)
- Important matters (Matters related to multiple ministries and agencies)

Ministry of Health, Labour and Welfare

Relevant ministries and agencies

Implementation System of the National Government (after an outbreak)

National headquarters for countermeasures against new influenza and New Infectious Diseases

- Prime Minister (head of the headquarters)
- Chief Cabinet Secretary, Minister of Health, Labour and Welfare, etc. (deputy heads of the headquarters)
- All other ministers

Seek opinions
Provide expert opinions

Advisory Committee on Basic Action Policies

Meeting of senior members of the national headquarters

Local headquarters for countermeasures against new influenza, etc.

Cabinet Secretariat

- Important matters (Matters related to multiple ministries and agencies)
- Important matters (Matters related to multiple ministries and agencies)

Ministry of Health, Labour and Welfare

Relevant ministries and agencies

Cooperation

Local governments

Cooperation

Designated (local) public institutions

Cooperation

Local governments

Cooperation

Designated (local) public institutions
(2) Surveillance and Information Gathering

In order to appropriately implement countermeasures against PI in a timely manner, it is important in each phase to gather various information concerning the disease from within and outside Japan, analyze it in a systematic manner and make judgment based on the analysis results. It is also important to enable the formulation of effective countermeasures by quickly and periodically feeding back the surveillance results to relevant parties.

As Japan is not conducting surveillance concerning new, unknown infectious diseases, at the moment, only measures related to pandemic influenza are described with regard to this item. However, in the event of an outbreak of a new infectious disease, Japan will cooperate with the WHO and other international organizations in raising awareness about the definition of symptoms and establish a diagnosis method at an early time so as to develop a domestic surveillance system.

As long as the number of domestic patients is small, the range of information available will be limited. Therefore, it is necessary to proactively gather and analyze information in order to strengthen the surveillance system to assess the total number of patients and grasp the clinical features of patients.

When the number of domestic patients has increased and information concerning clinical features of patients has been accumulated, the significance of assessing the total number of cases will decline. Assessing the total number of cases will also impose an excessive burden on local governments and medical institutions. Therefore, emphasis should shift to gathering information concerning hospitalizations and fatalities.

Information obtained through surveillance, such as the size and the timing of the onset of the epidemic should be utilized to ensure the development of medical care systems. In addition, information concerning the characteristics of viruses that cause regional epidemics (e.g., subtypes of influenza viruses and drug resistance) and the status of severe cases, including fatalities, should be utilized for treatment at medical institutions.

In addition, surveillance should be conducted on influenza viruses that infect birds and pigs so as to grasp influenza epidemics among these species.

(3) Communication

(A) Purpose of Communication

In order for the national and local governments, medical institutions, business operators and individual persons to recognize their respective roles and take
appropriate actions based on sufficient information under the consensus that preparing for and responding to pandemic influenza is a challenge critical to national crisis management, it is essential that all of them maintain communications with each other. It should be kept in mind that as communication is a two-way process, it includes not only unilaterally providing information but also sharing information and grasping the response of information recipients.

(B) Securing Various Information Media

The means and ways of receiving information vary from person to person. It is important to provide information to the people in an easy-to-understand manner as quickly as possible through a wide variety of information media, including the Internet, so as to suit the needs of people who may have difficulty obtaining information, such as non-Japanese people and disabled people.

(C) Provision of Information to the People before an Outbreak

In addition to providing information at the time of an influenza pandemic emergency, it is important to provide information concerning the prevention of an outbreak of PI, spread of infection and the results of various investigations and researches to the people, medical institutions and business operators before the outbreak. To ensure that the people can take appropriate actions in the event of an outbreak, it is essential to raise awareness and seek understanding about countermeasures against PI through the provision of appropriate information. As schools are liable to become sources of infection expansion through mass infection, it is necessary to provide school children in particular with information concerning infectious diseases and public health in a conscientious manner in cooperation with health and sanitary departments of local governments and education boards.

(D) Communication with the People in the Event of an Outbreak

(i) Provision of information in the event of an outbreak

In the event of an outbreak of PI, it is important to quickly provide information regarding the outbreak situations in Japan and abroad and the implementation of countermeasures in an easy-to-understand manner with due respect for patients’ human rights while making clear the decision-making process concerning countermeasures (e.g., what factors have been taken into consideration based on scientific knowledge when making the decision), the reason for the implementation of countermeasures and the implementing entity.
Among information media, television, newspapers and other mass media play a particularly important role in providing information to the people, so it is essential to obtain their cooperation. When providing information, it is important to give due consideration to protecting personal information and serving public interests. In addition, when inaccurate or false information has been provided, a notice of denial should be issued each time with due consideration given to the damage that may be caused by such information.

The means and ways of receiving information vary from person to person. It is important to provide information to the people in an easy-to-understand manner as quickly as possible through a wide variety of information media so as to suit the needs of people who may have difficulty obtaining information.

In addition to those information media, web sites and social network services (SNS) should also be used as a means for the government to directly provide information to the people.

Moreover, it is important to remind the people that anyone may be infected by PI (that patients and other relevant people do not bear responsibility for infection) and that countermeasures taken by individual persons significantly contribute to the implementation of countermeasures at the national level and ensure the sharing of awareness about these points before an outbreak.

(ii) Improving the People’s Access to Information

To improve the people’s access to information, web sites where information from relevant ministries, agencies and designated public institutions are put under centralized control for public viewing should be opened as necessary.

(E) System for Provision of Information

When providing information, it is essential to ensure central control of the contents of information to be provided, so a system for centralized control and dissemination of information should be established. A communication team comprised mainly of members of the national headquarters for countermeasures and public relations officials of the Ministry of Health, Labour and Welfare should be established so as to ensure appropriate and timely sharing of information among communication officers. When ministries and agencies responsible for implementing countermeasures provide information, the national headquarters for

\[34\] With regard to mass media, particular care should be taken to ensure the freedom of expression, including freedom of speech.
countermeasures should do coordination work so as to ensure appropriate provision of information.

When the national headquarters for countermeasures and the information provision team of the Ministry of Health, Labour and Welfare are established, it may be an option to include members of the Advisory Committee on Basic Action Policies so as to enable the three organizations to work together.

It is also important that information be disseminated by suitable persons and entities in accordance with the contents. In addition, given that communication is a two-way process, it is important not only to secure means of providing explanations to ease local residents’ concerns but also to analyze the response of information recipients so that analysis feedback can be used when providing information next time.

(4) Infection Prevention/Preventing Infection from Spreading

(A) Purpose of Infection Prevention/Preventing Infection from Spreading

Regarding the prevention of the spread of PI, delaying the epidemic peak as much as possible will lead to securing the time to develop a response system. It will also help to reduce the number of hospital visits during the peak period and minimize hospitalizations, thereby limiting the epidemic to a scale that can be managed by available medical care systems.

Multiple layers of countermeasures should be implemented in combination, including measures to be taken at the personal and local levels and in workplaces as well as preventive vaccination. Given that the implementation of countermeasures could limit individual persons’ activities and affect economic activities, measures to be implemented should be decided and ongoing measures may be scaled back or discontinued in light of their effects and impacts and in accordance with information concerning the virulence and infectiousness of the PI and changes in the outbreak situation.

(B) Major Measures to Prevent Spread of Infection

As for measures to be taken at the personal level, starting in the early phase of a domestic epidemic, the national government and other organizations should take measures based on the Infectious Diseases Act, such as hospitalization of patients infected with PI and obtaining the cooperation of people who have had close contacts with patients (observing their health conditions and requesting them to refrain from going out), including those living together with patients. In addition,
they should encourage the people to implement basic infection control measures, such as wearing a mask, following “cough etiquette”, washing hands and gargling, and avoiding going to crowded places. In the event of a PI emergency, the national government and other organizations should as necessary request the people to refrain from going out unless it is urgent and unavoidable.

As for countermeasures to be taken at the local level and in workplaces, starting in the early phase of a domestic epidemic, relevant organizations should strengthen measures being implemented to deal with seasonal influenza, such as thorough infection control in workplaces, in addition to measures taken by individuals. In the event of a pandemic influenza and New Infectious Diseases emergency, they should request restrictions on the use of facilities as necessary.

In the event of an overseas outbreak, the government will issue alerts against infection risk in accordance with the epidemic phase and implement border control measures, including visa-related measures (toughening visa screening and stopping issuing visas), gathering information concerning port entry of foreign vessels with the cooperation of port managers, strengthening immigrant quarantine (isolating entrants and restricting of activities), concentrating quarantine activities at some airports and ports and requesting voluntary restrictions on flights and voyages. As infectious diseases have incubation periods and there is the risk of latent infection, it is difficult to completely prevent the entry of infected people into Japan, so it will be necessary to develop a response system in preparation for domestic infection.

(C) Vaccination

i) Vaccines

The impact of PI on human health and social and economic activities can be minimized if hospital visits are reduced and the number of severe cases is curbed, thereby limiting the epidemic to a scale that can be managed by available medical care systems, by preventing individual persons from developing symptoms and becoming seriously ill through vaccination.

Vaccines used in relation to countermeasures against pandemic influenza can be classified into pre-pandemic vaccines and pandemic vaccines, which may be manufactured from different influenza strains and in different pandemic phases. As it may be difficult to develop vaccines against other new infectious diseases, we mention only vaccines against pandemic influenza here.

It is necessary to promote clinical research concerning the effectiveness and safety of processed pre-pandemic vaccines in light of up-to-date epidemic trends in
order to facilitate studies on effective methods of administering pre-pandemic vaccines in the event of an outbreak of new influenza.

ii) Prior vaccination

ii)-1) Prior vaccination

Prior vaccination is implemented based on Article 28 of the Act on Special Measures in order to “ensure the provision of medical care and the stability of the daily lives of the people and the national economy.” It refers to vaccination implemented as a temporary measure when the head of the national headquarters for countermeasures recognizes an immediate need for vaccination.

People who may be eligible for prior vaccination include:

(i) Persons who work for business operators providing medical care or conducting operations that contribute to the stability of the daily lives of the people and the national economy and who are registered with the Minister of Health, Labour and Welfare as specified therein (hereinafter referred to as "registered business operators") and who engage in those operations (limited to persons who meet the criteria specified by the Minister of Health, Labour and Welfare)

(ii) National public servants engaging in the implementation of countermeasures against PI

(iii) Local public servants engaging in the implementation of countermeasures against PI

Given that prior vaccination is in principle implemented before vaccination of ordinary people, the criteria for eligibility for it must include the possession of a highly public nature under the Act on Special Measures so that the public’s understanding can be obtained.

Regarding “business operators conducting operations that contribute to the stability of the daily lives of the people and the national economy,” business operators that may be recognized as possessing a highly public nature are those which are designated as bearing similar responsibility for implementing countermeasures against PI to the responsibility of the national and local governments under a designated (local) public institution system. Categories of business operations eligible for prior vaccination will be determined mainly on the basis of this system. Specifically, business operators that may be recognized as

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35 It is not that vaccination of the people (which refers to the preventive vaccination of the people based on Article 46 of the Act on Special Measures and the new temporary vaccination based on Article 6(3) of the Preventive Vaccinations Act) cannot start until prior vaccination is completed.
possessing a highly public nature under the Act on Special Measures include those selected as designated (local) public operators, those engaging in similar business operations or involved in the management of social infrastructures recognized to have a similar public nature and nursing and welfare service providers, which may have critical implications for the people’s lives.

In addition, from the perspective of maintaining food supplies necessary for preserving the daily lives of the people, food producers and retailers will be added to the list of registered business operators which may be eligible for prior vaccination as a special measure, although this has no relation to the designated public institution system.

Based on this basic approach, registered business operators and public servants who may be eligible for prior vaccination are as shown in the attachment.

At the time of prior vaccination, (i) healthcare professionals, (ii) public servants involved in implementation of countermeasures against PI, (iii) business operators selected mainly on the basis of the designated public institution system (including nursing and welfare service providers) and (iv) others business operators should be vaccinated in that order in principle on the basis of the level of public nature.

Although the above basic approach has been formed in advance, flexible action suited to the situation of the time is necessary for crisis management. Therefore, decisions should be made with regard to the total number of vaccinations, the range of people eligible for vaccination, the priority order of vaccination and other relevant matters based on judgment made by the national headquarters for countermeasures by taking comprehensive account of the opinions of the Advisory Committee on Basic Action Policies with regard to the characteristics of PI, such as its virulence and the social situation of the time.

Regarding prior vaccination, if a stockpiled pre-pandemic vaccine is effective, it may be used. In cases where the pandemic influenza is not H5N1 or where the

36 (i) Healthcare professionals: persons who meet the criteria “A1: pandemic influenza medical care type” and “A2 severe emergency medical care type” specified in attachment (1)
37 (ii) Public servants involved in the implementation of countermeasures against PI: public servants who fall under Categories 1 and 2 specified in attachment (2). Public servants who fall under Category 3 (similar operations to the operations of private business operators) specified in (2) should be given the same priority in the order of vaccination as registered private business operators which conduct similar operations. Public servants engaging in waterworks operation, river management, irrigation water supply, industrial water supply, maintenance and management of sewage treatment facilities and maintenance and management of sewage pipe facilities specified in (2) should be classified as Group (iii).
38 (iii) Business operators selected mainly on the basis of the designated public institution system: business operators which meet the criteria “B-1: nursing care and welfare type,” “B-2: designated public institution type,” “B-3: quasi-designated public institution type” and “B-4: social infrastructure type” specified in attachment (1)
39 (iv) Other business operators: business operators which meet the criteria “B-5: other registered business operators” specified in attachment (1).
40 It is not that vaccination of the next group cannot start until vaccination of the previous group is completed.
vaccine is not highly effective even if the influenza is a subtype of H5N1, a pandemic influenza vaccine should be used.

ii-2) Vaccination system for prior vaccination

With regard to registered business operators which may be eligible for prior vaccination and national public servants engaging in implementation of countermeasures against PI, prior vaccination will be in principle implemented as a group vaccination by the national government. With regard to local public servants engaging in implementation of countermeasures against PI, prior vaccination will be in principle implemented as a group vaccination by relevant prefectural and municipal governments. Therefore, in order to ensure smooth vaccination, it is necessary to establish a vaccination system in the pre-outbreak phase. With regard to registered business operators in the field of stabilizing the daily lives of the people and the national economy in particular, establishment of a vaccination system of their own will be one of the criteria for registration.

iii) Vaccination of ordinary people

iii-1) Vaccination of the people

As the Act on Special Measures has established a framework for preventive vaccination of ordinary people as a pandemic influenza emergency measure, the preventive vaccination as specified under Article 6(1) of the Preventive Vaccinations Act (temporary preventive vaccination) should be implemented based on Article 46 of the Act on Special Measures if a declaration of emergency has been issued.

If a declaration of emergency has not been issued, the preventive vaccination as specified under Article 6(3) of the Preventive Vaccinations Act (new temporary vaccination) should be implemented.

As for the priority order of vaccination of ordinary people, people will be divided into the following four categories and the priority order of vaccination will be in principle decided in accordance with the situation of the time. Although the following basic approach has been formed in advance, flexible action is necessary in a situation where a declaration of emergency has been issued. Therefore, the decision will be made in light of information concerning such matters as the virulence of the PI.

People eligible for vaccination other than those eligible for prior vaccination will be in principle divided into the following four categories.
(i) People at high medical risk: People who are deemed to be at high risk of developing a severe case, such as those suffering from respiratory or cardiovascular problems
   • People suffering from underlying diseases
   • Pregnant women

(ii) Children (including parents of infants aged less than one year old and of children who cannot be vaccinated for physiological reasons)

(iii) Adults/youth

(iv) Elderly people: people in age groups deemed to be at high risk of developing a severe case (people aged 65 or older)

Regarding the order of vaccination, priority may be placed on minimizing the number of severe cases and fatalities. However, when a declaration of emergency has been issued, priority may be placed on protecting the future of Japan, or on striking a balance between minimizing the number of severe cases and fatalities and protecting the future of Japan if the possible long-term impact on the daily lives of the people and the national economy is taken into consideration. Therefore, the decision will be made according to the following basic approaches.

1) Approach of placing emphasis on minimizing the number of severe cases and fatalities
   • In the case of pandemic influenza which tends to cause severe cases particularly among adults/youth:
     (It is assumed that people at high medical risk, adults/youth, children and elderly people are likely to develop a severe case in that order)
     (i) people at high medical risk; (ii) adults/youth; (iii) children; (iv) elderly people
   • In the case of pandemic influenza which tends to cause severe cases particularly among elderly people
     (It is assumed that people at high medical risk, elderly people, children and adults/youth are likely to develop a severe case in that order.)
     (i) people at high medical risk; (ii) elderly people; (iii) children (iv) adults/youth
   • In the case of pandemic influenza which tends to cause severe cases particularly among children:
     (It is assumed that people at high medical risk, children, elderly people and

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41 People who stay in a hospital or who visit a hospital because of underlying diseases. The criteria for such people will be indicated in the event of an outbreak in reference to the “Guidelines for the Criteria of Underlying Diseases Eligible for Prior Vaccination of Pandemic Influenza Vaccine,” which was prepared at the time of the pandemic of 2009, and in light of the clinical features of the pandemic influenza.
adults/youth are likely to develop a severe case in that order)
(i) People at high medical risk; (ii) children; (iii) elderly people (iv) adults/youth

2) Approach of placing emphasis on protecting the future of Japan
   • In the case of pandemic influenza that tends to cause severe cases particularly among adults/youth
     (It is assumed that people at high medical risk, adults/youth and elderly people are likely to develop a severe case in that order)
     (i) Children; (ii) people at high medical risk; (iii) adults/youth; (iv) elderly people
   • In the case of pandemic influenza that tends to cause severe cases particularly among elderly people
     (It is assumed that people at high medical risk, elderly people and adults/youth are likely to develop a severe case in that order)
     (i) Children; (ii) people at high medical risk; (iii) elderly people; (iv) adults/youth

3) Approach of striking a balance between minimizing the number of severe cases and fatalities and protecting the future of Japan
   • In the case of pandemic influenza that tends to cause severe cases particularly among adults/youth
     (It is assumed that adults/youth and elderly people are likely to develop a severe case in that order)
     (i) people at high medical risk; (ii) children; (iii) adults/youth; (iv) elderly people
   • In the case of pandemic influenza that tends to cause severe cases particularly among elderly people
     (It is assumed that elderly people and adults/youth are likely to develop a severe case in that order)
     (i) people at high medical risk; (ii) children; (iii) elderly people; (iv) adults/youth

iii-2) Vaccination System for Vaccination of the People
       Vaccination of the people will be implemented as a group vaccination in principle by municipal governments. Therefore, in order to ensure smooth vaccination, it is necessary to establish a vaccination system.

iv) Points to Note
How to implement two categories of preventive vaccination — prior vaccination and vaccination of the people — in a crisis management situation should be decided by the national headquarters for countermeasures by taking comprehensive account of the opinions of the Advisory Committee on Basic Action Policies with regard to the characteristics of the pandemic influenza such as its virulence and the status of the provision of medical care as well as the daily lives of the people and the national economy of the time.

v) Requests for healthcare professionals

The national and prefectural governments should issue requests or orders (hereinafter referred to as “requests, etc.”) for healthcare professionals to provide necessary cooperation when they recognize the need to do so for implementation of preventive vaccination.

(5) Medical Care

(A) Purpose of Medical Care

If an outbreak of PI occurs, it could rapidly spread nationwide and have a serious impact on the lives and health of the people. Therefore, the provision of medical care is essential to achieving the purpose of minimizing health damage. Minimizing health damage will lead to minimizing the impact on social and economic activities as well.

When PI has spread on a large scale, the number of patients is expected to increase considerably. However, as local medical resources (healthcare professionals, hospital beds, etc.) are limited, it is important to make advance planning of a system for providing medical care in an efficient and effective manner. In particular, when developing a local medical care system, it is necessary to conduct a sufficient study and gather information with regard to specific support for medical institutions and personnel, including designated (local) public institutions which are responsible for providing medical care in the event of an outbreak of PI and medical institutions which are registered business operators eligible for prior vaccination.

(B) Pre-Outbreak Development of Medical Care Systems

It is important that prefectural governments, etc. promote the development of medical care systems — with secondary medical care areas as a unit — which are

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42 Article 31(2) and (3) and Article 46(6) of the Act on Special Measures
suited to the local circumstances, including the establishment of task forces on countermeasures, which will be comprised of representatives from medical institutions, including public health centers, local medical associations, the core local medical institutions (hospitals under the National Hospital Organization, university-affiliated hospitals, public hospitals, etc.), pharmacies, municipal governments and firefighting and disaster management authorities, while closely cooperating with relevant local officials. They should also prepare for the establishment of outpatient departments for those who show febrile and respiratory symptoms after returning from foreign countries where an outbreak of influenza has been confirmed and those who show febrile and respiratory symptoms after having close contact with patients (hereinafter referred to as “dedicated outpatient departments”) by compiling a list of medical institutions and public facilities where the departments are to be established. It is also important for them to prepare for the establishment of consultation centers for such people (hereinafter referred to as “dedicated consultation centers”).

(C) Maintaining Medical Care Systems in the Event of an Outbreak

In the early phase of a domestic outbreak of PI, the provision of medical care, together with treatment of patients, may be effective as an infection control measure. Therefore, unless the virulence of the PI is found to be mild, patients infected with it should be in principle hospitalized at medical institutions designated for treatment of infectious diseases based on the Act on Special Measures. Therefore, at the local level, advance planning of the utilization of infectious disease beds is necessary. In addition, in the early phase of a domestic outbreak, information concerning clinical features of the PI will be limited, so it is necessary to quickly feed back information useful for diagnosis and treatment of the PI to medical institutions by making the most of information obtained through surveillance.

Before infection of PI, spreads in Japan, diagnosis and treatment of people who have returned from countries where an outbreak of influenza has been confirmed and people who have had close contacts with patients in Japan should be conducted at dedicated outpatient departments, as they are more likely than other people to have been infected. "However, the possibility should be kept in mind that such people may visit medical institutions which do not have dedicated outpatient departments. Therefore, medical institutions, including those which do not have dedicated outpatient departments, should make efforts to prevent in-hospital infection by devising ways of isolating people who are likely to have been infected.
from other patients.

