

QUARANTINE STATION

1.0 Introduction

Establishment of quarantine station is a requirement under section 14 of Prevention and Control of Infectious Disease Act 1988 (Act 342). It is to be used for isolation or observation on any persons who is infected or whom the Authorised Officer has reason to believe that a person is infected, to be removed to a quarantine station for treatment and may detain the person at the quarantine station until the person can be discharged without posing any danger to the public.

Quarantine station can be hospitals or non-hospital facility which is declared and gazetted by the Minister of Health.

2.0 Objective of Isolation of a Person at Quarantine Station

- i. To separate infected or potentially infected person from healthy people (isolation/quarantine).
- ii. To restrict movement of infected person in order to stop the spread of SAR-CoV-2.

3.0 Criteria of premises for quarantine

Pre-requisite requirement of a gazetted premise for quarantine of suspected and confirmed COVID-19 is as below:

- i. Single room with good ventilation, preferably for all cases BUT compulsory for all PUI;
- ii. If shared room is unavoidable, the distance between each bed must be at least 1 metre apart. This cohorting procedure is applicable to positive cases only;
- iii. Preferably, each room must have attached bathroom and toilet;
- iv. There must be a room for keeping medication, consumable items, linen and PPE; and
- v. There must be a room for clinical examination.

4.0 Criteria for admission

Hospital

- i. Symptomatic and asymptomatic close contact
- ii. Positive cases with mild symptoms or asymptomatic.

Non-hospital premises

- i. Confirmed COVID-19 cases referred by hospital (**Annex 2**).

- ii. PUI with mild symptoms, while waiting for laboratory result and unable to do self-isolation at home.
- iii. Other groups based on current situation e.g. asymptomatic close contact.

5.0 Activities conducted

i. At Hospital Based Quarantine Centre

Management of persons admitted into hospitals (based on the above criteria), will be based on current guidelines on COVID-19 Management in Malaysia.

ii. At non-hospital Quarantine Centre

1. Serve Home Surveillance order.
2. Daily update of the list of persons under quarantine, laboratory results and to update list of contacts.
3. Provision of food and other daily necessities during the quarantine period.
4. Daily screening of symptoms and maintain its records.
5. Provision of medical services.
6. Refer case to hospital if symptoms develop or worsening of symptoms.

6.0 Management of Quarantine Centre

6.1 Hospital-based Quarantine Centre

The hospital management is responsible for the operation of this type of quarantine centre.

6.2 non-Hospital Quarantine Centre

At the national level, the National Security Council is in-charge, the State Secretary at the state level and the District Officer at the district level in overall management of the centre. However, it involves the cooperation of multiple agencies which include District Health Office, District Welfare Department, Malaysian Royal Police, Army, Local Council and RELA, PGA etc.

i. General Cleanliness

Local Council is responsible for the general cleanliness.

ii. Clinical waste

Collection and disposal of clinical waste at the centre is the responsibility of District Health Office

iii. General waste

Collection and disposal of general waste is the responsibility of Local Council.

i.v Food

Food supply will be dealt by the District Welfare Department and the food quality and safety aspect will be coordinated by the District Health Officer.

vi. Water Supply

Water supply to the centre should be managed by the Work Department (JKR).

vi. Security

The centre will be guarded by PGA or RELA or PDRM, depending on local arrangement. It is to ensure that the place is secured and preventing escape of the individual from custody.

vii. Staff duty

Staff on duty shall be coordinated by the Incidence Commander of that centre.

viii. Linen

The management of linen and clinical waste should be managed by the concession, extended from the hospital services.

7.0 Clinical Management of Person in Quarantine Centre

Management of patients in hospitals in under the jurisdiction of the doctor in the hospitals.

Meanwhile, those in the non-hospital quarantine centre will be managed by the health team selected by the District Health Officers.

Pre-entry:

- i. Fulfilled criteria as above.
- ii. Serve Home Surveillance Order.
- iii. Take sample based on the criteria set at that particular time.
- iv. Send patient to the centre using a transport coordinated by MKN / APM.
- v. Phone call or message to the District Health Officer in-charge of the centre.

During the stay:

- i. Daily assessment of the clinical status of the person.
- ii. Consult physician for advice if ARI symptoms are detected.
- iii. Sample taken on day-13 (D13) of quarantine for those required.
- iv. Serve discharge order once the result obtained and negative.
- v. Refer case to hospital if laboratory result is positive.

Discharge Criteria from Quarantine Station

- i. Asymptomatic at D14 of last contact with positive case.
- ii. Negative D13 serology for asymptomatic close contact.
- iii. Positive case step down from acute hospital and fulfil discharge criteria (**Annex 2**)

Summary on Management of Cases in Quarantine Centre