Healthcare professionals should use personal protective equipment, such as masks and gowns, manage their own health conditions and receive vaccination. When they have had contact with patients without taking sufficient protective measures, they should take an anti-influenza virus drug as necessary as a preventive measure. Moreover, consultation centers for people who have returned from abroad and people who have had close contact with infected patients should be established and awareness thereof should be raised. With regard to local medical care systems, including dedicated outpatient departments and dedicated consultation centers, should provide information, in addition to information provided through general public relations activities.

When the situation has become such that infected patients visit medical institutions which do not have dedicated outpatient departments, there should be a shift from the system in which influenza patients are handled by dedicated outpatient departments to the system in which they are handled by general medical institutions (all institutions that routinely handle infectious diseases, including internal medicine hospitals and children’s hospitals). In order to ensure that a surge in the number of patients can be dealt with, an appropriate medical care system should be secured by dividing the treatment of patients into hospitalization of severe cases and at-home treatment of mild cases.

In this respect, at the local level, advance planning of the utilization of medical institutions is necessary so as to make it possible to hospitalize patients at medical institutions other than those designated for treatment of infectious diseases and at temporary medical facilities. It is also important to develop a system for supporting at-home treatment.

When promoting countermeasures against PI in the field of medical care, it is essential to promptly share information with medical institutions actually implementing countermeasures. Therefore, it is important not only to maintain cooperation with medical institutions through local governments but also to utilize networks of relevant organizations, such as the Japan Medical Association, local medical associations and academic associations.

(D) Requests, Orders and Compensation for Healthcare Professionals

When recognizing the need to provide medical care to patients infected with PI, prefectural governors may issue requests, etc. for healthcare professionals specified
by relevant cabinet orders, such as doctors and nurses, to do so\(^\text{43}\).

Prefectural governments, in cooperation with the national government, should compensate healthcare professionals who provide medical care in response to requests, etc. for the actual cost incurred in accordance with the standards prescribed by the cabinet orders\(^\text{44}\). When healthcare professionals who responded to requests, etc. for the provision of medical care have suffered damage, compensation should be paid to them or, if they are deceased, to their bereaved families or dependents, as prescribed by the cabinet orders\(^\text{45}\).

(E) Anti-Influenza Virus Drugs

i) Stockpiling of anti-influenza virus drugs

(i) In light of the status of stockpiling in other countries and up-to-date scientific knowledge, Japan should continue to stockpile anti-influenza virus drugs in a systematic and stable manner with the aim of securing a sufficient amount of supplies to treat 45\% of the entire population. When stockpiling the drugs, the government should also take into consideration the current status of stockpiling and distribution.

(ii) Some strains of influenza virus may be resistant to oseltamivir phosphate (product name: Tamiflu), which accounts for a large portion of the stockpiled drugs. Therefore, when increasing or replacing stockpiles in the future, it is necessary to consider increasing the proportion of other drugs in light of how often resistant strains of influenza virus are detected and how the existing drugs are actually being used.

(6) Ensuring the Stability of the Daily Lives of the People and the National Economy

Pandemic influenza is assumed to infect a large number of people and last around eight weeks in each region. In addition, if many people are infected or if they have to care for infected family members, it could have a significant impact on the people’s life and cause the national economy to stagnate.

Therefore, in order to minimize the impact on the daily lives of the people and the national economy, it is important that the national and local governments, medical institutions, designated (local) public institutions and registered business operators make sufficient advance preparations based on the Act on Special Measures and that ordinary business operators also make advance preparations.

\(^{43}\) Article 31 of the Act on Special Measures
\(^{44}\) Article 62(2) of the Act on Special Measures
\(^{45}\) Article 63 of the Act on Special Measures
II-7. Pandemic Phases

Different pandemic phases require the implementation of different countermeasures. Therefore, in order to make it possible to quickly make decisions in accordance with changes in the situation by making advance preparations, it is necessary to classify the pandemic period into several phases and determine in advance what measures should be taken in each phase.

The National Action Plan classified the pandemic period into five phases – the pre-outbreak phase (before an outbreak of pandemic influenza), the overseas outbreak phase, the early phase of domestic outbreak, the domestic pandemic phase and the remission phase – in line with the strategy suited to the circumstances of Japan. Pandemic phase re-designation for the entire country will be decided by the national headquarters for countermeasures in light of such information as phase re-designation by the WHO and the outbreak situations in Japan and abroad.

The outbreak situation will vary from region to region, so it is necessary to take flexible action in accordance with the situation of each region, particularly with regard to the provision of medical care and the implementation of infection control measures at the local level. Therefore, it is important to determine the pandemic phase for each region, and with regard to local phase re-designation, prefectural governments should make decisions after consulting with the national government as necessary. They should also announce the pandemic phase of their regions.

The national and local governments and other relevant institutions should implement countermeasures prescribed by the action plan in accordance with the phases.

It should be kept in mind that a phase may be very short, that the pandemic may not necessarily unfold in the assumed order of the phases and that when a declaration of emergency has been issued, countermeasures may be revised.
### Pandemic phases

<table>
<thead>
<tr>
<th>Pandemic Phase</th>
<th>Description</th>
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<tbody>
<tr>
<td>Pre-outbreak phase</td>
<td>An outbreak of pandemic influenza has not occurred in Japan.</td>
</tr>
<tr>
<td>Overseas outbreak phase</td>
<td>An outbreak of pandemic influenza has occurred abroad.</td>
</tr>
<tr>
<td>Early phase of a domestic outbreak</td>
<td>While human cases of pandemic influenza infection have occurred in some prefecture or other, it is possible to trace the history of contacts of all patients through epidemiological surveys.</td>
</tr>
<tr>
<td>Domestic pandemic phase</td>
<td>In some prefecture or other, the situation has become such that it is impossible to trace the history of contacts of influenza patients through epidemiological surveys.</td>
</tr>
<tr>
<td>Remission phase</td>
<td>The number of human cases of pandemic influenza is at a low level and is decreasing.</td>
</tr>
</tbody>
</table>

*Increase in infection – spread of infection – decrease in the number of patients*
As the status of infection will vary from region to region, the designation of the local pandemic phase from the pre-local outbreak phase to the early phase of a local outbreak and from the early phase of a local outbreak to the local pandemic phase should be decided on a prefecture-by-prefecture basis.

Matching table of the phases of pandemic influenza under the National Action Plan and the WHO pandemic influenza phases

<table>
<thead>
<tr>
<th>National Action Plan</th>
<th>WHO pandemic phases</th>
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</thead>
<tbody>
<tr>
<td>Pre-outbreak phase</td>
<td>Phases 1, 2 and 3</td>
</tr>
<tr>
<td>Overseas outbreak phase</td>
<td>Phases 4, 5 and 6</td>
</tr>
<tr>
<td>Early phase of a domestic outbreak</td>
<td></td>
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<tr>
<td>Domestic pandemic phase</td>
<td></td>
</tr>
<tr>
<td>Remission phase</td>
<td>Post-pandemic phase</td>
</tr>
</tbody>
</table>
III. Countermeasures to Be Taken in Each Phase

Described below are the objectives, the approach to countermeasures, and specific countermeasures to be taken with regard to the six major items in each phase.

In the event of an outbreak of PI, the national government should formulate the basic action policy. Because the timing of the implementation of specific measures may not necessarily coincide with the timing of a phase change and also because a different situation from the one initially expected may arise, phases should be regarded only as guidance and necessary measures should be selected and implemented in a flexible manner.

The methods of deciding the timing of implementing, scaling back and discontinuing countermeasures should be prescribed in guidelines, etc. as necessary.
Pre-outbreak phase

- An outbreak of PI has not occurred.
- Although human cases of infection with avian and other animal influenza are occurring intermittently, sustained human-to-human transmission has not been observed.

Objectives:
1) Develop necessary systems in preparation for an outbreak.
2) Confirm an outbreak at an early time through international cooperation.

Approach to countermeasures:
1) As it is difficult to predict when an outbreak of PI will occur, it is important to remain alert and maintain cooperation with local governments, etc. in accordance with the National Action Plan so as to promote advance preparations, including developing response systems, conducting exercises and training personnel.
2) In the event of an outbreak of PI, it is important to provide information continuously so as to ensure nationwide awareness.
3) In order to detect the occurrence of an outbreak of pandemic influenza abroad, etc., it is important to maintain international cooperation, continuously gather information, and keep surveillance on animals.
4) It is important to provide cooperation and support for countries where outbreaks of avian or other animal influenza frequently occur because that may help to prevent an outbreak of pandemic influenza among humans abroad.

(1) Implementation System

(1)-1 Formulation of a national action plan, etc.
   The national, prefectural and municipal governments as well as designated (local) public institutions should formulate action plans and operational plans based on the provisions of the Act on Special Measures in preparation for an outbreak and make revisions as necessary. (Cabinet Secretariat and all other ministries and agencies)

(1)-2 Development of necessary systems and enhancement of cooperation with and between local governments
   (i) The national government should promote the establishment of initial response systems and follow-up review of and countermeasures formulated under operational continuity plans of central government ministries and agencies in preparation for an outbreak through the frameworks of a ministerial meeting on
countermeasures against pandemic influenza and new infection diseases and a meeting of relevant ministries and agencies on countermeasures. (Cabinet Secretariat and all other ministries and agencies)

(ii) The national, prefectural and municipal governments as well as designated (local) public institutions should routinely exchange information with each other, check systems for cooperation and conduct exercises in preparation for an outbreak of PI. (Cabinet Secretariat and all other ministries and agencies)

(iii) The national government should support the formulation of prefectural and municipal action plans and operational plans of designated (local) public institutions and the training of healthcare professionals, experts, administrators, etc. involved in countermeasures against PI (Cabinet Secretary, Ministry of Health, Labour and Welfare and other relevant ministries and agencies)

(iv) The national government should provide support necessary for prefectural and municipal governments to promote cooperation with the Self-Defense Forces, police, firefighting and disaster management authorities and the Japan Coast Guard. (Ministry of Health, Labour and Welfare, National Police Agency, Fire and Disaster Management Agency, Ministry of Defense, Japan Coast Guard)

(1)-3 International cooperation

(i) The national government should develop systems for quick sharing of information with international organizations and other countries in the event of an outbreak of PI (Ministry of Health, Labour and Welfare, Ministry of Agriculture, Forestry and Fisheries, Ministry of Education, Culture, Sports, Technology and Science, Ministry of Environment, Ministry of Foreign Affairs)

(ii) The national government should develop systems for international cooperation and collaboration concerning stockpiling, development, etc. of vaccines and anti-influenza virus drugs. (Ministry of Foreign Affairs, Ministry of Health, Labour and Welfare, Ministry of Agriculture, Forestry and Fisheries, Ministry of Economy, Trade and Industry)

(iii) The national government should accept trainees from, dispatch experts to and provide training in countries and regions where an outbreak of PI has occurred. (Ministry of Foreign Affairs, Ministry of Health, Labour and Welfare, Ministry of Agriculture, Forestry and Fisheries, Ministry of Education, Culture, Sports, Technology and Science)

(iv) The national government should conduct joint exercises with other countries

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46 Article 12 of the Act on Special Measures
assuming an outbreak of PI (Ministry of Health, Labour and Welfare)

(v) The national government should organize an overseas dispatch team of experts in such fields as epidemiology, testing, clinical medicine and livestock sanitation so that it can meet requests for the dispatch of experts from international organizations and countries where an outbreak of PI has occurred. (Ministry of Foreign Affairs, Ministry of Health, Labour and Welfare, Ministry of Agriculture, Forestry and Fisheries)

(vi) The national government should enhance survey and research activities, including international cooperative activities (Ministry of Health, Labour and Welfare, Ministry of Agriculture, Forestry and Fisheries, Ministry of Education, Culture, Sports, Technology and Science, Ministry of Environment)

(vii) The national government should consider how to internationally share virus samples through international organizations (WHO, World Organization for Animal Health (OIE), etc.) (Ministry of Foreign Affairs, Ministry of Health, Labour and Welfare, Ministry of Education, Culture, Sports, Technology and Science)

(2) Surveillance and Information Gathering

(2)-1 Information gathering

The national government should gather information concerning countermeasures against PI from within and outside Japan. When Japanese diplomatic missions abroad, National Institute of Infectious Diseases (which serves as a WHO Collaborating Center for Reference and Research on Influenza), and quarantine stations have obtained information, they should quickly report it to relevant departments and divisions. Information sources are as follows. (Ministry of Health, Labour and Welfare, Ministry of Agriculture, Forestry and Fisheries, Ministry of Foreign Affairs, Ministry of Education, Culture, Sports, Technology and Science)

- International organizations (WHO, OIE, Food and Agriculture Organization of the United Nations (FAO), etc.)
- Hokkaido University: OIE reference laboratory
- National Institute of Animal Health under the National Agricultural and Food Research Organization
- Local governments

(2)-2 Routine surveillance
(i) The national government should assess the national trend of influenza outbreaks by investigating the status of seasonal influenza infection in wintertime through designated reporting institutions (around 5,000 medical institutions). It should also assess the characteristics of prevailing viruses by investigating the characteristics (subtypes, drug resistance, etc.) of the strains of viruses through around 500 of the designated reporting institutions. (Ministry of Health, Labour and Welfare)

(ii) The national government should assess the status of severe cases by keeping track of hospitalizations and deaths due to influenza. (Ministry of Health, Labour and Welfare)

(iii) The national government should detect the spread of influenza infection at an early time by investigating the status of school absences due to apparent symptoms of influenza. (closure of classes and schools, etc.) (Ministry of Health, Labour and Welfare, Ministry of Education, Culture, Sports, Technology and Science)

(iv) The national government should assess the immunity status of the people by investigating the status of possession of antibodies against influenza viruses. (Ministry of Health, Labour and Welfare)

(v) The national government should gather information concerning influenza viruses infecting birds and pigs and share and accumulate information thus obtained through cooperation between relevant ministries and agencies. The information should be analyzed and evaluated by the National Institute of Infectious Diseases for use in surveillance on the emergence of pandemic influenza. (Ministry of Health, Labour and Welfare, Ministry of Agriculture, Forestry and Fisheries, Ministry of Environment)

(2)-3 Survey and Research

(i) The national government should develop systems for training experts and cooperation with prefectural governments, etc. so that active epidemiological surveys can be conducted quickly and appropriately in the event of a domestic outbreak of PI (Ministry of Health, Labour and Welfare)

(ii) The national government should accumulate scientific knowledge by promoting epidemiological, clinical and basic research concerning seasonal and pandemic influenza and research concerning the effectiveness of quarantine and other countermeasures. (Ministry of Health, Labour and Welfare)

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47 Article 13 of the Act on Special Measures
(3) Communication

(3)-1 Continuous provision of information
   (i) The national government should continuously provide basic information concerning PI as well as information concerning countermeasures to be taken in the event of an outbreak through various media in an easy-to-understand manner. (Ministry of Health, Labour and Welfare, Cabinet Secretariat)
   (ii) The national government should disseminate infection control measures to be taken at the individual level against seasonal influenza, including wearing a mask, following coughing etiquette, washing hands and gargling. (Ministry of Health, Labour and Welfare)

(3)-2 Development of necessary systems
   The national government should make advance preparations, including development of communication systems, as follows: (Ministry of Health, Labour and Welfare, Cabinet Secretariat)
   (i) Consider such matters as what information should be provided to the people in accordance with the outbreak situation in the event of an outbreak of PI (it is necessary to explain the decision-making process concerning countermeasures and reasons for the implementation of countermeasures, give due consideration to the protection of personal information and public interests and clarify the entities implementing countermeasures) and what media should be used (although mass media such as television and newspapers should be used in principle, multiple media and organizations available, including SNS, should be used depending on who received the information) and make decisions in advance where possible.
   (ii) Develop systems for accumulating and continuously providing information in an easy-to-understand manner in order to maintain central control of the provision of information (establish, a team mainly comprised of public relations officials and consider how to ensure appropriate and timely sharing of information among communication officials).
   (iii) Develop systems for grasping information recipients’ response and identifying information they need so as to improve the provision of information.
   (iv) Develop systems for urgently providing information by using email and

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48 Article 13 of the Act on Special Measures
telephone communications between local governments which actually implement countermeasures at the local level and relevant organizations and creating hotlines between relevant officials. Also consider how to ensure real-time, two-way sharing of information through the use of the Internet and other means.

(v) Prepare for the establishment of national call centers in order to meet the people’s requests for consultation in the event of an outbreak of PI and request prefectural and municipal governments to do the same.

(4) Infection Prevention/Preventing Infection from Spreading

(4)-1 Preparation for implementing countermeasures

(4)-1-1 Dissemination of countermeasures at the individual level

(i) The national, prefectural and municipal governments, schools and business operators should promote the dissemination of basic infection control measures, such as wearing a mask, following coughing etiquette, washing hands and avoiding crowded places. They should also promote understanding on basic infection control measures to be taken by individual persons when they suspect themselves to have been infected, such as reporting to dedicated consultation centers49 and seeking instructions as well as avoiding going out unnecessarily, wearing a mask and following coughing etiquette in order to prevent spread of infection. (Ministry of Health, Labour and Welfare and other relevant ministries and agencies)

(ii) The national and prefectural governments, etc. should promote understanding on infection control measures to be taken in an emergency situation regarding PI, such as requesting the people to refrain from going out unless it is urgent and unavoidable. (Ministry of Health, Labour and Welfare and other relevant ministries and agencies)

(4)-1-2 Raising awareness about measures to be taken at the local level and in workplaces

The national and prefectural governments, etc. should prepare to raise awareness about infection control measures implemented as countermeasures against seasonal influenza in workplaces in addition to measures to be taken at the individual level in the event of PI. The national and prefectural governments, etc. should also prepare

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49 The centers are to be established between the overseas outbreak phase and the early phase of a domestic outbreak.
to raise awareness about countermeasures to be taken in an emergency situation regarding PI, such as requesting restrictions on the use of facilities. (Ministry of Health, Labour and Welfare)

(4)-1-3 Developing systems for supplying sanitary supplies and equipment

The national government should develop systems for assessing the status of production, distribution and inventories of sanitary supplies and equipment (disinfectants, masks, etc.). (Ministry of Health, Labour and Welfare)

(4)-1-4 Border control measures

(i) The national government should provide training for people involved in the implementation of border control measures to acquire basic knowledge concerning PI and prepare personal protective equipment and equipment necessary for border control measures. (relevant ministries and agencies)

(ii) In preparation for an outbreak of PI, the national government should develop systems related to the implementation of border control measures, including strengthening quarantine of entrants, concentrating quarantine activities at some ports and airports and requesting voluntary restrictions on flights and voyages. (relevant ministries and agencies)

(iii) The national government should strive to obtain the consent of managers of boarding facilities to the use of their facilities by providing advance explanations to them, thereby securing the use of boarding facilities near specified quarantine ports and airports where people who are suspected of having been infected are detained (hereinafter referred to as “specified quarantine ports, etc.). (Ministry of Health, Labour and Welfare)

(iv) The national government should strengthen cooperation between local governments and other relevant organizations with regard to epidemic prevention measures necessary for enhancing quarantine and epidemiological surveys on entrants. (Ministry of Health, Labour and Welfare)

(4)-1-5 Survey, research and other activities

Public transport operators are designated (local) institutions necessary for securing passenger transportation. In order to ensure appropriate transportation, it is assumed to be necessary to request persons who show symptoms of PI to refrain from using public transport systems, follow coughing etiquette, including wearing a mask, follow staggered commuting and use bicycles. Ministries and agencies which
have jurisdiction over public transport operators should play the central role in promoting surveys and research concerning their operations in cooperation with relevant organizations, including the National Institute of Infectious Diseases, and the national government should conduct further deliberation on how administrative agencies and business operators should respond to an outbreak of PI.

(4)-2 Preventive vaccination
(4)-2-1 Research and development

(i) After an outbreak of pandemic influenza, the national government should promote research and development concerning methods of producing new vaccines, including cell culturing methods, and administration methods such as the application of nasal mucosa vaccines, with the aim of producing a sufficient amount of pandemic influenza vaccines for the entire population within six months from the determination of the strain of virus used for vaccine production. It should also promote the preparation of production lines. The national government should consider an appropriate vaccine dose amount for children at the same time as promoting the development of new vaccines. (Ministry of Health, Labour and Welfare)

(ii) The national government should promote clinical research concerning the effectiveness and safety of pre-pandemic vaccines in light of up-to-date epidemic trends so as to facilitate studies on effective methods of administering pre-pandemic vaccines in the event of an outbreak of new influenza by making use of some of the processed vaccines. (Ministry of Health, Labour and Welfare)

(4)-2-2 Securing vaccine supplies
(4)-2-2-1 Pre-pandemic vaccines

As it takes a certain amount of time to develop and produce a pandemic vaccine after an outbreak, the national government should promote production and stockpiling of vaccine concentrates (a certain amount of processed vaccines should also be stockpiled) as a temporary measure so that pre-pandemic vaccines can be administered to healthcare professionals and persons engaging in operations that contribute to the stability of the daily lives of the people and the national economy as an infection control measure. (Ministry of Health, Labour and Welfare)

(i) In response to mutations of the genetic structure of influenza viruses, the national government should consider reviewing candidate strains of viruses for
vaccine production as necessary in accordance with the status of acquisition of new isolated virus strains and produce vaccines based on the review results. It should also enhance systems for attenuating new isolated virus strains necessary for the production of pre-pandemic vaccines and conducting relevant quality control in Japan.

(ii) The national government should stockpile a necessary amount of processed pre-pandemic vaccines so that they can be quickly administered in the event of an outbreak.

(4)-2-2-2 Pandemic vaccines

(i) The national government should seek to increase the production capacity of pandemic vaccines derived from chicken eggs as much as possible until a production system using cell culturing or another method is developed. (Ministry of Health, Labour and Welfare)

(ii) The national government should determine its basic approach to securing imported vaccines and the import process before it becomes possible to quickly secure sufficient domestic vaccine supplies for the entire Japanese population. (Ministry of Health, Labour and Welfare)

(4)-2-3 Vaccine supply system

(i) The national government should develop a system for smooth distribution of vaccines. (Ministry of Health, Labour and Welfare)

(ii) The national government should request prefectural governments to develop systems for smooth distribution of vaccines in their regions. (Ministry of Health, Labour and Welfare)

(4)-2-4 Registration of business operators which meet the criteria

(i) The national government should promote the registration of business operators which meet the criteria. To that end, it should raise business operators’ awareness about registration through relevant ministries and agencies in cooperation with prefectural and municipal governments by formulating a guideline for registration which describes a vaccination system for prior vaccination and the requirements related to business continuation and the registration procedures. At the same time, the national government should make clear the specific status of registered business operators, such as their lack of a definitive right to demand prior vaccination, and their obligations. (Ministry of
Health, Labour and Welfare, Cabinet Secretariat and other relevant ministries and agencies)

(ii) The national government should accept registration applications from business operators through relevant ministries and agencies in cooperation with prefectural and municipal governments and register business operators which meet the criteria. (Ministry of Health, Labour and Welfare and other relevant ministries and agencies)

(4)-2-5 Development of vaccination systems

(4)-2-5-1 Prior vaccination

The national government should request registered business operators, relevant ministries and agencies and local governments to develop vaccination systems so that prior vaccination can be administered to eligible persons quickly as group vaccination in principle. (Ministry of Health, Labour and Welfare and other relevant ministries and agencies)

(4)-2-5-2 Vaccination of the people

(i) Municipal governments, in cooperation with the national and prefectural governments, should develop systems for quickly administering vaccines to residents in their regions based on Article 46 of the Act on Special Measures or Article 6(3) of the Preventive Vaccinations Act (Ministry of Health, Labour and Welfare)

(ii) In order to enable smooth vaccination, municipal governments should strive to make it possible for residents to receive vaccinations in municipalities other than those where they live by concluding cross-municipality cooperation agreements with each other. To that end, the national and prefectural governments should provide technical support. (Ministry of Health, Labour and Welfare)

(iii) To enable quick vaccination, municipal governments, in cooperation with medical associations, business operators, school officials, etc., should make preparations concerning specific procedures for vaccination, including the staffing of healthcare professionals to be involved in vaccination and ways of notifying residents of the timing and places of vaccination and reservation of the places. To that end, the national government should provide technical support, for example by indicating a specific model of vaccination system. (Ministry of Health, Labour and Welfare and other relevant ministries and agencies)
(4)-2-6 Provision of information

The national government should provide information concerning basic matters, such as the role of vaccination in the implementation of countermeasures against PI as well as a vaccine supply system, a vaccination system, the scope of persons eligible for vaccination and how to determine the priority order of vaccination, so as to promote the people’s understanding. (Ministry of Health, Labour and Welfare)

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<th>(5) Medical Care</th>
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(5)-1 Development of local medical care systems

(i) The national government, in cooperation with relevant organizations, including the Japan Medical Association, should give necessary advice to prefectural governments, etc. by providing a specific manual and other reference materials concerning the securing of medical care systems and should conduct periodic reviews of the progress in their development of medical care systems. (Ministry of Health, Labour and Welfare)

(ii) In principle, prefectural governments, etc. should promote the development of medical care systems — with secondary medical care areas as a unit — which are suited to the local circumstances, including the establishment of task forces on countermeasures, which will be comprised of representatives from public health centers, local medical associations, the core local medical institutions (hospitals under the National Hospital Organization, university-affiliated hospitals, public hospitals, etc.), including designated (local) public institutions, pharmacies, municipal governments and firefighting and disaster management authorities, while closely cooperating with relevant local officials. The national government should support the promotion of the development of medical care systems by prefectural governments, etc. (Ministry of Health, Labour and Welfare, Fire and Disaster Management Agency)

(iii) In order to secure local medical care systems in the event of an outbreak, the national government should give necessary advice so as to ensure that action plans of prefectural governments, etc. prescribe specific measures by routinely consulting with local healthcare professionals about medical care systems to deal with an outbreak. (Ministry of Health, Labour and Welfare).

(iv) The national government should request prefectural governments, etc. to
prepare for the establishment of dedicated consultation centers and dedicated outpatient departments and to promote preparations to accept in-patients at medical institutions, etc. designated for treatment of infectious diseases. The national and prefectural governments, etc. should request general medical institutions to promote infection control measures, such as preparing personal protective equipment, in preparation for cases where they will treat patients infected with PI (Ministry of Health, Labour and Welfare and other relevant ministries and agencies)

(5)-2 Securing of medical care in preparation for the domestic pandemic phase

The national and prefectural governments, etc. should secure medical care in preparation for the domestic pandemic phase with due attention paid to the following points:

(i) The national and prefectural governments, etc. should request all medical institutions to formulate plans for continuing medical care and support the formulation of the plans by providing a manual, for example. (Ministry of Health, Labour and Welfare)

(ii) In accordance with the local circumstances, prefectural governments, etc. should develop systems for accepting in-patients as a priority at medical institutions, etc. designated for treatment of infectious diseases, including designated (local) public institution, medical institutions which are designated (local) public institutions (hospitals under the National Hospital Organization, Japanese red cross hospitals, hospitals affiliated with the Japan Labor, Health and Welfare Organization, etc.) and public medical institutions, etc. (university-affiliated hospitals, public hospitals, hospitals affiliated with the Social Welfare Organization Saiseikai Imperial Gift Foundation Inc., etc).

(iii) Prefectural governments, in cooperation with cities and special wards of Tokyo where public health centers are located, should assess the number of hospital beds that can be used (including beds for patients above the prescribed maximum number of in-patients) in the event of a surge in the number of patients infected with PI who require treatment.

(iv) Prefectural governments should consider the possibility that temporary medical facilities, etc. will provide medical care in preparation for cases where the

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50 Article 48 of the Act on Special Measures

*Based on Article 48(2) of the same act, prefectural governors may transfer some of administrative work related to the implementation of the measures to municipal chiefs in accordance with a relevant cabinet order when they recognize the need to do so.
number of patients infected with PI who require treatment will surge and exceed medical institutions’ capacity.

(v) From the perspective of maintaining local medical functions, prefectural governments, etc. should, as necessary, consider selecting medical institutions which will in principle not treat new patients infected with PI so that medical care services which are constantly necessary can be continued, including cancer treatment, dialysis treatment and obstetric care.

(vi) Prefectural governments, etc. should consider how to provide medical care in the event of mass infection at nursing care homes, including social welfare facilities.

(vii) The national government should request university-affiliated hospitals to make preparations for an outbreak of PI in cooperation with local medical institutions, etc., including formulating manuals for handling of patients. (Ministry of Education, Culture, Sports, Technology and Science)

(viii) The national government should consider how to maintain emergency medical care functions in the local pandemic phase. It should also request firefighting and disaster management authorities to stockpile personal protective equipment for ambulance service personnel and other personnel involved in patient transportation who may have contact with infected people. It should also provide necessary support. (Fire and Disaster Management Agency)

(5)-3 Formulation of guidelines, training, etc.

(i) The national government should formulate guidelines for such matters as the diagnosis of PI, the policy for treatment, including triage, in-hospital infection control measures and patient transportation and should raise medical institutions’ awareness about them. (Ministry of Health, Labour and Welfare)

(ii) The national government, in cooperation with prefectural governments, etc., should conduct training and exercises for healthcare professionals that assume a domestic outbreak. (Ministry of Health, Labour and Welfare, prefectural governments)

(5)-4 Preparation of medical supplies and equipment

The national and prefectural governments, etc. should stockpile and prepare necessary medical supplies and equipment (personal protective equipment, respirators, etc.) in advance. The national government should request prefectural governments, etc. to assess the status of stockpiling of necessary medical supplies
and equipment at medical institutions as well as their room for increasing beds so as to secure sufficient amounts of supplies and equipment and a sufficient number of beds. (Ministry of Health, Labour and Welfare)

(5)-5 Development of testing systems

(i) The national government should promote the development of a quick diagnosis kit in preparation for an outbreak of PI (Ministry of Health, Labour and Welfare)

(ii) The national government should request local governments which have established local health research centers to develop systems for conducting PCR and other tests concerning pandemic influenza viruses, etc. and should provide technical support. (Ministry of Health, Labour and Welfare)

(5)-6 Development of systems for providing information to medical institutions, etc.

The national government should develop systems for quickly providing medical institutions and healthcare professionals with information useful for diagnosis and treatment of PI (Ministry of Health, Labour and Welfare)

(5)-7 Collection and analysis of scientific knowledge concerning anti-influenza virus drugs

The national government should conduct research and gather information concerning the effects of anti-influenza virus drugs and the drug resistance of viruses. (Ministry of Health, Labour and Welfare)

(5)-8 Stockpiling of anti-influenza virus drugs

(i) In light of the status of stockpiling in other countries and up-to-date scientific knowledge, the national and prefectural governments should continue to stockpile anti-influenza virus drugs in a systematic and stable manner with the aim of securing a sufficient amount of supplies to treat 45% of the entire population. When stockpiling the drugs, the government should also take into consideration the current status of stockpiling and distribution. (Ministry of Health, Labour and Welfare)

(ii) Regarding new anti-influenza virus drugs, the national government should gather information concerning the emergence of drug-resistant viruses and consider the mixture ratios of stockpiled drugs. (Ministry of Health, Labour and Welfare)
(iii) The national government should continue to stockpile anti-influenza virus drugs at diplomatic missions abroad. (Ministry of Foreign Affairs)

(5)-9 Development of a distribution system for anti-influenza virus drugs

In light of the status of distribution of anti-influenza virus drugs, the national government should develop a system for smoothly supplying drugs in the event of an outbreak of PI. It should also instruct medical institutions, pharmacies and medical product wholesalers to ensure appropriate distribution of anti-influenza virus drugs. (Ministry of Health, Labour and Welfare)

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(6) Ensuring the Stability of the Daily Lives of the People and the National Economy

(6)-1 Formulating operational plans, etc.

(i) The national and prefectural governments should request designated (local) public institutions to make sufficient advance preparations in preparation for an outbreak of PI, including formulating plans for infection control measures in workplaces, continuation of important operations and scaling back of some operations. They should also support the formulation of operational plans and check the status of implementation. (relevant ministries and agencies)

(ii) The national government should consider a specific action policy with regard to laws and regulations that need to be enforced flexibly in the event of an outbreak of PI from the perspective of supporting the continuation of operations by designated (local) public institutions and registered business operators (hereinafter referred to as “designated (local) public institutions, etc.”). (relevant ministries and agencies)

(6)-2 Requests, etc for supply of goods

The national government, in cooperation with prefectural governments, should request designated (local) public institutions, etc. which engage in production, sales and transportation to develop systems for continuing operations, including distribution and transportation of emergency supplies, in order to ensure the distribution and transportation of medical products, foods and other emergency supplies. (relevant ministries and agencies)

(6)-3 Living support for people who need to be looked after in the event of an outbreak
of PI

The national government should request municipal governments to cooperate with prefectural governments in identifying people who need to be looked after in the local pandemic phase, including elderly and disabled people, and determine specific procedures concerning living support for and transportation of such people and handling of the death of such people. (Ministry of Health, Labour and Welfare)

(6)-4 Assessing the cremation capacity, etc.

Prefectural governments, in cooperation with the national and municipal governments, should identify the cremation capacity of crematories and consider which facilities can be used to temporarily store bodies so as to develop systems for smooth cremation and burial. (Ministry of Health, Labour and Welfare)

(6)-5 Stockpiling of supplies and equipment, etc.51

The national, prefectural and municipal governments as well as designated (local) public institutions should stockpile drugs and other supplies and equipment necessary for implementation of countermeasures against PI and develop necessary facilities and equipment.

51 Article 10 of the Act on Special Measures
***Overseas Outbreak Phase***

- An outbreak of PI has occurred abroad.
- There has not been any domestic case of infection with PI.
- In some cases, an outbreak may occur in a single country or region, and in other cases, an outbreak may spread to a number of countries and regions.

**Objectives:**

1. Delay the entry of pandemic influenza virus, etc. as much as possible and detect a domestic outbreak early if it should occur.
2. Develop necessary systems in preparation for a domestic outbreak

**Approach to countermeasures**

1. In the case of PI, there will likely be a lack of sufficient information concerning the virulence and infectious capacity of the virus. In that case, strong measures should be taken so that a highly virulent and infectious virus can be deal with.
2. In order to facilitate decisions on countermeasures, it is important to actively gather information concerning outbreak situations abroad and the characteristics of PI through international cooperation.
3. It is important to strengthen systems for domestic surveillance and information gathering so that a domestic outbreak, if it should occur, can be detected early.
4. The national government should call attention to overseas outbreak situations and provide accurate information concerning countermeasures to be taken in the event of a domestic outbreak and encourage local governments, medical institutions, business operators and the people to make preparations.
5. It is important to delay a domestic outbreak as much as possible through quarantine and other measures so as to secure the time to develop necessary systems for a domestic outbreak by providing information to medical institutions, etc., developing test and medical care systems, preparing to ensure the stability of the daily lives of the people and the national economy, producing and administering pre-pandemic vaccines and starting production of pandemic vaccines.

**Implementation System**

1-1 Strengthening of government systems, etc.

(i) If an overseas outbreak of PI is suspected to have occurred, the Deputy Chief Cabinet Secretary for Crisis should hold emergency consultations with relevant ministries and agencies and report to the Prime Minister. In addition, a meeting of relevant ministries and agencies on countermeasures or, when necessary, a
ministerial meeting on countermeasures against PI, which is hosted by the Prime Minister and attended by all ministers should be held in order to gather, share and analyze information and discuss and make decisions on the national government’s initial response policy (Cabinet Secretariat and all other ministries and agencies)

(ii) When the WHO has declared pandemic influenza Phase 4 or has made an announcement equivalent thereto, or has announced an outbreak of a new infectious disease that could spread rapidly, the Minister of Health, Labour and Welfare should announce the occurrence of an outbreak of PI and report to the Prime Minister. (Ministry of Health, Labour and Welfare)

(iii) When the report referred to in (ii) has been made, the Prime Minister should establish the national headquarters for countermeasures headed by himself/herself and report to the Diet and publicly announce the name, location and duration of the national headquarters except when it is deemed that the symptoms of infection are similar to or milder than those of infection with seasonal influenza.

(iv) The national government should seek the opinions of the Advisory Committee on Basic Action Policies (except when the situation is too urgent to seek its opinions), hold consultations and make decisions on a basic action policy for dealing with the overseas outbreak phase based on the National Action Plan and immediately announce and raise awareness about the policy. Prefectural governments should establish prefectural headquarters for countermeasures. (Cabinet Secretariat, Ministry of Health, Labour and Welfare and all other ministries and agencies)

(v) The national government should seek the opinions of the Advisory Committee on Basic Action Policies and should revise the basic action policy when necessary depending on the characteristics of the virus and the extent of the spread of infection and announce the revision. (Cabinet Secretariat and all other ministries and agencies)

(vi) When it has been concluded that PI which is recognized to cause illness of similar severity to or of milder severity than illness caused by seasonal influenza has occurred, the national government should implement various

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52 Article 44-2(1) and Article 44-6(1) of the Infectious Diseases Act
53 Article 14 of the Act on Special Measures
54 Article 15(1) and (2) and Article 16 of the Act on Special Measures
55 Article 18 of the Act on Special Measures
56 Article 22 of the Act on Special Measures
57 However, it is presumed that there are few cases in which the severity of illness after infection is known in
measures based on the Infectious Diseases Act. (Ministry of Health, Labour and Welfare and other relevant ministries and agencies)

(1)-2 International cooperation
(i) The national government should consider dispatching a team of experts organized in the pre-outbreak phase in response to requests from international organizations or countries where an outbreak of pandemic influenza has occurred. (Ministry of Foreign Affairs, Ministry of Health, Labour and Welfare, Ministry of Agriculture, Forestry and Fisheries)
(ii) The national government should cooperate in the provision of support by the WHO to countries where an outbreak has occurred. (relevant ministries and agencies)

(2) Surveillance and Information Gathering

(2)-1 Information gathering through international cooperation
(i) The national government should gather necessary information concerning overseas outbreak situations of PI through international organizations (WHO, OIE, etc.), etc. and strengthening information gathering from countries where an outbreak has occurred. The National Institute of Infectious Diseases should quickly report information thus obtained to relevant departments and divisions. (Ministry of Health, Labour and Welfare, Ministry of Foreign Affairs, Ministry of Education, Culture, Sports, Technology and Science)
   - Information concerning viruses
   - Epidemiological information (symptoms, case definitions, case fatality rate, etc.)
   - Information concerning treatment methods (e.g., effectiveness of anti-influenza virus drugs)
(ii) The national government should enhance survey and research activities, including international cooperative activities. In particular, it should develop systems for cooperation and collaboration concerning the development of vaccine and anti-influenza virus drugs. (Ministry of Health, Labour and Welfare, Ministry of Education, Culture, Sports, Technology and Science, and other relevant ministries and agencies)
(2)-2 Enhancement of domestic surveillance

(i) The national government should continue to conduct routine surveillance concerning influenza. (Ministry of Health, Labour and Welfare)

(ii) In order to identify domestic patients infected with PI at an early time and grasp the characteristics of the disease, including clinical features of patients, the national government should request all doctors to report to the authorities when they have examined infected patients (including suspected cases of infection) and start assessing the total number of patients. (Ministry of Health, Labour and Welfare)

(iii) The national government should strengthen efforts to identify mass influenza infection at schools and other facilities in order to detect the spread of infection at an early time. (Ministry of Health, Labour and Welfare, Ministry of Education, Culture, Sports, Technology and Science)

(iv) The national government should continue to gather information concerning influenza viruses infecting birds and pigs and share and accumulate information thus obtained through cooperation with relevant ministries and agencies. (Ministry of Health, Labour and Welfare, Ministry of Agriculture, Forestry and Fisheries, Ministry of Environment)

(2)-3 Survey and research activities

The national government should quickly conduct surveys, research and analysis necessary for the implementation of countermeasures, including conducting surveys on the people’s possession of antibodies by age group when it has obtained a virus sample and should reflect the results in countermeasures. (Ministry of Health, Labour and Welfare)

(3) Communication

(3)-1 Provision of information

(i) The national government should call attention to overseas outbreak situations, current countermeasures and measures that will need to be taken in the event of a domestic outbreak by providing information to the people in detail, in an easy-to-understand manner, and, to the maximum possible extent, in real time, in principle through mass media such as television and newspapers but also through various other media, including websites, while making clear the

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58 Article 12 of the Infectious Diseases Act
decision-making process concerning countermeasures, the reasons for the implementation of countermeasures as well as the implementing entities.
(relevant ministries and agencies)

(ii) To that end, the national government should establish a public relations team comprised mainly of public relations officials at the national headquarters for countermeasures and the Ministry of Health, Labour and Welfare, accumulate, sort out and disseminate information under centralized control and consolidate information services for various sorts of information recipients into a single service. When ministries and agencies implementing countermeasures provide information, the national government should do coordination work so as to ensure appropriate provision of information. (Cabinet Secretariat and other relevant ministries and agencies)

(3)-2 Information sharing

(i) The national government should establish Internet-based information counters through which information can be shared in real time and as a two-way process and share information concerning reasons for the implementation of countermeasures and the process of implementation via email and other means. (Cabinet Secretariat, Ministry of Health, Labour and Welfare)

(ii) The national government should directly share information with healthcare professionals through email magazines and by providing feedback information concerning inquiries. (Ministry of Health, Labour and Welfare)

(3)-3 Establishment of call centers, etc.

(i) The national government should compile a FAQ and establish a national call center.
(Ministry of Health, Labour and Welfare)

(ii) The national government should distribute a FAQ to prefectural and municipal governments and request them to establish call centers capable of responding to general inquiries from residents so as to appropriately provide information while taking care to avoid disrupting other public health-related operations. (Ministry of Health, Labour and Welfare)

(iii) The national government should identify what information the people and relevant organizations need in light of inquiries received from the people through call centers and information received from local governments and other relevant organizations and reflect the results in future provision of information.
(Ministry of Health, Labour and Welfare)

(4) Infection Prevention/Preventing Infection from Spreading

(4)-1 Preparation for preventing the spread of domestic infection

(i) The national and prefectoral governments, etc. should cooperate with each other in preparing to handle patients (treatment, hospitalization, etc.) and persons who have close contact with patients, such as those who live together with infected persons (requesting them to refrain from going out, observing their health conditions and instructing them in how to act when they develop symptoms), based on the Infectious Diseases Act in preparation for a domestic outbreak of PI. The national and prefectoral governments, etc., should also cooperate with each other in making effective use of information provided by quarantine stations with regard to entrants. (Ministry of Health, Labour and Welfare)

(4)-2 Issuance of infectious disease alerts, etc.

(i) When an outbreak of PI is suspected to have occurred, the national government should issue an infectious disease alert and should recommend that the people delay non-urgent and non-essential overseas travel and consider the possibility of returning from abroad even before the issuance of a declaration of pandemic influenza Phase 4 by the WHO, an announcement equivalent thereto, or an announcement of an outbreak of a new infectious disease that could spread rapidly. (Ministry of Foreign Affairs)

(ii) When an overseas outbreak of PI has been confirmed, such as when the WHO has issued a declaration of pandemic influenza Phase 4, has made an announcement equivalent thereto, or has announced an outbreak of a new infectious disease that could spread rapidly, the national government should issue an infectious disease alert, recommend that the people delay overseas travel and should inform Japanese nationals staying abroad of such risks as that it may become difficult for them to return to Japan in the future, that they may be unable to receive sufficient medical care in the countries in which they are staying, and that their activities may be restricted upon their return to Japan in light of the degree of the virulence of the virus. (Ministry of Foreign Affairs)

(iii) The national government, in cooperation with relevant organizations, should provide travelers to foreign countries with information concerning, and call their attention to, outbreak situations of PI and actions to be taken by individual
persons. (Ministry of Health, Labour and Welfare)

(iv) The national government should, as necessary, request business operators to avoid business trips to countries where an outbreak has occurred. It should request business operators which have employees stationed as overseas representatives or which have sent employees on overseas business trips to gather information from relevant ministries and agencies and local governments and, as necessary, call them back to Japan. (relevant ministries and agencies)

(4)-3 Border control measures

(4)-3-1 Implementation of countermeasures in the event of a suspected outbreak

(i) In the event of a suspected outbreak of PI, the national government should strive to identify patients among entrants from other countries through a questionnaire even before the issuance of a declaration of pandemic influenza Phase 4 by the WHO, an announcement equivalent thereto, or an announcement of an outbreak of a new infectious disease that could spread rapidly. (relevant ministries and agencies)

(4)-3-2 Strengthening of quarantine

(i) Regarding strengthening of quarantine, the national government should seek the opinions of the Advisory Committee on Basic Action Policies and implement reasonable measures in light of the virulence and infectious capability of the virus, overseas outbreak situations and other information currently available. When the measures implemented are deemed to have become not reasonable in light of additional information obtained and changes in the situation, they should be scaled back (relevant ministries and agencies)

(ii) The national government, in cooperation with airlines and shipping companies, should distribute to all entrants health cards which describe points of attention when they develop symptoms after entry. It should also distribute questionnaires59 to entrants from countries where an outbreak has occurred and examine their health conditions60. When the virus is suspected to be highly virulent, the national government should take such measures as isolating61 persons who show symptoms, restricting their activities62 and put them under

59 Article 12 of the Quarantine Act
60 Article 13 of the Quarantine Act
61 Article 14(1)(i) of the Quarantine Act
62 Article 14(1)(ii) of the Quarantine Act
health observation persons who may have been infected. The scope of persons whose activities may be restricted and who may be put under health observation should be decided in light of scientific knowledge. Information obtained through questionnaires should be provided to local governments as necessary. (Ministry of Health, Labour and Welfare)

(iii) When restricting activities of entrants, the national government should hold consultations with relevant ministries and agencies based on a request of the Ministry of Health, Labour and Welfare and should consider designating specified quarantine ports, etc. and concentrating quarantine activities there in accordance with such factors as overseas outbreak situations and the situations of flights and voyages. (Ministry of Health, Labour and Welfare, Ministry of Land, Infrastructure, Transport and Tourism)

- The national government should consider how to implement quarantine at Narita, Haneda, Kansai, Chubu and Fukuoka airports regarding passenger aircraft and at quarantine airports regarding specialized cargo aircraft when quarantine activities are concentrated there.
- Regarding passenger ships, quarantine should be concentrated at Yokohama, Kobe, Kanmon and Hakata ports.
- Regarding cargo ships, quarantine should be implemented not only at specified quarantine ports and but also at other quarantine ports. However, when ships have difficulty entering quarantine ports due to the nature of their cargos, relevant ministries and agencies should consider what to do while keeping in mind the risk of spread of infection.

(iv) When the presence of passengers who have health problems such as fever and cough has been reported from pilots and captains to quarantine stations before arrival, instructions should be issued on measures to be taken with regard to persons who show symptoms in cabins (isolating persons who show symptoms, wearing a mask, limiting the number of persons who have contact with them, etc.) (Ministry of Health, Labour and Welfare)

(v) The national government, in cooperation with airlines and shipping companies, should enhance the effectiveness of quarantine by checking whether persons arriving from third countries have stayed in countries where an outbreak has occurred by implementing procedures based on the Quarantine Act (Act No. 201 of 1951), such as distributing questionnaires and examining the seals of verification for departure on passports (Ministry of Health, Labour and Welfare,

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63 Article 18(4) of the Quarantine Act and Article 15-3 of the Infectious Diseases Act
(vi) The national government should enhance cooperation between quarantine stations, local governments and other relevant organizations in line with strengthening of quarantine, provide technical support for the implementation of PCR and other tests and quickly develop a test system. (Ministry of Health, Labour and Welfare and other relevant ministries and agencies)

(vii) In line with the strengthening of quarantine, the national government should, as necessary, conduct patrol activity at and around ports and airports where quarantine is implemented, should provide guidance for prefectural police departments on patrol activity and should do coordination work. (National Police Agency, Japan Coast Guard).

(4)-3-3 Restriction on entry by foreign nationals

(i) Regarding the issuance of visas through diplomatic missions in countries where an outbreak has occurred, if the virus is highly virulent, the national government should take such measures as toughening visa screening and stopping the issuing of visas. (Ministry of Foreign Affairs)

(ii) When immigration and customs officials have identified persons infected with PI or suspected to be infected, they should immediately report to quarantine stations, seek instructions and transfer them to the quarantine process. (Ministry of Justice, Ministry of Finance)

(4)-3-4 Countermeasures against illegal entrants

(i) When illegal entrants are expected to arrive from countries where an outbreak has occurred, the national government should strengthen cooperation between enforcement organizations. When information concerning the presence of infected persons or persons suspected to be infected among illegal entrants has been obtained or recognized, the national government should take necessary procedures after implementing necessary infection control measures while maintaining cooperation with quarantine stations. (Ministry of Justice, National Police Agency, Japan Coast Guard)

(ii) The national government should strengthen surveillance and enforcement activities, such as onsite inspection of arriving aircraft and ships, prevention of illegal passage, and patrol of immigration control and transit areas. It should also instruct prefectural police departments, etc. to conduct patrol activity and should coordinate their activities. (Ministry of Justice, National Police Agency,
Japan Coast Guard).

(iii) In order to prevent illegal entrance of infected persons, the national government should strengthen patrol of coastal areas and the seas, should provide guidance for prefectural police departments on patrol activity and should do coordination work. (National Police Agency, Japan Coast Guard)

(4)-3-5 Infection control measures for persons involved in border control measures

Regarding persons involved in border control measures, the national government should implement necessary infection control measures such as having them wear personal protective equipment, receive prior vaccination and take anti-influenza virus drugs when exposed to the virus through contact with infected patients. (relevant ministries and agencies)

(4)-3-6 Use of facilities for restricting activities and restrictions on flights, etc.

When restriction of activities is deemed to be difficult due to a lack of facilities for restricting activities, the national government should in principle use facilities near specified quarantine ports, etc. subject to the consent of the managers thereof. When the managers refuse to give their consent without any legitimate reason, the national government should consider using the facilities based on the Act on Special Measures.

The national government should also hold consultations between relevant ministries and agencies based on requests from the Ministry of Health, Labour and Welfare and request airlines and shipping companies to restrict flights and voyages arriving and departing from regions where an outbreak has occurred and make an announcement thereof while giving consideration to international consistency in cases where restriction of activities is deemed to be very difficult and where it is necessary to request such restrictions in order to prevent the entry of PI into Japan, such as when local containment measures have been taken in countries where an outbreak has occurred or when the WHO has recommended refraining from traveling to countries or to regions where an outbreak has occurred. (Ministry of Land, Infrastructure, Transport and Tourism, Ministry of Health, Labour and Welfare, Ministry of Foreign Affairs)

(4)-4 Support for Japanese nationals staying abroad

64 Article 29 of the Act on Special Measures
65 Article 30 of the Act on Special Measures
(i) The national government should call the attention of Japanese nationals staying or studying in countries where an outbreak has occurred to the need for infection prevention directly or through their schools and other organizations in Japan. It will also raise their awareness about measures to be taken when they are suspected of having been infected in countries where an outbreak has occurred. (Ministry of Foreign Affairs, Ministry of Education, Culture, Sports, Technology and Science and other relevant ministries and agencies)

(ii) The national government should provide necessary support to Japanese nationals who wish to return to Japan. For example, the national government should do its utmost to enable such Japanese nationals to return to Japan in cooperation with relevant countries by providing information concerning scheduled flights and, when more flights are necessary, by requesting airlines to increase the number of flights. (Ministry of Foreign Affairs, Ministry of Land, Infrastructure, Transport and Tourism)

(iii) After scheduled flights have been suspended, the national government should immediately consider alternative means of returning home for Japanese nationals staying abroad and decide an action policy in light of the situation of countries where an outbreak has occurred while keeping in mind that quarantine will have been strengthened when they return. (Ministry of Foreign Affairs, Ministry of Health, Labour and Welfare, Ministry of Land, Infrastructure, Transport and Tourism, Ministry of Defense, Japan Coast Guard)

(iv) The national government should consider, as necessary, administering anti-influenza virus vaccines stockpiled by diplomatic missions abroad to Japanese nationals who have been infected or who are suspected to have been infected. (Ministry of Foreign Affairs and other relevant ministries and agencies)

(4)-5 Preventive vaccination
(4)-5-1 Securing of vaccines
(4)-5-1-1 Pre-pandemic vaccines

After an outbreak of PI, the national government should administer national stockpiles of processed pre-pandemic vaccines which are expected to be effective against the virus of the outbreak and request producers and sellers of vaccines, including designated public institutions, to immediately process stockpiled vaccine concentrates. (Ministry of Health, Labour and Welfare)
(4)-5-1-2 Pandemic vaccines

(i) The national government should instruct the National Institute of Infectious Diseases to develop and produce vaccines immediately after identifying the strain of the pandemic influenza virus. (Ministry of Health, Labour and Welfare)

(ii) The national government should request producers and sellers of vaccines, including designated public institutions, to start producing pandemic vaccines as soon as the strain of virus to be used for vaccine production has been secured. When the timing of the request coincides with production of seasonal influenza vaccines, the national government should request producers and sellers of vaccines, including designated public institutions, to suspend it and shift to production of pandemic vaccines so as to make the most of their production capacity. (Ministry of Health, Labour and Welfare)

(iii) In response to mutations of the genetic structure of the pandemic influenza virus (of the virus or other pathogenic organism in the case of a new infectious disease), the national government should consider reviewing the candidate strain of virus for vaccine production as necessary in accordance with the status of acquisition of a new isolated strain of virus and communicate the review results to producers and sellers of vaccines, including designated public institutions. (Ministry of Health, Labour and Welfare)

(iv) The national government should use information concerning prototype vaccines, seasonal influenza vaccines and pre-pandemic vaccines in order to quickly examine and approve pandemic vaccines in an appropriate manner. (Ministry of Health, Labour and Welfare)

(v) The national government should in principle secure domestic supplies of vaccines. However, it should also secure supplies of imported vaccines as necessary while giving consideration to international situations. (Ministry of Health, Labour and Welfare)

(4)-5-2 Supply of vaccine

(i) The national government should formulate a plan concerning the supply amount based on a basic action policy decided by the national headquarters for countermeasures and manage distribution so as to ensure smooth supply of vaccines. (Ministry of Health, Labour and Welfare)

(ii) The national government should request prefectural governments to develop systems for smooth distribution of vaccines in their regions. (Ministry of Health,
Labour and Welfare)

(4)-5-3 Vaccination system

(4)-5-3-1 Prior vaccination

(i) The national government should make a decision on prior vaccination when it recognizes an urgent need to implement it in order to ensure the provision of medical care and the stability of the daily lives of the people and the national economy in light of the overall circumstances, including information concerning outbreaks of PI and the social situation. (Cabinet Secretariat, relevant ministries and agencies)

(ii) The national government should decide the specifics of prior vaccination⁶⁶, such as the total number of vaccinations, the scope of persons eligible for prior vaccination, the priority order of vaccination under the basic action policy in light of information concerning the PI of the outbreak, the effectiveness of pre-pandemic vaccines, the speed of production and processing of vaccines, the service level required by the people and the urgency for vaccination of the people while seeking the opinions of the Advisory Committee on Basic Action Policies. (Cabinet Secretariat, Ministry of Health, Labour and Welfare and other relevant ministries and agencies)

(iii) Based on the basic action policy, the national government should administer prior vaccination to eligible employees of registered business operators and national public servants as group vaccination in principle subject to their consent⁶⁷. (Ministry of Health, Labour and Welfare and other relevant ministries and agencies)

(iv) Prefectural and municipal governments, in cooperation with the national government, should administer prior vaccination to eligible local public servants as group vaccination in principle subject to their consent. (Ministry of Health, Labour and Welfare)

(4)-5-3-2 Vaccination of the people

(i) The national government should start preparing for preventive vaccination of the people based on Article 46 of the Act on Special Measures and new extraordinary vaccination based on Article 6(3) of the Preventive Vaccinations

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⁶⁶ If the stockpiled pre-pandemic vaccine is effective, it should be used. In cases where the new infectious disease is not H5N1 influenza, or where the pandemic influenza is a subtype of H5N1 but the stockpiled vaccine is not highly effective, a pandemic vaccine should be used. Also, in cases where the virus is not so virulent as to require urgent administration of prior vaccination, healthcare professionals should receive vaccination in advance.

⁶⁷ Article 28 of the Act on Special Measures
Act in light of the characteristics of the PI of the outbreak. Municipal governments should prepare vaccination systems in cooperation with the national government. (Ministry of Health, Labour and Welfare)

(ii) The national government should request municipal governments to make specific preparations for the development of vaccination systems based on municipal action plans so that the entire population can be vaccinated quickly as group vaccination in principle. (Ministry of Health, Labour and Welfare)

(4)-5-4 Provision of information

The national government should actively provide information concerning specifics such as the vaccine type, effectiveness and safety, the scope of persons eligible for vaccination, the priority order of vaccination and the vaccination system. (Ministry of Health, Labour and Welfare)

(4)-5-5 Monitoring

When the national government has implemented prior vaccination, it should monitor the implementation, evaluate the effectiveness of vaccination based on scientific evidence and gather, analyze and evaluate information concerning side effects, including harmful effects caused by factors other than the vaccine. (Ministry of Health, Labour and Welfare)

(5) Medical Care

(5)-1 Case definitions of PI

The national government should clarify the case definitions of PI, revise them as necessary and raise relevant organizations’ awareness about them. (Ministry of Health, Labour and Welfare)

(5)-2 Development of medical care systems

The national government should request prefectural governments, etc. to take the following measures. (Ministry of Health, Labour and Welfare)

(i) Conduct diagnosis of persons who show febrile and respiratory symptoms after returning from countries where an outbreak has been confirmed should undergo diagnosis at outpatient departments for those who show febrile and respiratory symptoms after returning from countries where an outbreak of influenza has been confirmed and those who show febrile and respiratory symptoms after
having close contact with patients (hereinafter referred to as “dedicated outpatients departments. To that end, establish outpatient departments dedicated to such persons (hereinafter referred to as “dedicated outpatient departments).

(ii) Develop medical care systems based on the premise of in-hospital infection control measures in cooperation with local medical associations in light of the possibility that patients infected with PI will visit medical institutions which do not have a dedicated outpatient department.

(iii) Request medical institutions which have a dedicated outpatient department to immediately report to public health centers when they have judged a person as having been infected with PI or as having developed symptoms similar to those of PI in light of the case definitions.

(iv) Identify a subtype of the virus based on samples taken from patients who are suspected to have been infected with PI. The National Institute of Infectious Diseases should verify it.

(5)-3 Establishment of dedicated consultation centers

The national government should request prefectural governments, etc. to take the following measures. (Ministry of Health, Labour and Welfare)

(i) Establish dedicated consultation centers.

(ii) Raise awareness, through dedicated consultation centers, about the need for persons who have returned from countries where an outbreak has occurred and who show symptoms such as fever and respiratory problems to undergo diagnosis at dedicated outpatient departments.

(5)-4 Provision of information to medical institutions, etc.

The national government should quickly provide information concerning the diagnosis and treatment of PI to medical institutions and healthcare professionals.

(5)-5 Development of test systems

(i) The national government should develop systems for conducting PCR and other tests concerning PI through the National Institute of Infectious Diseases based on information concerning the virus. (Ministry of Health, Labour and Welfare)

(ii) The national government should provide local governments which have local health research centers with technical support for conducting PCR and other tests concerning PI at the research centers so as to quickly develop test systems. (Ministry of Health, Labour and Welfare)
(iii) The national government should strive to put into practical use a rapid diagnostic kit for pandemic influenza. (Ministry of Health, Labour and Welfare)

(5)-6 Stockpiling and use of anti-influenza virus drugs, etc.

(i) The national and prefectural governments should assess the amount of stockpiled anti-influenza virus drugs.

(ii) The national government, in cooperation with prefectural governments, etc., should request medical institutions to use stockpiled anti-influenza drugs when necessary for preventive administration to persons who live with infected patients, healthcare professionals and ambulance service personnel and other personnel involved in patient transportation.

(iii) The national government should continue to provide guidelines for appropriate distribution of anti-influenza virus drugs. (Ministry of Health, Labour and Welfare)

(6) Ensuring the stability of the daily lives of the people and the national economy

(6)-1 Measures to be taken by business operators

(i) The national government should request business operators across the country to ensure thorough health management of employees and prepare for the implementation of infection control measures in workplaces. (relevant ministries and agencies)

(ii) Designated (local) public institutions, etc., in cooperation with the national and prefectural governments, should prepare for the continuation of operations based on their operational plans. The national government should request registered business operators to make necessary preparations for continuing their operations. (relevant ministries and agencies)

(iii) The national government should, as necessary, raise awareness about flexible enforcement of laws and regulations to facilitate continuation of operations by designated (local) public institutions. It should also quickly consider and implement other necessary measures. (relevant ministries and agencies)

(6)-2 Cremation and storage of bodies

The national government should request municipal governments, through prefectural governments, to prepare to secure facilities where bodies can be
temporarily stored in preparation for cases where the cremation capacity of crematories will be exceeded. (Ministry of Health, Labour and Welfare)
<table>
<thead>
<tr>
<th>Early phase of a domestic outbreak</th>
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<tbody>
<tr>
<td>• While human cases of PI infection have occurred in any prefecture or other, it is possible to trace the history of contacts of all patients through epidemiological surveys.</td>
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<tr>
<td>• The situation may vary within Japan from prefecture to prefecture.</td>
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<tr>
<td>(Pre-local outbreak phase)</td>
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<tr>
<td>Human cases of PI have not occurred in the relevant prefecture.</td>
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<td>(Early phase of a local outbreak)</td>
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<tr>
<td>While human cases of PI have occurred in the relevant prefecture, it is possible to trace the history of contacts of all patients through epidemiological surveys.</td>
</tr>
</tbody>
</table>

Objectives:
1) Limit the spread of infection in Japan as much as possible.
2) Provide appropriate medical care to patients.
3) Develop systems to deal with the spread of infection

Approach to countermeasures:
1) Although it is difficult to prevent the spread of infection, it is important to continue infection control measures in order to delay the epidemic peak. Depending on the domestic outbreak situation of PI, a declaration of emergency should be issued and infection control measures should be actively implemented.
2) In order to raise awareness about medical care systems and infection control measures and to ensure that individual persons sufficiently understand actions to be taken by themselves, it is important to actively provide information to the people.
3) As clinical information concerning symptoms and treatment is likely to be limited due to the small number of patients in Japan, it is important to gather as much information as possible from within Japan as well as from abroad and provide it to medical institutions, etc.
4) As a large number of persons who show symptoms such as fever and respiratory problems, in addition to patients infected with PI, are expected to visit medical institutions to undergo examination, it is important to meet an increase in demand for medical care and to ensure implementation of in-hospital infection control measures at medical institutions.
5) In preparation for a transition to the domestic pandemic phase, it is important to quickly develop systems to deal with the spread of infection by preparing to secure medical systems and to ensure the stability of the daily lives of the people and the national economy.
6) It is important to quickly prepare for an early start of vaccination of the people and
administer vaccination as soon as possible when the preparation has been completed.

(1) Implementation System

(1)-1 Revision of the basic action policy

The national government should revise the basic action policy based on the opinion of the Advisory Committee on Basic Action Policies and announce the entry into the early phase of a domestic outbreak and an action policy for the phase. (Cabinet Secretariat, Ministry of Health, Labour and Welfare and all other ministries and agencies)

(1)-2 Establishment of local headquarters for countermeasures

The national government should establish local headquarters for countermeasures when it recognizes the need to do so in order to support prefectural governments in conducting expert surveys in the early phase of an outbreak in light of the outbreak situation. (Ministry of Health, Labour and Welfare, Cabinet Secretariat and other relevant ministries and agencies)

(1)-3 International cooperation

(i) The national government should report information concerning the domestic outbreak to the WHO based on the International Health Regulations (IHR). (Ministry of Health, Labour and Welfare)

(ii) The national government should cooperate with WHO reference laboratories, etc. under OIE and other international organizations with regard to the identification and analysis of the virus and case definitions and share information with them. (Ministry of Health, Labour and Welfare, Ministry of Foreign Affairs, Ministry of Education, Culture, Sports, Technology and Science, Ministry of Agriculture, Forestry and Fisheries)

(iii) The national government should promote cooperation and collaboration concerning development, etc. of vaccines and drugs. (Ministry of Health, Labour and Welfare and other relevant ministries and agencies)

(1)-4 Issuance of a declaration of emergency

(1)-4-1 A declaration of emergency

(i) Depending on the outbreak situation of PI, the national government should seek the opinion of the Advisory Committee on Basic Action Policies, issue a
A declaration of emergency indicates a situation in which the capacity of the provision of medical care will be exceeded unless countermeasures against PI are implemented, making it difficult to protect the people’s life and health and leading to social unrest. Procedures leading up to the issuance of a declaration of emergency are roughly as follows:

- When there is only limited information in the early phase of the outbreak, the Ministry of Health, Labour and Welfare (including the National Institute of Infectious Diseases and quarantine stations) should analyze information concerning overseas outbreak situations, information provided by the WHO and information concerning patients in Japan, including the results of active epidemiological surveys, seek opinions from experts, etc. and report relevant information to the head of the national headquarters for countermeasures.

- The head of the national headquarters for countermeasures should seek the opinion of the Advisory Committee on Basic Action Policies as to whether the current situation meets the criteria for the “emergency situation regarding PI.” In order to make decisions on important matters concerning the implementation of countermeasures in response to the emergency situation regarding PI, the head should also seek the opinion of the Advisory

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68 Article 32 of the Act on Special Measures
   ○ When an outbreak of PI occurs somewhere in the world, the Minister of Health, Labour and Welfare will announce the outbreak as the first step based on the Infectious Diseases Act in light of overseas cases of infection and the judgment of the WHO. Subsequently, in the event of a domestic outbreak of PI, judgment should be made as to whether a declaration of emergency should be issued. By that time, relevant knowledge, including cases of infection, is normally expected to be accumulated to a certain extent. Therefore, the “criteria specified by the cabinet order for an outbreak that could cause very serious damage to the people’s life and health” in Article 32(1) of the Act on Special Measures, which constitutes the criteria for the issuance of a declaration of emergency, should be when the conditions of severe cases (pneumonia, multiple organ failure, encephalopathy, etc.) are markedly serious compared with cases of ordinary influenza (Article 6(1) of the Order for Enforcement of the Act on Special Measures). The application of the criteria should be evaluated by the Advisory Committee on Basic Action Policies based on knowledge accumulated with regard to domestic and overseas clinical cases.

   ○ The “criteria specified by the cabinet order for an outbreak of PI which is causing or could cause significant damage to the daily lives of the people and the national economy by rapidly spreading nationwide” in Article 32(1) of the Act on Special Measures should be when the infection route for reported cases of infection cannot be identified as a result of epidemiological surveys and when there is a legitimate reason for suspecting that infection is spreading, such as when patients, etc. are acting in a way that could cause the spread of infection among the general public (Article 6(2) of the Order for Enforcement of the Act on Special Measures). The application of the criteria should be evaluated by the Advisory Committee on Basic Action Policies based on the results of active epidemiological surveys concerning patients, etc. based on Article 15 of the Infectious Diseases Act.

* When it is recognized that it has become no longer necessary to implement emergency situation measures regarding PI, a declaration of an end to emergency should be issued.

69 When the virulence of the virus is mild, a declaration of emergency will not be issued, or nor will individual emergency situation measures be taken.
Committee on Basic Action Policies with regard to the revision of the basic action policy.

- When the Advisory Committee on Basic Action Policies has concluded that the current situation meets the criteria for the “emergency situation regarding PI” as a result of its expert evaluation, the head of the national headquarters for countermeasures should make a decision on the issuance of a declaration of emergency. The head should also make a decision on the proposed revision in light of the expert evaluation of the revision of the basic action policy.
- The head of the national headquarters for countermeasures should issue a declaration of emergency and revise the basic action policy.
- At the same time, the head of the national headquarters for countermeasures should report on the issuance of a declaration of emergency to the Diet.

(ii) The declaration of emergency should announce the period and areas of the implementation of emergency situation measures. The head of the national headquarters for countermeasures should decide the period after seeking the opinion of the Advisory Committee on Basic Action Policies. Regarding the areas,

Prefectures, which are broad-area administrative units, should be the basic unit of emergency designation, and the head of the national headquarters for countermeasures should designate the prefectures where an outbreak has occurred and neighboring prefectures as emergency areas. However, consideration should also be given to flexible designation of emergency areas in light of the movement of people. When an outbreak has occurred in an area where people come together from across the country, the possibility of designating the whole of Japan as an emergency area should be considered at an early stage in light of the epidemic situation.

(1)-4-2 Establishment of municipal headquarters for countermeasures

Municipal governments should immediately establish municipal headquarters for countermeasures when a declaration of emergency has been issued.\(^70\)

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\(^{70}\) Article 36 of the Act on Special Measures
The national government should gather necessary information concerning such matters as overseas outbreak situations of PI and the safety and effectiveness of anti-influenza virus drugs through international organizations and other countries. (Ministry of Health, Labour and Welfare, Ministry of Foreign Affairs)

(2)-2 Surveillance
(i) As in the overseas outbreak phase, the national government should strengthen the assessment of the total number of patients infected with PI and the status of mass infection at schools and other facilities. (Ministry of Health, Labour and Welfare, Ministry of Education, Culture, Sports, Technology and Science)
(ii) The national government should gather clinical information concerning patients infected with PI in order to quickly provide medical institutions, etc. with useful information concerning symptoms and treatment. (Ministry of Health, Labour and Welfare)
(iii) The national government should assess the domestic outbreak situation in real time to the maximum possible extent and quickly provide prefectural governments, etc. with information concerning the outbreak situation. Prefectural governments, etc., in cooperation with the national government, should implement necessary measures. (Ministry of Health, Labour and Welfare)

(2)-3 Survey and research
(i) In the early phase, the national and prefectural governments, etc. should dispatch active epidemiological survey teams when domestic patients have been identified and cooperate with each other in conducting surveys and gathering and analyzing information concerning such matters as infection routes, the infectious capability and the incubation period. (Ministry of Health, Labour and Welfare)
(ii) The national government should quickly conduct surveys, research and analysis concerning the effectiveness of the rapid diagnostic kit for pandemic influenza and the treatment effects and reflect the results in countermeasures. (Ministry of Health, Labour and Welfare)

(3) Communication

(3)-1 Provision of information
(i) By making use of all available media and organizations, the national government should provide the people with information concerning domestic and overseas outbreak situations and specific countermeasures as well as the decision-making process regarding countermeasures, reasons for the implementation of countermeasures and the implementing entities in detail, in an easy-to-understand manner, and, to the maximum possible extent, in real time. (relevant ministries and agencies)

(ii) In order to facilitate understanding of measures to be taken by individual persons, the national government should remind the people that anyone may be infected by PI and raise awareness about infection control measures to be implemented at the individual level and actions to be taken when they have been infected or are suspected to have been infected (e.g., how to undergo examination). The national government should also provide information concerning infection control measures at schools and child care facilities as well as in workplaces in an appropriate manner. (Ministry of Health, Labour and Welfare, relevant ministries and agencies)

(iii) The national government should identify what information the people and relevant organizations need in light of inquiries received from the people by call centers and information received from local governments and other relevant organizations and should provide information to address the concerns of local residents as necessary. It should also reflect the results in future provision of information. (Ministry of Health, Labour and Welfare)

(3)-2 Information sharing

The national government should strengthen real-time, two-way sharing of information with local governments and relevant organizations through the Internet and other media so as to quickly communicate its policy for countermeasures and assess the implementation status of the measures. (Ministry of Health, Labour and Welfare)

(3)-3 Strengthening of the operation of call centers, etc.

(i) The national government should strengthen the operation of call centers, etc. (Ministry of Health, Labour and Welfare)

(ii) The national government should distribute a revised FAQ to prefectural and municipal governments in accordance with changes in the situation and request them to strengthen the operation of call centers, etc. (Ministry of Health, Labour
(4)-1 Measures to prevent the spread of domestic infection

(i) In the early phase of a local outbreak, prefectural governments, etc., in cooperation with the national government, should implement measures based on the Infectious Diseases Act, including handling of patients (treatment, hospitalization, etc.) and persons who have close contact with patients, such as those who live with infected persons (requesting them to refrain from going out, observing their health conditions and instructing them in how to act, etc.) (Ministry of Health, Labour and Welfare)

(ii) The national and prefectural governments, etc. should make the following requests to the people and business operators, directly or through business associations:
   - Encourage the people, business establishments and welfare facilities to take basic infection control measures, such as wearing a mask, following “cough etiquette”, washing hands, avoiding crowded places and making staggered commuting. The national and prefectural governments, etc. should also request business establishments to ensure health management of employees who show symptoms of the infectious disease and encourage such employees to undergo examination. (Ministry of Health, Labour and Welfare)
   - Request business operators to thoroughly implement infection control measures in workplaces. (relevant ministries and agencies)
   - Indicate a benchmark useful for implementation of infection control measures at schools, child care facilities, etc. as necessary in light of the virulence of the virus and other factors and request school operators to appropriately implement temporary closure (closure of classes and schools) based on the School Health and Safety Act. (Ministry of Education, Culture, Sports, Technology and Science, Ministry of Health, Labour and Welfare)
   - Request public transport operators to take appropriate infection control measures, including encouraging passengers to wear a mask. (Ministry of Health, Labour and Welfare, Ministry of Land, Infrastructure, Transport and Tourism)

(iii) The national government should request prefectural governments, etc. and
relevant organizations to strengthen infection control measures at facilities where persons with underlying diseases gather, such as hospitals and nursing homes for elderly people, as well as at facilities where a large number of people live. (Ministry of Health, Labour and Welfare)

(4)-2 Border control measures

(i) The national government should continue to provide information to, and call the attention of, travelers to other countries and entrants into Japan with regard to PI (Ministry of Foreign Affairs, Ministry of Health, Labour and Welfare)

(ii) The national government should continue support for Japanese nationals staying abroad. (Ministry of Foreign Affairs, and other relevant ministries and agencies)

(iii) Depending on the circumstances, the national government should recommend that the people refrain from going abroad unless it is urgent and unavoidable. It should request airlines, etc. to refuse boarding as necessary when persons who show such symptoms as fever try to take boarding procedures. (Ministry of Health, Labour and Welfare, Ministry of Land, Infrastructure, Transport and Tourism)

(iv) The national government should scale back measures to strengthen quarantine when they are deemed to have become not reasonable in light of such factors as the virulence and infectious capability of the virus and overseas and domestic outbreak situations. (relevant ministries and agencies)

(4)-3-1 Preventive vaccination (vaccination of the people)

The national government should continue countermeasures implemented in the overseas outbreak phase, secure vaccine supplies and prepare for quick supply. It should also proceed with prior vaccination and should make a decision on new extraordinary vaccination based on Article 6(3) of the Preventive Vaccinations Act in light of information concerning the new PI of the outbreak after seeking a recommendation from the Advisory Committee on Basic Action Policies.71

(i) The national government should determine the priority order of vaccination in light of the basic concept of the priority order and information concerning the outbreak situation of PI, including which types of persons are likely to develop severe cases. (Ministry of Health, Labour and Welfare, Cabinet Secretariat)

(ii) While it will take a certain amount of time before a sufficient amount of pandemic vaccines for the entire population is produced, municipal

71 It is not that vaccination of the people cannot start until prior vaccination of all eligible persons is completed.
governments, in cooperation with relevant parties, should start vaccination as soon as the supply is ready. The national government should request prefectural and municipal governments to start providing information concerning vaccination. (Ministry of Health, Labour and Welfare)

(iii) When administering vaccination, municipal governments, in cooperation with the national and prefectural governments, should secure places of vaccination by using public facilities such as public health centers and schools and by consigning vaccination to medical institutions. In principle, municipal governments should administer vaccination to residents in their respective municipalities as a group vaccination. (Ministry of Health, Labour and Welfare)

(4)-3-2 Monitoring

The national government should conduct overall evaluation of monitoring at the completion of vaccination. (Ministry of Health, Labour and Welfare)

(4)-4 Measures to be taken when a declaration of emergency has been issued

When a declaration of emergency has been issued, the following measures, in addition to the above countermeasures, should be implemented as necessary:

(i) In an emergency situation regarding PI, prefectural governments should take the following measures as necessary based on the basic action policy:

- Based on Article 45(1) of the Act on Special Measures, prefectural governments should request residents to refrain from going out unless it is necessary to do so in order to maintain their daily lives and to thoroughly implement basic infection control measures for a period prescribed in light of the incubation period and the period necessary for recuperation. As for the area of implementation of emergency situation measures, it is an option to select areas (with municipalities and blocks within prefectures as units) where the measures are expected to be effective in preventing the spread of infection in light of the movement of the people.

- Based on Article 45(2) of the Act on Special Measures, prefectural governments should request schools, child care facilities, etc. to restrict the use of facilities (limited to the facilities specified by Article 11 of the Order for Enforcement of the Act on Special Measures) (temporary closure, postponement of entrance examinations, etc.) for a prescribed period. When the request has been refused, they should issue order based on Article 45(3) of the Act on Special Measures only if they recognize a particular need to do
so in order to prevent the spread of infection with PI, protect the people’s lives and health and avoid disruptions to the people’s daily lives and the national economy.

Prefectural governments should disclose the names of facilities to which they have issued requests and instructions.

- Based on Article 24(9) of the Act on Special Measures, prefectural governments should request facilities other than schools, child care facilities, etc., including workplaces, to thoroughly implement infection control measures. They should request facilities which have refused to meet the request based on Article 24(9) of the Act on Special Measures and which are judged to have public health problems (limited to the facilities specified by Article 11 of the Order for Enforcement of the Act on Special Measures) to restrict the use of facilities or thoroughly implement basic infection control measures based on Article 45(2) of the Act on Special Measures. When the request based on Article 45(2) of the Act on Special Measures has been refused, prefectural governments should issue order based on Article 45(3) of the Act on Special Measures only if they recognize a particular need to do so in order to prevent the spread of infection with PI, protect the people’s lives and health and avoid disruptions to the people’s daily lives and the national economy.

Prefectural governments should disclose the names of facilities to which they have issued requests and instructions based on Article 45 of the Act on Special Measures.

(ii) When a human case of infection with PI has been confirmed for the first time in the world in a sparsely populated area where there is little traffic or movement of the people due to a natural obstacle, such as a remote island or an isolated mountain area, the national government should immediately deploy medical resources intensively and consider locally-focused infection control measures based on Article 45 of the Act on Special Measures and the provisions of the Infectious Diseases Act and decide whether to implement them. (Cabinet Secretariat, Ministry of Health, Labour and Welfare and other relevant ministries and agencies)

(iii) Regarding vaccination of the people, municipal governments should implement the extraordinary vaccination specified by Article 6(1) of the Preventive Vaccinations Act in light of the revision of the basic action policy based on the provision of Article 46 of the Act on Special Measures. (Ministry of Health,
(5) Medical Care

(5)-1 Development of medical care systems

The national government should request prefectural governments, etc. to continue the provision of medical care at dedicated outpatient departments, which handle persons who have returned from countries where an outbreak has occurred and those who have developed symptoms such as fever and respiratory problems, and the provision of consultations through dedicated consultation centers, as in the overseas outbreak phase. When the number of patients has increased, the national government should request prefectural governments, etc. to shift from the system in which dedicated outpatient departments are designated for the provision of medical care to a system in which general medical institutions also provide medical care after seeking the opinion of the Advisory Committee on Basic Action Policies. (Ministry of Health, Labour and Welfare)

(5)-2 Handling of patients and other procedures

Prefectural governments, etc., in cooperation with the national government, should in principle transfer persons diagnosed with PI to medical institutions, etc. designated for the treatment of infectious diseases for hospitalization based on the Infectious Diseases Act. While this measure should be taken when the virus is highly virulent, information concerning the virulence of the virus is expected to be limited in the early phase of an outbreak. Therefore, the measure should be taken except when the virulence of the virus has been confirmed to be mild. (Ministry of Health, Labour and Welfare)

(i) Prefectural governments, etc., in cooperation with the national government, should conduct diagnostic tests for PI, including the PCR test, through local health research centers when it has concluded that it is necessary to do so. When the number of patients infected with PI is very small, all of them should be subjected to diagnostic tests for PI, including the PCR test. However, when the number of patients has increased, such tests should be limited to severe cases. (Ministry of Health, Labour and Welfare)

(ii) Prefectural governments, etc., in cooperation with the national government and medical institutions, should, as necessary, administer anti-influenza virus drugs as a preventive measure to persons who live with patients infected with PI and
those who have close contact with them, and healthcare professionals and
ambulance service personnel who have had exposure without sufficient
protection and give them guidance on what actions to take when they have
developed symptoms. When they have developed symptoms, they should be
transferred to medical institutions, etc. designated for treatment of infectious
diseases. (Ministry of Health, Labour and Welfare)

(5)-3 Provision of information to medical institutions, etc.
The national government should continue to quickly provide information useful
for the diagnosis and treatment of pandemic influenza to medical institutions and
healthcare professionals. (Ministry of Health, Labour and Welfare)

(5)-4 Anti-influenza virus drugs
(i) In preparation for the domestic pandemic phase, the national government, in
cooperation with prefectural governments, etc., should continue to request
medical institutions to use anti-influenza virus drugs in an appropriate manner.
(Ministry of Health, Labour and Welfare)
(ii) The national government should continue to provide guidelines on appropriate
distribution of anti-influenza virus drugs. (Ministry of Health, Labour and
Welfare)

(5)-5 Patrol of medical institutions and pharmacies
In order to prevent an unexpected situation from arising due to unrest in the
vicinities of medical institutions and pharmacies, the national government should
provide guidance for prefectural police departments on necessary patrol activity and
should do coordination work. (National Police Agency)

(5)-6 Measures to be taken when a declaration of emergency has been issued
When a declaration of emergency has been issued, medical institutions and
producers and sellers of medical products and equipment as well as designated
(local) public institutions which are sellers, etc. of such products and equipment
should take necessary measures to secure the provision of medical care, production
of medical products and equipment as prescribed by operational plans\(^{72}\), in addition
to the above measures.

\(^{72}\) Article 47 of the Act on Special Measures
(6)-1 Measures to be taken by business operators

The national government should request business operators across the country to ensure thorough health management of employees and start the implementation of infection control measures in workplaces. (relevant ministries and agencies)

(6)-2 Appeal for the people and business operators

The national government should ask the people to act in an appropriate manner as consumers when purchasing foods and daily necessities and should request business operators to strive to prevent an upsurge in prices of foods and products related to daily life and avoid hoarding goods and restricting sales. (Consumer Affairs Agency, Ministry of Agriculture, Forestry and Fisheries, Ministry of Economy, Trade and Industry and other relevant ministries and agencies)

(6)-3 Measures to be taken when a declaration of emergency has been issued.

When a declaration of emergency has been issued, the following measures should be taken as necessary, in addition to the above measures:

(6)-3-1 Measures to be taken by business operators, etc.

Designated (local) public institutions should start implementing necessary measures to appropriately conduct their operations as prescribed by their operational plans. Registered business operators should make efforts to continue operations that contribute to the provision of medical care and the stability of the daily lives of the people and the national economy. In this respect, the national government should, as necessary, raise awareness about flexible enforcement of laws and regulations to facilitate continuation of such operations. It should also quickly consider other necessary measures. (relevant ministries and agencies)

(6)-3-2 Stable supply of electricity, gas and water. Designated (local) public institutions which are electricity and gas suppliers should take necessary measures to supply electricity and gas in a stable and appropriate manner in an emergency situation regarding PI as prescribed by their operational plans, including measures necessary for preventing disruptions to the

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73 Article 52 of the Act on Special Measures
supply of electricity and gas.

Prefectural and municipal governments and designated (local) public institutions which are water suppliers, including industrial water suppliers, should take necessary measures to supply water in a stable and appropriate manner in an emergency situation regarding PI as prescribed by their operational plans, including disinfection and other sanitary measures.

(6)-3-3 Securing of transportation, communications and postal mail services

Designated (local) public institutions which are transport business operators should take necessary measures to appropriately transport passengers and cargoes in an emergency situation regarding PI as prescribed by their operational plans, including checking necessary systems and implementing infection control measures.

Designated (local) public institutions which are telecommunication business operators should take necessary measures to secure communications in an emergency situation regarding PI as prescribed by their operational plans, including implementing infection control measures and operating disaster preparedness facilities.

Persons engaging in postal mail business and designated (local) public institutions which are general correspondence delivery operators should take necessary measures to secure postal mail and correspondence delivery services in an emergency situation regarding PI as prescribed by their operational plans, including implementing infection control measures.

(6)-3-4 Appeal for the people with regard to the service level

The national government should start assessing the levels of services provided by business operators and ask the people to accept the possibility that the service level will significantly decline when the infection of PI has spread. (Cabinet Secretariat and other relevant ministries and agencies)

(6)-3-5 Transportation of emergency supplies, etc.

(i) The national and prefectural governments should request designated (local) public institutions which are transport business operators to transport foods and other emergency supplies when urgently necessary. (Ministry of Land, Infrastructure, Transport and Tourism and other relevant ministries and

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74 Article 53 of the Act on Special Measures
75 Article 54 of the Act on Special Measures
(ii) The national and prefectural governments should request designated (local) public institutions which are sellers of medical products, etc. to distribute medical products and equipment when urgently necessary. (Ministry of Health, Labour and Welfare and other relevant ministries and agencies)

(iii) When designated (local) public institutions refuse to meet the above request without any legitimate reason, the national and prefectural governments should, as necessary, instruct them to transport and distribute goods. (Ministry of Land, Infrastructure, Transport and Tourism, Ministry of Health, Labour and Welfare and other relevant ministries and agencies)

(6)-3-6 Stabilization of prices of products related to daily life

As stabilizing prices of goods and ensuring appropriate supply of products related to daily life is necessary for the stability of the daily lives of the people and the national economy, the national, prefectural and municipal governments should conduct surveys and surveillance so as to prevent an upsurge in prices of such products, hoarding of goods and restriction of sales. They should also request relevant business associations, etc. as necessary to secure supply of goods and prevent opportunistic price hikes. They should also enhance the operation of consultation counters for the people and counters for gathering information from them as necessary. (Consumer Affairs Agency, Ministry of Agriculture, Forestry and Fisheries, Ministry of Economy, Trade and Industry and other relevant ministries and agencies)

(6)-3-7 Prevention of and crackdown on crimes

In order to prevent various crimes which are expected to be committed by taking advantage of social unrest, the national government should gather information concerning crimes and promote public awareness campaigns. They should also provide guidance for prefectural police departments on thorough crackdown on malicious crimes and should do coordination work. (National Police Agency)
### Domestic pandemic phase

- In any prefecture or other, the situation has become such that it is impossible to trace the history of contacts of PI patients through epidemiological surveys.
- This phase includes the period of spreading infection to the period of decreasing patients.
- The situation may vary within Japan from prefecture to prefecture.

<table>
<thead>
<tr>
<th>Pre-local outbreak phase</th>
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<tr>
<td>Human cases of PI have not occurred in the relevant prefecture.</td>
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<th>Early phase of a local outbreak</th>
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<tr>
<td>While human cases of infection with PI have occurred in the relevant prefecture, it is possible to trace the history of contacts of all patients through epidemiological surveys.</td>
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<tr>
<th>Local pandemic phase</th>
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<tbody>
<tr>
<td>In the relevant prefecture, the situation has become such that it is impossible to trace the history of contacts of PI patients through epidemiological surveys (this phase includes the period of spreading infection to the period of decreasing patients).</td>
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#### Objectives:

1) Maintain medical care systems
2) Minimize health damage
3) Minimize the impact on the daily lives of the people and the national economy

#### Approach to countermeasures:

1) As it is difficult to prevent the spread of infection, it is important to shift the main focus of countermeasures from aggressive prevention of the spread of infection at an early time to reduction of damage.

2) As the situation and the measures to be taken vary from region to region, each prefectural government should make judgment as to what measures should be taken.

3) It is important to actively provide information in order to raise awareness about medical care systems and infection control measures suited to the situation, vaccination and the status of social and economic activities and explain actions to be taken by individual persons in an easy-to-understand manner.

4) It is important to reduce the burden on medical care systems by minimizing the number of hospitalizations and severe cases during the peak period.

5) It is important to minimize health damage by making every possible effort to maintain medical care systems so as to enable patients requiring treatment to receive appropriate treatment.

6) Although the number of absent workers is expected to surge, it is important to continue business operations, including the operation of necessary infrastructures, in
order to minimize the effects on the daily lives of the people and the national economy. It is also important to continue other social activities to the maximum possible extent.

7) In order to reduce the burden on medical care systems by lowering the number of hospital visits, hospitalizations and severe cases, it is important to quickly make preparations for early vaccination of the people. When the preparation has been completed, vaccination of the people should be implemented as soon as possible.

8) It is important to scale back or discontinue measures whose necessity has decreased.

(1) Implementation System

(1)-1 Revision of the basic action policy

The national government should revise the basic action policy based on the opinion of the Advisory Committee on Basic Action Policies and announce the entry into the domestic pandemic phase and an action policy for the phase. (Cabinet Secretariat, Ministry of Health, Labour and Welfare and all other ministries and agencies)

(1)-2 Measures to be taken when a declaration of emergency has been issued

When a declaration of emergency has been issued, the following measures should be implemented as necessary, in addition to the above countermeasures:

(i) When a declaration of emergency has been issued, municipal governments should immediately establish municipal headquarters for countermeasures.76

(ii) When it has become impossible for a local government to implement emergency situation measures because of the spread of infection of PI, such measures as consigning the implementation to another local government and providing support, should be taken based on the provisions of the Act on Special Measures.77

(2) Surveillance and Information Gathering

(2)-1 International information gathering

The national government should continue to gather necessary information concerning overseas outbreak situations of PI and actions taken by other countries

76 Article 36 of the Act on Special Measures
77 Articles 38 and 39 of the Act on Special Measures
through international organizations and other countries. (Ministry of Health, Labour and Welfare, Ministry of Foreign Affairs)

(2)-2 Surveillance

When the number of patients nationwide has increased to hundreds, the national government should leave it to each prefectural government to assess the total number of patients infected with PI. The activity to enhance the assessment of mass infection at schools and other facilities should return to routine surveillance. (Ministry of Health, Labour and Welfare, Ministry of Education, Culture, Sports, Technology and Science)

【Actions to be taken by regions (prefectures) in the pre-local outbreak and local outbreak phases】
(i) The national government should continue to assess the total number of patients infected with PI. (Ministry of Health, Labour and Welfare)

【Actions to be taken by regions (prefectures) in the local pandemic phase】
(i) The national government should discontinue the assessment of the total number of patients infected with PI and maintain routine surveillance. (Ministry of Health, Labour and Welfare)
(ii) The national government should continue to assess the outbreak situation in real time and quickly provide information concerning the outbreak situation to prefectural governments, etc. Prefectural governments, in cooperation with the national government, should implement necessary measures (Ministry of Health, Labour and Welfare)

(2)-3 Surveys and research

The national government should continue to gather and analyze information concerning such matters as infection routes, the infectious capability and the incubation period and quickly conduct surveys, research and analysis necessary for countermeasures, including with regard to the effectiveness of the rapid diagnostic kit for pandemic influenza and, in particular, symptoms, treatment methods and clinical outcomes of severe cases. (Ministry of Health, Labour and Welfare)
(3)-1 Provision of information

(i) By making use of all available media and organizations, the national government should continue to provide the people with information concerning domestic and overseas outbreak situations and specific countermeasures as well as the decision-making process regarding countermeasures, reasons for the implementation of countermeasures and the implementing entities in detail, in an easy-to-understand manner, and, to the maximum possible extent, in real time. (relevant ministries and agencies)

(ii) In order to facilitate understanding of measures to be taken by individual persons, the national government should continue to raise awareness about medical care systems suited to the epidemic situation in each prefecture and appropriately provide information concerning infection control measures at schools and child care facilities as well as in workplaces. The national government should also provide information concerning the status of social activities. (Ministry of Health, Labour and Welfare and other relevant ministries and agencies)

(iii) The national government should identify what information the people and relevant organizations need in light of inquiries received from the people by call centers and information received from local governments and other relevant organizations and should reflect the results in future provision of information. (Ministry of Health, Labour and Welfare)

(3)-2 Information sharing

The national government should continue real-time, two-way sharing of information with local governments and relevant organizations through the Internet and other media so as to communicate its policy for countermeasures and accurately assess the epidemic situation and the status of implementation of countermeasures on a prefecture-by-prefecture basis. (Cabinet Secretariat, Ministry of Health, Labour and Welfare)

(3)-3 Continuation of the operation of call centers

(i) The national government should continue the operation of the national call center. (Ministry of Health, Labour and Welfare)

(ii) The national government should distribute a revised Q&A to prefectural and municipal governments in accordance with changes in the situation and request them to continue the operation of call centers. (Ministry of Health, Labour and
(4)-1 Measures to prevent the spread of domestic infection

(i) The national and prefectural governments, etc. should make the following requests to the people and business operators, directly or through business associations:

- Strongly encourage the people, business establishments and welfare facilities to take basic infection control measures, such as wearing a mask, following cough etiquette, washing hands, avoiding crowded places and making staggered commuting. The national and prefectural governments, etc. should also request business establishments to ensure health management of employees who show symptoms of the infectious disease and encourage such employees to undergo examination. (Ministry of Health, Labour and Welfare)

- Request business operators to thoroughly implement infection control measures in workplaces. (relevant ministries and agencies)

- Indicate a benchmark useful for implementation of infection control measures at schools, child care facilities, etc. as necessary in light of the virulence of the virus and other factors and request school operators to appropriately implement temporary closure (closure of classes and schools) based on the School Health and Safety Act. (Ministry of Education, Culture, Sports, Technology and Science, Ministry of Health, Labour and Welfare)

- Request public transport operators to take appropriate infection control measures, including encouraging passengers to wear a mask. (Ministry of Health, Labour and Welfare, Ministry of Land, Infrastructure, Transport and Tourism)

(ii) The national government should continue to request prefectural governments, etc. and relevant organizations to strengthen infection control measures at facilities where persons with underlying diseases gather, such as hospitals and nursing homes for elderly people, as well as at facilities where a large number of people live. (Ministry of Health, Labour and Welfare)

78 The effect of preventing the spread of infection weakens as the infection spreads, so moderating this measure may be considered as an option in accordance with the situation.
(iii) As priority is given to the treatment of patients in the local pandemic phase, the national government, in cooperation with prefectural governments, etc., should request medical institutions to refrain from administering anti-influenza virus drugs to persons who have close contact with patients (excluding persons who live with patients) in principle. They should also decide whether or not to continue preventive administration of such drugs to persons who live with patients after evaluating the expected effects. (Ministry of Health, Labour and Welfare)

(iv) In the local pandemic phase, prefectural governments, etc. should discontinue measures specific to persons who have close contact with patients (requesting them to refrain from going out, observing their health conditions, etc.).

(4)-2 Border control measures

Refer to the descriptions in the section concerning the early phase of a domestic outbreak.

(4)-3 Preventive vaccination

The national government should continue countermeasures implemented in the early phase of a domestic outbreak, secure vaccine supplies and supply vaccines quickly. It should also proceed with prior vaccination, while municipal governments should proceed with new extraordinary vaccination based on the Article 6(3) of the Preventive Vaccinations Act. (Ministry of Health, Labour and Welfare, Cabinet Secretariat, and other relevant ministries and agencies)

(4)-4 Measures to be taken when a declaration of emergency has been issued

When a declaration of emergency has been issued, the following measures should be implemented as necessary, in addition to the above countermeasures:

(i) In an emergency situation regarding PI, the burden on local medical care systems will become excessive as a result of an increase in the number of patients and the number of deaths is expected to increase because of a lack of appropriate medical care. Under such extraordinary circumstances, prefectural governments should take the following measures as necessary based on basic action policies.

- Based on Article 45(1) of the Act on Special Measures, prefectural governments should request residents to refrain from going out unless it is necessary to do so in order to maintain their daily lives and to thoroughly
implement basic infection control measures for a prescribed period and in designated areas.

- Based on Article 45(2) of the Act on Special Measures, prefectural governments should request schools, child care facilities, etc. to restrict the use of facilities (temporary closure, postponement of entrance examinations, etc.) for a prescribed period. They should issue instructions to schools, child care facilities, etc. which refuse to meet the request based on Article 45(3) of the Act on Special Measures only if they recognize a particular need to do so in order to prevent the spread of infection with PI, protect the people’s lives and health and avoid disruptions to the people’s daily lives and the national economy.

Prefectural governments should disclose the names of facilities to which they have issued requests and instructions.

- Based on Article 24(9) of the Act on Special Measures, prefectural governments should request facilities other than schools, child care facilities, etc., including workplaces, to thoroughly implement infection control measures. They should request facilities which have refused to meet the request based on Article 24(9) of the Act on Special Measures and which are judged to have public health problems (limited to the facilities specified by Article 11 of the Order for Enforcement of the Act on Special Measures) to restrict the use of facilities or thoroughly implement basic infection control measures based on Article 45(2) of the Act on Special Measures. When the request based on Article 45(2) of the Act on Special Measures has been refused, prefectural governments should issue instructions based on Article 45(3) of the Act on Special Measures only if they recognize a particular need to do so in order to prevent the spread of infection with PI, protect the people’s lives and health and avoid disruptions to the people’s daily lives and the national economy.

Prefectural governments should disclose the names of facilities to which they have issued requests and instructions based on Article 45 of the Act on Special Measures.

(ii) The national government should continue countermeasures implemented in the early phase of a domestic outbreak, secure vaccine supplies and quickly supply vaccines. At the same time, it should proceed with vaccination of the people based on Article 46 of the Act on Special Measures. (Ministry of Health, Labour and Welfare, Cabinet Secretariat and other relevant ministries and
(5)-1 Handling of patients, etc.

The national government should request prefectural governments, etc. to take the following measures. (Ministry of Health, Labour and Welfare)

【Actions to be taken by regions (prefectures) in the pre-local outbreak and local pandemic phases】
(i) Continue to implement such measures as diagnosis and treatment at dedicated outpatient departments and hospitalization of patients.
(ii) Discontinue hospitalization when necessary based on the Infectious Diseases Act and shift from the system in which patients are handled by dedicated outpatient departments to the system they are handled by general medical institutions as well.

【Actions to be taken by regions (prefectures) in the local pandemic phase】
(i) Discontinue the operation of dedicated outpatient departments and consultation centers and the hospitalization of patients based on the Infectious Diseases Act. Patients should in principle be diagnosed and treated by general medical institutions, excluding those which are exempted from the diagnosis and treatment of PI.
(ii) Raise relevant organizations’ awareness about the requirement that hospitalization be limited to severe cases, with other patients receiving care at home.
(iii) Raise awareness about the national government’s policy concerning the issuing and sending of prescriptions for anti-influenza virus drugs via fax when they have conducted diagnosis regarding the presence or absence of infection with PI and the condition of chronic diseases through telephone consultation.
(iv) Check the working condition of employees at medical institutions and stocks of medical equipment and products and drugs and do coordination work so as to ensure that diagnosis and treatment of PI and other diseases are continued.

(5)-2 Provision of information to medical institutions, etc.

The national government should continue to quickly provide information useful
for the diagnosis and treatment of pandemic influenza to medical institutions and healthcare professionals. (Ministry of Health, Labour and Welfare)

(5)-3 Stockpiling and usage of anti-influenza virus drugs

The national government should assess the amount of anti-influenza virus drugs stockpiled by the national and prefectural governments and investigate the distribution status of anti-influenza virus drugs in each prefecture and check whether anti-influenza virus drugs are supplied to regions which need them in light of the outbreak situation. The national government should also make such adjustments as allocating anti-influenza virus drugs out of its stockpiles in response to prefectural governments’ requests. (Ministry of Health, Labour and Welfare)

(5)-4 Support for patients receiving care at home

Municipal governments, in cooperation with the national and prefectural governments as well as relevant organizations, should provide support (patrol, provision of meals and transportation to medical institutions) for patients receiving care at home when requested by them or medical institutions, etc. They should also handle the death of patients at home.

(5)-5 Patrol of medical institutions and pharmacies

In order to prevent an unexpected situation from arising from unrest in the vicinities of medical institutions and pharmacies, the national government should continue to provide guidance for prefectural police departments about necessary patrol activity and should do coordination work. (National Police Agency)

(5)-6 Measures to be taken when a declaration of emergency has been issued

When a declaration of emergency has been issued, the following measures should be taken as necessary, in addition to the above measures:

(i) Medical institutions and producers and sellers of medical products and equipment as well as designated (local) public institutions which are sellers, etc. of such products and equipment should take necessary measures to secure the provision of medical care, production of medical products and equipment as prescribed by operational plans.79.

(ii) When the capacity of medical institutions has become insufficient, prefectural governments, etc., in cooperation with the national government, should permit

79 Article 47 of the Act on Special Measures
hospitalization of patients above the limit on the number of hospitalized patients at each medical institution\textsuperscript{80}. From the perspective of securing medical care systems, preventing infection and promoting hygiene, prefectural governments should establish temporary medical institutions\textsuperscript{81} so as to provide medical care to patients who have developed symptoms of PI and need to visit outpatient departments and patients whose condition is relatively mild but who need to be hospitalized because they have difficulty receiving care at home. In cases where temporary medical facilities have provided medical care, they should gradually be closed after the epidemic peak in accordance with the situation after transferring patients to medical institutions. (Ministry of Health, Labour and Welfare)

\textbf{(6) Ensuring the Stability of the Daily Lives of the People and the National Economy}

\textbf{(6)-1 Measures to be taken by business operators}

The national government should request business operators across the country to ensure thorough health management of employees and implement infection control measures in workplaces. (relevant ministries and agencies)

\textbf{(6)-2 Appeal for the people and business operators}

The national government should ask the people to act in an appropriate manner as consumers when purchasing foods and daily necessities and request business operators to strive to prevent an upsurge in prices of foods and products related to daily life and avoid hoarding goods and restricting sales. (Consumer Affairs Agency, Ministry of Agriculture, Forestry and Fisheries, Ministry of Economy, Trade and Industry and other relevant ministries and agencies)

\textbf{(6)-3 Measures to be taken when a declaration of emergency has been issued.}

When a declaration of emergency has been issued, the following measures should be taken as necessary, in addition to the above measures:

\textbf{(6)-3-1 Continuation of operations, etc.}

\textsuperscript{80} Article 10 of the Ordinance for Enforcement of the Medical Care Act
\textsuperscript{81} Article 48(1) and (2) of the Act on Special Measures (Depending on the situation, temporary medical facilities may be established in municipalities other than cities where public health centers are located and special wards of Tokyo.)
Designated (local) public institutions, and, depending on the implementation status of prior vaccination, registered business operators, should continue their operations. In this respect, the national government should raise awareness about flexible enforcement of laws and regulations to facilitate continuation of such operations as necessary. (relevant ministries and agencies)

The national government should check the status of continuation of operations and the status of infection with PI among employees at individual business operators and quickly consider necessary measures. (relevant ministries and agencies)

(6)-3-2 Stable supply of electricity, gas and water
Refer to the descriptions in the section concerning the early phase of a domestic outbreak.

(6)-3-3 Securing of transportation, communications and postal mail services
Refer to the descriptions in the section concerning the early phase of a domestic outbreak.

(6)-3-4 Appeal for the people with regard to the service level
The national government should assess the levels of services provided by business operators and ask the people to accept the possibility that the service level will significantly decline when the infection of PI has spread. (Cabinet Secretariat and other relevant ministries and agencies)

(6)-3-5 Transportation of emergency supplies, etc.
Refer to the descriptions in the section concerning the early phase of a domestic outbreak.

(6)-3-6 Requests for sale of goods, etc.82
(i) When securing goods necessary for implementing countermeasures, prefectural governments should in principle obtain the owners’ prior consent to their requests for the sale of the goods. When the owners refuse to meet the requests without a legitimate reason, such as because the goods are unusable due to an emergency situation regarding PI and because the goods are already subject to expropriation by other prefectures, prefectural governments should expropriate...

82 Article 55 of the Act on Special Measures
the goods as necessary.

(ii) Prefectural governments should order business operators to store specified goods when that is urgently necessary for securing specified goods.

(6)-3-7 Stabilization of prices of products related to daily life, etc.

(i) As stabilizing prices of goods and ensuring appropriate supply of products related to daily life is necessary for the stability of the daily lives of the people and the national economy, the national, prefectural and municipal governments should conduct surveys and surveillance so as to prevent an upsurge in prices of such products, hoarding of goods and restriction of sales. They should also request relevant business associations, etc. as necessary to secure supply of goods and prevent opportunistic price hikes. (Consumer Affairs Agency, Ministry of Agriculture, Forestry and Fisheries, Ministry of Economy, Trade and Industry and other relevant ministries and agencies)

(ii) The national, prefectural and municipal governments should ensure quick and appropriate sharing of information with the people with regard to the trends of supply and demand and prices of products related to daily life and the contents of implemented measures. They should also enhance the operation of consultation counters for the people and counters for gathering information from them.

(i) (Consumer Affairs Agency, Ministry of Agriculture, Forestry and Fisheries, Ministry of Economy, Trade and Industry and other relevant ministries and agencies)

(ii) When a supply shortage of rice, wheat or other grains has occurred or may occur, the national government should consider using stockpiled grains. (Ministry of Agriculture, Forestry and Fisheries and other relevant ministries and agencies)

(iii) When a price upsurge or supply shortage of products related to daily life has occurred or may occur, the national, prefectural and municipal governments should take appropriate measures as prescribed by their respective action plans. (Consumer Affairs Agency, Ministry of Agriculture, Forestry and Fisheries, Ministry of Economy, Trade and Industry, and other relevant ministries and agencies)

(6)-3-8 Living support for people who need to be looked after in the event of an

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83 Article 59 of the Act on Special Measures
outbreak of PI

The national government should request municipal governments to provide living support to people who need to be looked including elderly and disabled people living in their own homes (patrol, nursing, home-visit medical care, provision of meals, etc.), and take care of transportation of such people and procedures related to the death of such people. (Ministry of Health, Labour and Welfare)

(6)-3-9 Prevention of and crackdown on crimes

Refer to the descriptions in the section concerning the early phase of a domestic outbreak.

(6)-3-10 Special cases of burial and cremation, etc.\(^\text{84}\)

(i) The national government should request municipal governments, through prefectural governments, to ask crematorium operators to keep crematoriums operating to the maximum possible extent. (Ministry of Health, Labour and Welfare)

(ii) When it has become clear that the number of deaths has increased so much as to exceed the cremation capacity, the national government should request municipal governments, through prefectural governments, to immediately secure facilities where bodies can be temporarily stored. (Ministry of Health, Labour and Welfare)

(iii) In an emergency situation regarding PI, the national government should establish special cases of burial and cremation procedures, including the granting of permission of burial and cremation by the heads of municipalities other than the heads of municipalities to which the deceased belong when it is difficult to smoothly conduct burial and cremation and when it recognizes an urgent need for burial and cremation. (Ministry of Health, Labour and Welfare)

(iv) With regard to the burial and cremation of bodies, prefectural governments should quickly gather information concerning cemeteries and crematoriums, including in other regions, and make arrangements for the transportation of bodies.

(6)-3-11 Protection of rights and interests of patients infected with PI\(^\text{85}\)

The national government should consider the necessity of measures based on the

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\(^{84}\) Article 56 of the Act on Special Measures

\(^{85}\) Article 57 of the Act on Special Measures
Act on Special Measures concerning Preservation of Rights and Interests of Victims of Specified Disaster. When necessary, the national government should designate measures that should be applied to the current emergency situation regarding PI from among special measures, including measures related to the extension of the expiry date concerning administrative rights and interests and measures related to exemption from obligations not performed within the prescribed period. (Cabinet Secretariat and other relevant ministries and agencies)

(6)-3-12 Loans related to an emergency situation regarding PI

(i) Government-affiliated financial institutions, etc. should develop systems for business continuity in advance, and in an emergency situation regarding PI, they should implement appropriate measures in accordance with the circumstances, including extending the redemption date and the grace period, refinancing of previous bonds and reducing interest rates when necessary.

(ii) Japan Finance Corporation, etc. should implement appropriate measures in accordance with the circumstances, including providing special loans in order to support the stability of the management of small and medium-size enterprises and agricultural, forestry and fisheries businesses which will be affected in an emergency situation regarding PI.

(iii) When the competent minister recognizes the need for crisis management operations as stipulated in Article 11(2) of the Japan Finance Corporation Act in an emergency situation regarding PI, Japan Finance Corporation should implement operations that facilitate crisis management so as to enable designated financial institutions specified in the same article to quickly and smoothly provide loans necessary for dealing with damage inflicted by the emergency situation and to implement crisis management operations, including bill discounting.

(6)-3-13 Moratorium on financial debts

When there is the risk that the economic order will be disrupted in an emergency situation regarding PI, the national government should quickly consider countermeasures.

(6)-3-14 Monetary and financial stability

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86 Article 60 of the Act on Special Measures
87 Article 58 of the Act on Special Measures
88 Article 61 of the Act on Special Measures
In an emergency situation regarding PI, the Bank of Japan should issue banknotes and conduct currency and monetary adjustments as Japan’s central bank as prescribed by its operational plan and take necessary measures to contribute to the maintenance of financial stability by ensuring smooth financial settlements between banks and other financial institutions.
Remission Phase

- The number of human cases of PI is at a low level and is decreasing.
- The pandemic has ended for the moment.

Objectives:
1) Restore the daily lives of the people and the national economy and prepare for a second wave of the pandemic

Approach to countermeasures:
1) To prepare for the second wave of the pandemic, it is important to evaluate countermeasures taken against the first wave and achieve early recovery from the first wave’s impacts on medical care systems as well as social and economic activities, including procurement of equipment, materials and medical products.
2) Information concerning the end of the first wave as well as the possibility of a second wave and the need to prepare for it should be provided to the people.
3) It is important to detect a second wave at an early time by continuing to gather information.
4) Vaccination of the people should start in order to reduce the impact of a second wave.

(1) Implementation System

(1)-1 Revision of the basic action policy

The national government should revise the current basic action policy based on the opinion of the Advisory Committee on Basic Action Policies and post the public notice of the entry into the remission phase and the policy concerning the countermeasures that will be scaled back or discontinued. (Cabinet Secretariat, Ministry of Health, Labour and Welfare and all other ministries and agencies)

(1)-2 Declaration of an end to emergency

When it has become unnecessary to implement emergency measures, the national government should issue a declaration of an end to emergency and report to the Diet. (Cabinet Secretariat, Ministry of Health, Labour and Welfare and all other ministries and agencies)

Specifically, “when it has become unnecessary to implement emergency measures”

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89 When it is recognized that implementation of emergency measures against PI has become unnecessary, a declaration of an end to the emergency situation regarding PI should be issued regardless of whether or not the remission phase has started.
refers to the following cases:

- When it is presumed that most people have acquired immunity against the PI in light of the number of patients and vaccinated people.
- When the number of patients has decreased below the capacity of provision of medical care and social and economic activities have returned to normal.
- When it has become likely in light of the accumulation of cases that the numbers of new patients, severe cases and fatalities will be lower than initially expected and that the scale of the epidemic will be within the capacity of provision of medical care.

The head of the national headquarters for countermeasures should quickly make a decision based on the opinion of the Advisory Committee on Basic Action Policies while taking comprehensive account of the domestic and overseas outbreak situations and the situation of the daily lives of the people and the national economy.

(1)-3 Evaluation and revision of countermeasures

The national government should evaluate countermeasures implemented in the past phases and revise the National Action Plan and various guidelines as necessary. (Cabinet Secretariat, Ministry of Health, Labour and Welfare and other relevant ministries and agencies)

(1)-4 Abolition of the national headquarters for countermeasures

When it has become clear that the condition of patients infected with the PI is similar to or milder than the condition of patients infected with seasonal influenza, when it has been announced that the new disease has ceased to meet the criteria for pandemic influenza under the Infectious Diseases Act for reasons such as because most people have acquired immunity against it, or when the Cabinet Order established to apply the measures specified by the Infectious Diseases Act to new infectious diseases has been abolished, the national government should abolish the national headquarters for countermeasures, report to the Diet and post the public notice thereof based on the opinion of the Advisory Committee on Basic Action Policies. (Cabinet Secretariat, Ministry of Health, Labour and Welfare and all other ministries and agencies)

(1)-5 Abolition of prefectoral and municipal headquarters for countermeasures

When the national headquarters for countermeasures has been abolished,

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90 Article 21 of the Act on Special Measures
prefectural governments should promptly abolish prefectural headquarters for countermeasures, and when a declaration of an end to emergency has been issued, municipal governments should promptly abolish municipal headquarters for countermeasures.

(2) Surveillance and Information Gathering

(2)-1 International information gathering
The national government should gather necessary information concerning outbreak situations of PI and measures taken by other countries from international organizations and various countries. (Ministry of Health, Labour and Welfare, Ministry of Foreign Affairs)

(2)-2 Surveillance
(i) The national government should continue routine surveillance. (Ministry of Health, Labour and Welfare)
(ii) The national government should strengthen efforts to assess the status of mass infection at schools and other facilities in order to detect a renewed outbreak at an early time. (Ministry of Health, Labour and Welfare, Ministry of Education, Culture, Sports, Technology and Science)

(3) Communication

(3)-1 Provision of information
(i) By making use of all available media and organizations, the national government should continue to provide the people with information concerning the end of the first wave as well as the possibility of a second wave and the need to prepare for it. (Relevant ministries and agencies)
(ii) The national government should summarize inquiries received from the people by call centers and information received from local governments and other relevant organizations and should evaluate and revise the way of providing information. (Relevant ministries and agencies)

(3)-2 Information sharing
The national government should maintain the system of real-time, two-way sharing

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91 Articles 25 and 37 of the Act on Special Measures
of information with local governments and relevant organizations through the Internet and other media, communicate its policy for measures related to the re-development of the system in preparation for a second wave, and assess the situation in the field. (Cabinet Secretariat, Ministry of Health, Labour and Welfare)

(3)-3 Scaling back the operation of call centers, etc.

The national government should scale back the operation of the national call center while keeping a watch on the situation and should request prefectural and municipal governments to scale back the operation of their call centers. (Ministry of Health, Labour and Welfare)

(4) Infection Prevention/Preventing Infection from Spreading

(4)-1 Border control measures

The national government should gradually revise the contents of information provided to travelers and of alerts issued to them in light of the overseas outbreak situation. (Ministry of Foreign Affairs, Ministry of Health, Labour and Welfare)

(4)-2 Preventive vaccination

In preparation for a second wave of the pandemic, municipal governments should implement new extraordinary vaccination based on Article 6(3) of the Preventive Vaccinations Act.

(4)-3 Measures to be taken when a declaration of emergency has been issued

When a declaration of emergency has been issued, municipal governments, in cooperation with the national and prefectural governments, should implement vaccination of the people, in addition to the above countermeasures, based on Article 46 of the Act on Special Measures in preparation for a second wave of the pandemic.

(5) Medical Care

(5)-1 Medical care systems

Prefectural governments, etc., in cooperation with the national government, should return the operation of medical care systems to the normal state before the outbreak of PI (Ministry of Health, Labour and Welfare)
(5)-2 Anti-influenza virus drugs
   (i) The national government should sort out knowledge concerning PI that has been acquired in Japan and abroad, formulate guidelines for treatment, including appropriate use of anti-influenza virus drugs, and raise the awareness of prefectural governments, etc. and medical institutions about them. (Ministry of Health, Labour and Welfare)
   (ii) The national and prefectural governments should stockpile anti-influenza virus drugs as necessary in preparation for a second wave of the pandemic (Ministry of Health, Labour and Welfare)

(5)-3 Measures to be taken when a declaration of emergency has been issued
   Measures taken in the domestic pandemic phase should be scaled back or discontinued as necessary.

(6) Ensuring the Stability of the Daily Lives of the People and the National Economy

(6)-1 Appeal to people and business operators
   The national government should continue to ask the people to act in an appropriate manner as consumers when purchasing foods and daily necessities and should request business operators to strive to prevent an upsurge in prices of foods and products related to daily life and avoid hoarding goods and restricting sales. (Consumer Affairs Agency, Ministry of Agriculture, Forestry and Fisheries, Ministry of Economy, Trade and Industry, and other relevant ministries and agencies)

(6)-2 Measures to be taken when a declaration of emergency has been issued.
(6)-2-1 Resumption of operations
   (i) The national government should notify business operators across the country that they may resume operations they have scaled back or discontinued in order to concentrate on important operations essential to the continuation of business in light of the regional outbreak situation. (Ministry of Health, Labour and Welfare and other relevant ministries and agencies)
   (ii) The national government should request designated (local) public institutions and registered business operators to check the status of damage and should
provide support necessary for them to continue business in preparation for a
second wave. (Relevant ministries and agencies)

(6)-2-2 Loans related to an emergency situation regarding PI
Refer to the descriptions in the section concerning the domestic pandemic phase.

(6)-2-3 Scaling-back and discontinuation of emergency measures regarding PI
(i) In light of the domestic situation, the national government should continue
measures taken in the domestic pandemic phase, and when it has become
unreasonable to take them, it should scale back or discontinue them. (Cabinet
Secretariat and relevant ministries and agencies)
(ii) Prefectural and municipal governments and designated (local) public
institutions, in cooperation with the national government, should scale back or
discontinue emergency measures regarding PI when it has become unreasonable
to take them in light of the domestic situation. (Ministry of Health, Labour and
Welfare and other relevant ministries and agencies)
The scope and total number of persons eligible for prior vaccination and the vaccination priority order are determined in a flexible manner by the national headquarters for countermeasures in the event of an outbreak of PI in light of the outbreak situation. In order to quickly develop a vaccination system in the event of an outbreak, the following basic concept has been formulated.

1) Registered business operators eligible for prior vaccination

A. Medical care

(A-1: PI medical care type; A-2: Severe/emergency case medical care type)

<table>
<thead>
<tr>
<th>Service/business category</th>
<th>Type</th>
<th>Subcategory</th>
<th>Social role</th>
<th>Competent ministry/agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>PI medical care type</td>
<td>A-1</td>
<td>Hospitals, clinics, pharmacies and home nursing stations which provide PI-related medical care to patients infected with PI and persons who may reasonably be assumed to have been infected</td>
<td>Providing medical care regarding PI</td>
<td>Ministry of Health, Labour and Welfare</td>
</tr>
<tr>
<td>Severe/emergency case medical care type</td>
<td>A-2</td>
<td>Emergency and critical care centers, core disaster hospitals, public hospitals, regional medical care support hospitals, national sanatoriums for Hansen’s disease patients, the National Cancer Center, National Cerebral and Cardiovascular Center, National Center for Global Health and Medicine, National Center for Child Health and Development, National Center for Geriatrics and Gerontology, hospitals affiliated with the National Hospital Organization, hospitals affiliated with the Japan Labour, Health and Welfare Organization, social insurance hospitals, koseinenkin hospitals, Japanese Red Cross Society hospitals, hospitals affiliated with the Welfare Organization Saiseikai Imperial Gift Foundation Inc., hospitals affiliated with the National Welfare Federation of Agricultural Cooperatives, hospitals affiliated with Hokkaido Shakaijigyo, hospitals affiliated with universities, secondary emergency medical care institutions, emergency medical care facilities, medical institutions that handle child</td>
<td>Providing medical care for cases in which human life and health may be severely affected or medical care is urgently necessary</td>
<td>Ministry of Health, Labour and Welfare</td>
</tr>
</tbody>
</table>
### B. Stabilizing the daily lives of the people and the national economy

(B-1: Nursing care/welfare type; B-2: Designated public institution type; B-3: Quasi-designated public institution type; B-4: Social infrastructure type; B-5: Other)

<table>
<thead>
<tr>
<th>Service/business category</th>
<th>Type</th>
<th>Subcategory</th>
<th>Social role</th>
<th>Competent ministry/agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social insurance/social welfare/nursing care</td>
<td>B-1</td>
<td>Nursing care insurance facilities (excluding those classified as A-1), designated home care service, designated locally-focused service, welfare facilities for elderly people, private nursing homes, welfare service facilities for disabled persons, support facilities for disabled persons, residential support facilities for disabled children, living support facilities, welfare facilities for children</td>
<td>Providing nursing care and welfare services the suspension of which may have critical and urgent effects on life support for users</td>
<td>Ministry of Health, Labour and Welfare</td>
</tr>
<tr>
<td>Medical products/cosmetics wholesaling</td>
<td>B-2</td>
<td>Medical product wholesaling</td>
<td>Selling necessary medical products in the event of an outbreak of PI</td>
<td>Ministry of Health, Labour and Welfare</td>
</tr>
<tr>
<td>Medical product manufacturing</td>
<td>B-2</td>
<td>Sales of medical products Manufacturing of medical products</td>
<td>Manufacture necessary medical products in the event of an outbreak of PI</td>
<td>Ministry of Health, Labour and Welfare</td>
</tr>
<tr>
<td>Medical equipment repair, sales and leasing</td>
<td>B-2</td>
<td>Medical equipment repair Medical equipment sales Medical equipment leasing</td>
<td>Selling necessary medical equipment in the event of an outbreak of PI</td>
<td>Ministry of Health, Labour and Welfare</td>
</tr>
<tr>
<td>Medical equipment manufacturing</td>
<td>Medical equipment manufacturing and sales Medical equipment manufacturing</td>
<td>Manufacturing necessary medical equipment in the event of an outbreak of PI</td>
<td>Ministry of Health, Labour and Welfare</td>
<td></td>
</tr>
<tr>
<td>Gas supply</td>
<td>B-2</td>
<td>Gas supply</td>
<td>Providing necessary gas in a stable and appropriate manner in the event of an outbreak of PI</td>
<td>Ministry of Economy, Trade and Industry</td>
</tr>
<tr>
<td>Banking</td>
<td>B-2</td>
<td>Central banking</td>
<td>Ensuring the necessary stability of currencies and the financial sector</td>
<td>Ministry of Finance</td>
</tr>
</tbody>
</table>

(Note 1) The subcategory “Severe and emergency case medical care” includes public medical institutions.
<table>
<thead>
<tr>
<th>Service/business category</th>
<th>Type</th>
<th>Subcategory</th>
<th>Social role</th>
<th>Competent ministry/agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Airport managers</td>
<td>B-2</td>
<td>Airport function facility operation</td>
<td>Operating airports so as to ensure necessary transportation of passengers and emergency goods in the event of an outbreak of PI</td>
<td>Ministry of Land, Infrastructure, Transport and Tourism</td>
</tr>
<tr>
<td>Air transportation</td>
<td>B-2</td>
<td>Air transportation</td>
<td>Transporting passengers and emergency goods as necessary in the event of an outbreak of PI</td>
<td>Ministry of Land, Infrastructure, Transport and Tourism</td>
</tr>
<tr>
<td>Shipping</td>
<td>B-2</td>
<td>Ocean-going shipping Coastal shipping Inland shipping Ship leasing</td>
<td>Transporting necessary emergency goods (medical products, foods, medical equipment, sanitary goods and fuels specified by Article 14 of the Act on Special Measures; the same shall apply hereinafter) in the event of an outbreak of PI</td>
<td>Ministry of Land, Infrastructure, Transport and Tourism</td>
</tr>
<tr>
<td>Communications</td>
<td>B-2</td>
<td>Fixed telecommunications Mobile telecommunications</td>
<td>Ensuring necessary communications in the event of an outbreak of PI</td>
<td>Ministry of Internal Affairs and Communications</td>
</tr>
<tr>
<td>Railways</td>
<td>B-2</td>
<td>Railways</td>
<td>Transporting necessary passengers and emergency goods in the event of an outbreak of PI</td>
<td>Ministry of Land, Infrastructure, Transport and Tourism</td>
</tr>
<tr>
<td>Electricity supply</td>
<td>B-2</td>
<td>Electricity supply</td>
<td>Supplying necessary electricity in a stable and appropriate manner in the event of an outbreak of PI</td>
<td>Ministry of Economy, Trade and Industry</td>
</tr>
<tr>
<td>Road freight transport</td>
<td>B-2</td>
<td>General freight vehicle transport</td>
<td>Transporting necessary emergency goods in the event of an outbreak of PI</td>
<td>Ministry of Land, Infrastructure, Transport and Tourism</td>
</tr>
<tr>
<td>Road passenger transport</td>
<td>B-2</td>
<td>Bus service Patient transport</td>
<td>Transporting passengers as necessary in the event of an outbreak of PI</td>
<td>Ministry of Land, Infrastructure, Transport and Tourism</td>
</tr>
<tr>
<td>Broadcasting</td>
<td>B-2</td>
<td>Public broadcasting Private broadcasting</td>
<td>Providing information to the people in the event of an outbreak of PI</td>
<td>Ministry of Internal Affairs and Communications</td>
</tr>
<tr>
<td>Postal service</td>
<td>B-2</td>
<td>Postal service</td>
<td>Ensuring postal service</td>
<td>Ministry of...</td>
</tr>
<tr>
<td>Service/business category</td>
<td>Type</td>
<td>Subcategory</td>
<td>Social role</td>
<td>Competent ministry/agency</td>
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</tr>
<tr>
<td>Video, sound and text information production</td>
<td>B-3</td>
<td>Newspaper publishing</td>
<td>Providing information to the people in the event of an outbreak of PI</td>
<td>Internal Affairs and Communications</td>
</tr>
<tr>
<td>River management/industrial water supply</td>
<td>—</td>
<td>River management/industrial water supply</td>
<td>Managing water sources and water supply facilities necessary for stable and appropriate supply of tap water and industrial water in the event of an outbreak of PI</td>
<td>Ministry of Land, Infrastructure, Transport and Tourism</td>
</tr>
<tr>
<td>Industrial water supply</td>
<td>—</td>
<td>Industrial water supply</td>
<td>Ensuring stable and appropriate supply of necessary industrial water in the event of an outbreak of PI</td>
<td>Ministry of Economy, Trade and Industry</td>
</tr>
<tr>
<td>Sewage service</td>
<td>—</td>
<td>Sewage treatment facility maintenance</td>
<td>Operating sewage systems appropriately in the event of an outbreak of PI</td>
<td>Ministry of Land, Infrastructure, Transport and Tourism</td>
</tr>
<tr>
<td>Waterworks</td>
<td>—</td>
<td>Waterworks</td>
<td>Ensuring stable and appropriate supply of tap water necessary in the event of an outbreak of PI</td>
<td>Ministry of Health, Labour and Welfare</td>
</tr>
<tr>
<td>Financial and securities settlement service</td>
<td>B-4</td>
<td>Japanese Banks’ Payment Clearing Network Financial settlement systems</td>
<td>Maintaining the financial system in the event of an outbreak of PI</td>
<td>Financial Services Agency</td>
</tr>
<tr>
<td>Service/business category</td>
<td>Type</td>
<td>Subcategory</td>
<td>Social role</td>
<td>Competent ministry/agency</td>
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</tr>
<tr>
<td>Oil and minerals wholesaling</td>
<td>B-4</td>
<td>Oil wholesaling</td>
<td>Supplying oil products (including LP gas) in the event of an outbreak of PI</td>
<td>Ministry of Economy, Trade and Industry</td>
</tr>
<tr>
<td>Oil and coal products manufacturing</td>
<td>B-4</td>
<td>Oil refining</td>
<td>Producing oil products in the event of an outbreak of PI</td>
<td>Ministry of Economy, Trade and Industry</td>
</tr>
<tr>
<td>Heat supply</td>
<td>B-4</td>
<td>Heat supply</td>
<td>Supplying heat in the event of an outbreak of PI</td>
<td>Ministry of Economy, Trade and Industry</td>
</tr>
<tr>
<td>Foods and beverages retailing</td>
<td>B-5</td>
<td>Food retailing stores&lt;br&gt;Food supermarkets&lt;br&gt;Convenience stores</td>
<td>Selling the necessary minimum range of foods (which includes canned foods, agricultural preserved foods, polished rice, milled grains, bread, confectioneries, boil-in-a-bag foods, frozen foods, noodles, formulated milk powder for infants; the same shall apply hereinafter) in the event of an outbreak of PI</td>
<td>Ministry of Agriculture, Forestry and Fisheries, Ministry of Economy, Trade and Industry</td>
</tr>
<tr>
<td>Retailing of various goods</td>
<td>B-5</td>
<td>Department stores and general superstores</td>
<td>Selling the minimum necessary range of foods and daily necessities (which includes soap, detergent, toilet paper, tissue paper, shampoo, vinyl garbage bags and sanitary products; the same shall apply hereinafter) in the event of an outbreak of PI</td>
<td>Ministry of Economy, Trade and Industry</td>
</tr>
<tr>
<td>Food manufacturing</td>
<td>B-5</td>
<td>Manufacturing of canned foods, agricultural preserved foods, manufacturing rice polishing and grain milling&lt;br&gt;Bread and confectionery manufacturing&lt;br&gt;Boil-in-a-bag food manufacturing&lt;br&gt;Frozen food manufacturing&lt;br&gt;Noodle manufacturing</td>
<td>Selling the necessary minimum range of foods in the event of an outbreak of PI</td>
<td>Ministry of Agriculture, Forestry and Fisheries</td>
</tr>
<tr>
<td>Service/business category</td>
<td>Type</td>
<td>Subcategory</td>
<td>Social role</td>
<td>Competent ministry/agency</td>
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<tr>
<td></td>
<td></td>
<td>Manufacturing of processed milk and milk products (limited to manufacturing of formulated milk powder for infants)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Foods and beverages wholesaling</td>
<td>B-5</td>
<td>Foods and beverages wholesaling Wholesale markets</td>
<td></td>
<td>Ministry of Agriculture, Forestry and Fisheries</td>
</tr>
<tr>
<td>Oil business operators</td>
<td>B-5</td>
<td>Fuel retailing (LP gas sales and gas stations)</td>
<td></td>
<td>Ministry of Economy, Trade and Industry</td>
</tr>
<tr>
<td>Other life-related services</td>
<td>B-5</td>
<td>Cremation and cemetery management</td>
<td>Cremating bodies</td>
<td>Ministry of Health, Labour and Welfare</td>
</tr>
<tr>
<td>Other life-related services</td>
<td>B-5</td>
<td>Ceremonial service management</td>
<td>Disposal of cremated remains</td>
<td>Ministry of Economy, Trade and Industry</td>
</tr>
<tr>
<td>Retailing of other goods</td>
<td>B-5</td>
<td>Drugstores</td>
<td>Selling the necessary minimum range of daily necessities in the event of an outbreak of PI</td>
<td>Ministry of Economy, Trade and Industry</td>
</tr>
<tr>
<td>Waste disposal</td>
<td>B-5</td>
<td>Industrial waste disposal</td>
<td>Disposal of medical waste</td>
<td>Ministry of Environment</td>
</tr>
</tbody>
</table>

Note 2: The service/business classification in the above table is based on the Japan Standard Industrial Classification in principle.

Note 3: Business establishments that play a similar social role to the one played by service/business categories eligible for prior vaccination although they do not belong to any of the categories of the Japan Standard Industrial Classification are deemed to belong to the service/business categories that play such similar role.

(2) National and local public servants eligible for prior vaccination

The types of job related to countermeasures against PI which are eligible for prior vaccination are as follow:

Category 1: Jobs that will become necessary in the event of an outbreak of PI (jobs which will be created or will increase in the event of an outbreak of PI)

Category 2: Jobs which strongly need to be continuously performed by administrative agencies regardless of the presence or absence of an outbreak of PI in order to protect the people’s lives and maintain social order and jobs related to
national crisis management

Category 3: Jobs similar to those performed by private registered business operators

### Category 1: Jobs that will become necessary in the event of an outbreak of PI

<table>
<thead>
<tr>
<th>Jobs eligible for prior vaccination</th>
<th>Category</th>
<th>Competent ministry/agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administrative work related to decision making and overall coordination work at the national headquarters for countermeasures</td>
<td>Category 1</td>
<td>Cabinet Secretariat</td>
</tr>
<tr>
<td>Administrative work at the national headquarters for countermeasures</td>
<td>Category 1</td>
<td>Cabinet Secretariat</td>
</tr>
<tr>
<td>Jobs related to decision making and planning of important policies by the government and administrative work related to cabinet meetings</td>
<td>Category 1</td>
<td>Cabinet Secretariat</td>
</tr>
<tr>
<td>Provision of expert opinions necessary for decision making by the national headquarters for countermeasures</td>
<td>Category 1</td>
<td>Cabinet Secretariat</td>
</tr>
<tr>
<td>Administrative work related to decision making and overall coordination work at individual ministries and agencies (including secretarial work)</td>
<td>Category 1</td>
<td>Relevant ministries and agencies</td>
</tr>
<tr>
<td>Administrative work at individual ministries and agencies’ headquarters for countermeasures against PI</td>
<td>Category 1</td>
<td>Relevant ministries and agencies</td>
</tr>
<tr>
<td>The basic concept of this category is as follows:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Only members of the headquarters for countermeasures, members of the senior staff and personnel of secretariats are eligible.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Of personnel of secretariats, only those who are dedicated to administrative work related to countermeasures against PI are eligible.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Liaison with other countries and support for Japanese nationals staying abroad</td>
<td>Category 1</td>
<td>Ministry of Foreign Affairs</td>
</tr>
<tr>
<td>(Border control measures and quarantine-related administrative work at quarantine ports and airports)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gathering domestic and foreign information, developing testing systems and developing and manufacturing virus strains for vaccines</td>
<td>Category 1</td>
<td>Ministry of Health, Labour and Welfare</td>
</tr>
<tr>
<td>Review and interpretation of laws and regulations that need to be amended urgently (administrative branch)</td>
<td>Category 1</td>
<td>Cabinet Legislation Bureau</td>
</tr>
<tr>
<td>Administrative work related to decision making and overall coordination work at prefectural headquarters for countermeasures</td>
<td>Category 1</td>
<td></td>
</tr>
<tr>
<td>Administrative work at prefectural headquarters for countermeasures</td>
<td>Category 1</td>
<td></td>
</tr>
<tr>
<td>Administrative work related to decision making and overall coordination work at municipal headquarters for countermeasures</td>
<td>Category 1</td>
<td></td>
</tr>
<tr>
<td>Administrative work at municipal headquarters for countermeasures</td>
<td>Category 1</td>
<td></td>
</tr>
<tr>
<td>Analysis of characteristics of pandemic influenza, antigenic analysis, genetic analysis and assessment of outbreak situations</td>
<td>Category 1</td>
<td></td>
</tr>
<tr>
<td>Vaccination of the people, management of dedicated outpatient departments, epidemiological surveys and collection of samples</td>
<td>Category 1</td>
<td></td>
</tr>
<tr>
<td>Jobs eligible for prior vaccination</td>
<td>Category</td>
<td>Competent ministry/agency</td>
</tr>
<tr>
<td>----------------------------------------------------------------------------------------------------</td>
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<td>---------------------------</td>
</tr>
<tr>
<td>Enactment and amendment of laws necessary for countermeasures against PI, voting on budgets and deliberations related to reporting to the Diet that are necessary for countermeasures against PI (including secretarial work)</td>
<td>Category 1</td>
<td></td>
</tr>
<tr>
<td>Voting on prefectural and municipal budgets and deliberations related to reporting to prefectural and municipal assemblies that are necessary for countermeasures against PI</td>
<td>Category 1</td>
<td></td>
</tr>
<tr>
<td>Management of Diet affairs</td>
<td>Category 1</td>
<td></td>
</tr>
<tr>
<td>Management of local assembly affairs</td>
<td>Category 1</td>
<td></td>
</tr>
<tr>
<td>Review and interpretation of laws and regulations that need to be amended urgently (legislative branch)</td>
<td>Category 1</td>
<td></td>
</tr>
</tbody>
</table>

**Category 2: Jobs which strongly need to be continuously performed by administrative agencies regardless of the presence or absence of an outbreak of PI in order to protect the people’s lives and maintain social order and jobs related to national crisis management**

<table>
<thead>
<tr>
<th>Jobs eligible for prior vaccination</th>
<th>Category</th>
<th>Competent ministry/agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administrative work related to the issuance of orders</td>
<td>Category 2</td>
<td>Ministry of Justice</td>
</tr>
<tr>
<td>Administrative work related to request for detention and the enforcement of detention orders</td>
<td>Category 2</td>
<td>Ministry of Justice</td>
</tr>
<tr>
<td>Security maintenance at criminal facilities (prisons, detention centers, juvenile prisons, reformatories and juvenile detention centers)</td>
<td>Category 2</td>
<td>Ministry of Justice</td>
</tr>
<tr>
<td>Patrol in areas surrounding medical facilities, etc.</td>
<td>Category 1</td>
<td>National Police Agency</td>
</tr>
<tr>
<td>Front-line police activities, including crime prevention and arrests</td>
<td>Category 2</td>
<td></td>
</tr>
<tr>
<td>Emergency medical service</td>
<td>Category 1</td>
<td>Fire and Disaster Management Agency</td>
</tr>
<tr>
<td>Firefighting, rescue</td>
<td>Category 2</td>
<td></td>
</tr>
<tr>
<td>Operation of ships and aircraft to prevent and respond to incidents and accidents and maintaining signal systems for maritime traffic</td>
<td>Category 1</td>
<td>Japan Coast Guard</td>
</tr>
<tr>
<td>Category 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diagnosis and treatment at the National Defense Medical College Hospital and Self-Defense Forces (SDF) hospitals etc</td>
<td>Category 1</td>
<td>Ministry of Defense</td>
</tr>
<tr>
<td>Poultry infection control measures, transportation of Japanese nationals staying abroad, support for quarantine activity by SDF medical personnel officers etc and transport of emergency goods</td>
<td>Category 2</td>
<td>Cabinet Secretariat, relevant ministries and agencies</td>
</tr>
<tr>
<td>Administrative work related to quick response to a national crisis in the frontlines (troop units)</td>
<td>Category 1</td>
<td>Cabinet Secretariat, relevant ministries and agencies</td>
</tr>
<tr>
<td>Command of the SDFs</td>
<td>Category 2</td>
<td>Cabinet Secretariat, relevant ministries and agencies</td>
</tr>
<tr>
<td>Administrative work related to national crisis management</td>
<td>Category 2</td>
<td>Cabinet Secretariat, relevant ministries and agencies</td>
</tr>
</tbody>
</table>

**Category 3: Jobs similar to those performed by private registered business operators**

Jobs that play similar social roles to those played by the following service and business
categories specified in (1):

Nursing care, electricity supply, gas supply, railways, road passenger transport, air transport and airport management (including air traffic control), cremation and cemetery management, industrial waste disposal, waterworks, river management/agricultural water supply, industrial water supply, sewage treatment facility maintenance/sewage pipe facility maintenance
Measures to be taken in the event of a human case of avian influenza in Japan and overseas

* There have already been many cases of bird-to-human infection of avian influenza. Without sustained human-to-human infection, rapid nationwide spread of infection is unlikely. However, countermeasure options should be prepared against an outbreak of avian influenza as a matter related to PI, which is covered by the Act on Special Measures.

(1) Implementation System

(1)-1 Strengthening of government

(i) If human infection with avian influenza and development of symptoms have been recognized, the national government should quickly gather, share and analyze information, hold a meeting of relevant ministries and agencies as necessary, and discuss and make decisions on measures concerning human infection control. (Cabinet Secretariat, Ministry of Health, Labour and Welfare and other relevant ministries and agencies)

(ii) In cases where human infection with avian influenza regarding which the WHO provides information has been recognized abroad, including human infection with a new subtype of avian influenza, relevant ministries and agencies should gather, share and analyze information as necessary and consider border control measures and other measures, including the provision of information to Japanese nationals staying abroad, in accordance with the situation. (Cabinet Secretariat, Ministry of Health, Labour and Welfare, Ministry of Foreign Affairs and other relevant ministries and agencies)

(1)-2 International cooperation


92 The WHO issues a global alert as necessary.
(2) Surveillance and Information Gathering

(2)-1 Information gathering

(i) The national government should gather information concerning avian influenza from within and outside Japan. When Japanese diplomatic missions abroad, the National Institute of Infectious Diseases (which serves as a WHO Collaborating Center for Reference and Research on Influenza), and quarantine stations have obtained information, they should quickly report it to relevant departments and divisions. Information sources are as follows. (Ministry of Health, Labour and Welfare, Ministry of Agriculture, Forestry and Fisheries, Ministry of Foreign Affairs, Ministry of Education, Culture, Sports, Technology and Science)
- International organizations (WHO, OIE, Food and Agriculture Organization of the United Nations (FAO), etc.)
- Hokkaido University: OIE reference laboratory
- National Institute of Animal Health under the National Agricultural and Food Research Organization
- Local governments

(2)-2 Surveillance on human infection with avian influenza

(i) The national government should assess the total number of domestic cases of human infection with avian influenza based on reports from doctors. (Ministry of Health, Labour and Welfare)

(3) Communication

(3)-1 If human infection with avian influenza and development of symptoms have been recognized in Japan, the national government should actively provide the people with information concerning the outbreak situation and countermeasures in cooperation with the local government of the region where the case has occurred. (Cabinet Secretariat, Ministry of Health, Labour and Welfare)

(3)-2 In cases where human infection with avian influenza regarding which the WHO provides information has been recognized, including human infection with a new subtype of avian influenza, the national government should provide local governments with information concerning the overseas outbreak situation and the status of response by relevant ministries and agencies as necessary and should also
actively provide information to the people. (Cabinet Secretariat, Ministry of Health, Labour and Welfare and other relevant ministries and agencies)

(4) Infection Prevention/Preventing Infection from Spreading

(4)-1 Provision of information to Japanese nationals staying abroad

(i) The national government should provide Japanese nationals staying or studying in countries where an outbreak of avian influenza has occurred with information concerning the overseas outbreak situation of highly pathogenic avian influenza among poultry and human infection with avian influenza and call their attention to the need for infection prevention (e.g., refraining from visiting poultry farms and live poultry markets). In cases where human infection with avian influenza regarding which the WHO provides information has been recognized, including human infection with a new subtype of avian influenza, the national government should provide information to them and call their attention in a similar way. (Ministry of Foreign Affairs, Ministry of Health, Labour and Welfare, Ministry of Education, Culture, Sports, Technology and Science)

(4)-2 Measures to control human infection with avian influenza

(4)-2-1 Border control measures

(i) In cases where human infection with avian influenza regarding which the WHO provides information has been recognized, including human infection with a new subtype of avian influenza, the national government should provide information concerning the outbreak situation in the countries where the outbreak has occurred and raise the awareness of travelers to and returnees from those countries about infection risk at quarantine stations.

(ii) Quarantine stations should strive to detect persons who have developed symptoms of avian influenza covered by the Quarantine Act and sufficiently prepare supplies and testing equipment necessary for handling such persons and conduct examination and health observation and notify prefectural governors based on the Quarantine Act (Ministry of Health, Labour and Welfare)

(4)-2-2 Epidemiological surveys and infection control measures

(i) The national government should dispatch teams of experts in epidemiological, clinical and other fields to prefectural governments, etc. as necessary and should conduct active epidemiological surveys in cooperation with local governments.
(Ministry of Health, Labour and Welfare)

(ii) The national government should request prefectural governments, etc. to conduct epidemiological surveys and appropriately handle persons who have contact with infected persons (consider administering anti-influenza virus drugs to them, request them to stay at home and provide them with guidance on what to do when they have developed symptoms) and deal with fatalities (implement thorough infection control measures). (Ministry of Health, Labour and Welfare)

(iii) The national government should request persons who are suspected of being infected with avian influenza (persons who have developed symptoms of avian influenza) to stay at home. (Ministry of Health, Labour and Welfare)

(iv) The national government should report information concerning the domestic outbreak to the WHO based on the International Health Regulations (IHR). (Ministry of Health, Labour and Welfare)

(4)-2-3 Poultry infection control

(i) From the perspective of preventing human infection with avian influenza, imports of poultry from countries and regions where an outbreak of highly pathogenic avian influenza has occurred should be halted, travelers’ awareness should be raised and sanitary control should be thoroughly implemented at domestic farms in order to prevent an outbreak of such influenza, which may transmute into pandemic influenza. (Relevant ministries and agencies)

(ii) In the event of an outbreak of highly or lowly pathogenic avian influenza, the following measures should be implemented. (Relevant ministries and agencies)

- Closely cooperate with prefectural governments and support specific infection control measures to be taken by them in accordance with the guideline for infection control (slaughtering infected animals, restricting the movement of poultry kept in neighboring farms, etc.) (Ministry of Agriculture, Forestry and Fisheries)
- Use Self-Defense Force units to provide support as requested by prefectural governments in cases where it is urgently necessary to slaughter a very large number of birds and where it is difficult for prefectural governments themselves to deal with the situation. (Ministry of Defense)
- Instruct prefectural police to conduct necessary patrol activity in areas where infection control measures are being implemented following the introduction of such measures and coordinate their activities. (National Police Agency)
(5) Medical Care

(5)-1 When a domestic case of human infection with avian influenza and development of symptoms in Japan have been recognized, the national government should implement the following measures:

(i) Advise prefectural governments, etc. to conduct quick and accurate diagnosis for patients suspected of being infected and to implement appropriate infection control measures and provide treatment such as administering anti-influenza virus drugs when they have been definitively diagnosed with infection. (Ministry of Health, Labour and Welfare)

(ii) Request prefectural governments, etc. to send samples taken from patients to the National Institute of Infectious Diseases and conduct a subtype test and genetic analysis as necessary. Information concerning the testing method should be provided so as to enable regional health research centers to conduct tests. (Ministry of Health, Labour and Welfare)

(iii) Request prefectural governments, etc. to implement necessary measures regarding patients infected with avian influenza (including patients who show similar symptoms), such as hospitalization, based on the Infectious Diseases Act. (Ministry of Health, Labour and Welfare)

(5)-2 In cases where human infection with avian influenza regarding which the WHO provides information has been recognized, including human infection with a new subtype of avian influenza, the national government should request prefectural governments, etc. to implement the following measures: (Ministry of Health, Labour and Welfare)

- Provide information concerning persons who have returned from abroad and who are suspected of being infected with avian influenza (persons who have developed symptoms) to the national government and notify medical institutions.
- Raise medical institutions’ awareness about necessary infection control measures regarding the ongoing avian influenza outbreak.
Index of National Action Plan for Pandemic Influenza and New Infectious Diseases

1. The index contains major terms used in the National Action Plan for Pandemic Influenza and New Infectious Diseases
2. Figures in bold type indicate page numbers where the definition or explanation concerning the term in question is provided.
3. In the case of terms which are used in abbreviated or otherwise altered form on second reference and thereafter, page numbers are indicated alongside their original form (e.g., page numbers for “National Action Plan,” an abbreviation of “National Action Plan for Pandemic Influenza and New Infectious Diseases,” are indicated alongside “National Action Plan for Pandemic Influenza and New Infectious Diseases”).

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**Active epidemiological survey**

The active epidemiological survey refers to examination of the outbreak situation and cause of infectious diseases by asking questions of and conducting necessary surveys on patients, their families and medical personnel who diagnosed and treated them to gather and analyze information. It is conducted based on Article 15 of the Infectious Diseases Act.

**Anti-influenza virus drugs**

Anti-influenza virus drugs mitigate influenza symptoms by specifically inhibiting the proliferation of influenza viruses. The neuraminidase inhibitor is an anti-influenza virus drug that limits the proliferation of viruses.

**Respirator**

The respirator is an apparatus that facilitates patients’ respiration by sending air or oxygen to their lungs when their respiratory condition has deteriorated.

**Attack rate**

Here, the attack rate refers to the proportion of people who contract pandemic influenza during an epidemic period in the total population because in the case of pandemic influenza, all people face the risk of being exposed to the pandemic influenza virus.

**Avian influenza**

Generally speaking, avian influenza is transmitted between birds, but in a rare case, it is transmitted from bird to human and the infected person develops symptoms. It is presumed that in principle, trans-species transmission from bird to human occurs only when people have had close contact with bird carcasses, feces, etc. of infected birds. Human-to-human transmission is very rare, although there have been reported cases of transmission between patients and family members who have had close contact with them over a long period of time without taking infection control measures.

**Case fatality rate**

The case fatality rate refers to the proportion of people who contract and die of
pandemic influenza during an epidemic period.

○ Dedicated consultation centers

Dedicated consultation centers handle telephone inquiries from people who show febrile and respiratory symptoms after returning from foreign countries where an outbreak of influenza has been confirmed and those who show febrile and respiratory symptoms after having close contact with patients and introduce them to dedicated outpatient departments.

○ Dedicated outpatient departments

Dedicated outpatient departments handle people who show febrile and respiratory symptoms after returning from foreign countries where an outbreak of influenza has been confirmed and those who show febrile and respiratory symptoms after having close contact with patients. Prefectural governments decide whether to establish dedicated outpatient departments in light of the circumstances of their own regions. When the situation has become such that infected patients visit medical institutions which do not have dedicated outpatient departments, there should be a shift from the system in which patients are handled by dedicated outpatient departments to the system in which they are handled by general medical institutions (all institutions that routinely handle infectious diseases, including internal medicine hospitals and children’s hospitals).

○ Designated reporting institutions

Hospitals and clinics designated by prefectural governors for the reporting of the following cases: cases of infection with Type V infectious diseases specified by the Infectious Diseases Act which are prescribed by a relevant order issued by the Ministry of Health, Labour and Welfare; and suspected cases of infection with Type II, Type III, Type IV and Type V infectious diseases which are prescribed by the order.

○ Infectious disease beds

Hospital beds are classified under the Medical Care Act into ordinary beds, recuperation beds, mental beds, infectious disease beds and tuberculosis beds. Infectious disease beds are intended for patients infected with new infectious diseases, Type I and II infectious diseases and pandemic influenza as specified under the Infectious Diseases Act.
○ Influenza virus

Influenza viruses are broadly classified into types A, B and C on the basis of their antigenic nature. Only Influenza virus A could become the cause of a human pandemic. Type A influenza viruses are further subdivided into subtypes on the basis of the antigenic nature of two glycoproteins, hemagglutinin (HA) and neuraminidase (NA), on the surface of the virus, (A/H1N1 and A/H3N2 are examples of subtypes).

○ Medical institutions designated for treatment of infectious diseases

Medical institutions designated for treatment of infectious diseases include: designated medical institutions for specified infectious diseases, designated medical institutions for Type I infectious diseases, designated medical institutions for Type II infectious diseases and designated medical institutions for tuberculosis.

* Designated medical institutions for specified infectious diseases: hospitals designated by the Minister of Health, Labour and Welfare for hospitalization of people diagnosed with new infectious diseases as well as people infected with Type I and Type II infectious diseases and pandemic influenza.

* Designated medical institutions for Type I infectious diseases: hospitals designated by prefectural governors for hospitalization of patients infected with Type I and Type II infectious diseases and pandemic influenza.

* Designated medical institutions for Type II infectious diseases: hospitals designated by prefectural governors for hospitalization of patients infected with Type II infectious diseases and pandemic influenza.

* Designated medical institutions for tuberculosis: hospitals, clinics designated by prefectural governors for provision of appropriate medical care to tuberculosis patients (including hospitals and clinics specified by a relevant cabinet order as institutions similar thereto) as well as pharmacies thus designated.

○ Mortality rate

Here, the mortality rate refers to the number of deaths from PI per population of 100,000 people during an epidemic period.

○ New infectious diseases

New infectious diseases, as defined under Article 6(9) of the Infectious Diseases Act, are diseases which are transmitted from human to human, which are obviously different from known infectious diseases in symptoms and treatment outcome, which
cause people to become seriously ill when infected and which are deemed to have the risk of having a serious impact on the people’s lives and health by spreading widely.

○ Pandemic

A pandemic refers to a global epidemic of infectious disease. In particular, a pandemic influenza will be transmitted from human to human efficiently, causing a global epidemic, as few people will be immune against the virus.

○ Pandemic influenza

A pandemic influenza, as specified by Article 6(7) of the Infectious Diseases Act, is caused by a virus which has acquired the human-to-human transmission ability and which is deemed to have the risk of having a serious impact on the people’s lives and health by rapidly spreading nationwide because of the absence of immunity among the general public. A pandemic influenza virus is significantly different in antigenecity from seasonal influenza viruses. As most people will not have immunity against the virus, it may develop into a global pandemic by rapidly spreading widely through efficient human-to-human transmission.

○ Pandemic influenza A (H1N1)/Influenza (H1N1) 2009

Cases of pandemic influenza A (H1N1), caused by a subtype of the H1N1 influenza virus, were first confirmed in Mexico in April 2009, and the new influenza later developed into a global pandemic. It was renamed influenza (H1N1) 2009 as a seasonal influenza in March 2011, after most people acquired immunity against the virus.

○ Pandemic vaccine

A pandemic vaccine is manufactured when an outbreak of pandemic influenza has occurred based on the virus that is causing the outbreak or a virus which has a similar antigenic nature.

○ People who have had close contact

People are deemed to have had close contact when they have had contact with PI patients frequently or over a long period of time (equivalent to “persons who may be legitimately suspected of having been infected with PI” as specified by the Infectious Diseases Act). The specific scope of such people should be determined in accordance with the characteristics of the type of PI that has emerged. Family members who live
together with PI patients are likely to be included in the scope.

○ PCR (polymerase chain reaction)

PCR is a method for making numerous copies of a piece of DNA by using polymerase and primers. It is widely used for pathogenic organism tests because it enables the identification of a pathogenic organism even when only a small amount of DNA is available. For the identification of an influenza virus DNA, the RT-PCR method is used, which applies the PCR process after converting the RNA of the virus – influenza viruses are RNA viruses - into DNA using reverse transcriptase.

○ Personal protective equipment

Personal protective equipment includes masks, goggles, gowns, gloves and other gear worn in order to minimize exposure to aerosols and droplets. It is necessary to select appropriate equipment according to the infection routes of the virus in question and the application (screening, diagnosis, survey, invasive procedure, etc.)

○ Poultry

Domestically-bred birds, including chickens, ducks and quails.

Among domestic animals designated as possible carriers of highly pathogenic avian influenza viruses under the Act on Domestic Animal Infectious Diseases Control are chickens, ducks, quails, Japanese pheasants, ostriches, Guinea fowls and turkeys.

○ Pre-pandemic vaccine

A pre-pandemic vaccine is manufactured in anticipation of an outbreak of pandemic influenza based on an avian influenza virus highly likely to transmute into a pandemic influenza virus (In Japan, pre-pandemic vaccines are currently manufactured based on a subtype of H5N1 avian influenza virus).

○ Surveillance

Surveillance refers to such activities as gathering various information concerning diseases and keeping watch on the situation. In some cases, surveillance may refer, in particular, to the assessment and analysis of the outbreak situation (the conditions of patients and the virus) of infectious diseases that are conducted based on the Infectious Diseases Act.

○ Triage
Triage refers to the process of determining the priority of patients’ treatments according to the urgency and degree of illness and wounds when a large number of people have become sick or have been wounded in the event of a disaster, for example, in order to ensure appropriate transportation and treatment.

○ Virulence

In relation to countermeasures against pandemic influenza, virulence is often used to refer to the degree of seriousness of illness of people infected with the virus. In the academic sense, virulence refers to the overall ability of viruses and other pathogenic organisms to infect hosts (humans, animals, etc.) and cause diseases, including invasiveness, proliferativeness and the ability to limit hosts’ defense mechanisms.