

(Provisional translation)

**Basic Policies for Novel Coronavirus Disease Control  
by the Government of Japan  
(Summary)**

**March 28, 2020 (Revised on May 25, 2020)**

On April 7, 2020, the Head of the Novel Coronavirus Response Headquarters declared a state of emergency under Article 32, paragraph 1 of the Act on Special Measures for Pandemic Influenza and New Infectious Diseases Preparedness and Response. The period during which emergency measures should be taken under the declaration was 29 days from April 7 to May 6, 2020. Areas where emergency measures should be taken were Saitama, Chiba, Tokyo, Kanagawa, Osaka, Hyogo and Fukuoka Prefectures and on April 16<sup>th</sup>, targeted areas were expanded to all 47 prefectures (the period during which emergency measures should be taken for these areas was from April 16<sup>th</sup> to May 6<sup>th</sup>).

We thereafter saw some results, with the number of newly reported cases showing a downward trend. However, there were still areas where the delivery of medical care by the health system continued to be stretched, so measures to reduce new infections must have continued for the time being. Therefore, on May 4, 2020, the period during which emergency measures should be taken was extended until May 31, 2020, continuing to target all 47 prefectures.

Subsequently, on May 14, 2020, changes in the infection situation were analyzed and assessed, and a comprehensive decision was made based on the approach described below to change the areas where emergency measures should be taken to Hokkaido, Saitama, Chiba, Tokyo, Kanagawa, Kyoto, Osaka, and Hyogo.

On May 21, 2020, the situation was analyzed and assessed again and such areas were changed to Hokkaido, Saitama, Chiba, Tokyo and Kanagawa.

On May 25, 2020, the analysis and assessment was conducted again and the implementation of emergency measures are deemed no longer necessary; therefore, the lifting of the state of emergency was declared.

After the lifting of the state of emergency, the level of socio-economic activities is to be gradually increased. The well-establishment of a “new lifestyle” for the prevention of infection and implementations of guidelines for infection prevention to be developed for respective industries will be the prerequisite for the progress. If spread of infection is observed again, strong measures to prevent the spread of infection needs to be taken promptly, while taking appropriate economic and employment measures.

Through these measures, it will be possible to sustainably prevent further infections and maintain socio-economic activities.

These Basic Policies present unified guidance on measures to be taken by the government, local governments, and the people together to accurately grasp the situation and further advance counter-measures against the novel coronavirus infectious disease.

## **1. Facts about the current situation of the Novel Coronavirus infectious disease**

With regard to trends by prefecture, we promoted measures in 13 prefectures, namely Tokyo, Osaka, Hokkaido, Ibaraki, Saitama, Chiba, Kanagawa, Ishikawa, Gifu, Aichi, Kyoto, Hyogo, and Fukuoka, collectively called "Prefectures under Specific Cautions" under these Basic Policies, as prefectures where particular emphasis must be placed in taking measures to prevent the further spread of infections. We urged other prefectures to take measures to prevent the spread of infections as well, with all prefectures designated as areas where emergency measures should be taken.

In early May, we still observed a considerable number of newly reported cases nationwide, and we had to maintain the framework thus far and continue to carry out measures in every prefecture to prevent the spread of infections.

Since then, the number of newly reported cases has decreased nationwide, with the number of patients with severe symptoms also showing a downward trend. Additionally, progress has been made in securing hospital beds and the overstretched situation of the medical service system has begun to improve.

The areas where emergency measures should be taken are decided comprehensively, focusing on the three points below:

### (1) Infection situation (epidemiological situation)

Whether or not there is no sign of an explosive spread of infection, and whether or not the number of newly reported cases is at a level where counter-cluster measures can be taken sufficiently.

### (2) Medical service system

Whether or not a medical service system has been established to respond sufficiently even if infected patients, particularly those with severe symptoms, increase.

### (3) Surveillance system

Whether or not a system has been set up to detect early trends of the infection spreading and to respond immediately.

Likewise when it is confirmed that it is no longer necessary to take emergency measures, a comprehensive judgment shall be made based on the above criteria. For the infection situation, the criteria is whether the number of newly reported cases has decreased to a level where counter-cluster measures can be taken sufficiently, as well as the cumulative number of infections reducing to around 0.5 infections per 100,000 people in the most recent week. For the medical service system, a continuing decrease in the number of patients with severe symptoms, the situation for hospital beds, and the securing of a system to respond to a sudden increase in the number of patients, shall be considered. For the surveillance system, a system must be established to conduct PCR tests requested by doctors without delay.

On May 21, 2020, the changes in the infection situation were analyzed and assessed again and a comprehensive decision was made based on the three points above. As Hokkaido, Saitama, Chiba, Tokyo and Kanagawa have observed more than 0.5 cumulative infections per 100,000 people in the most recent week, it was decided that these prefectures needed to continue measures to prevent the spread of the infection as "Prefectures under Specific Cautions".

On May 25, 2020, the analysis and assessment of the situation was conducted again, and no prefectures were found to be the area where emergency measures should be taken; therefore, the declaration of lifting the state of emergency was issued.

Even after the lifting of the state of emergency, the basic measures to prevent the spread of the infection shall continue to be thoroughly implemented in all the prefectures.

A comprehensive decision will be made if the infection increases again and concerns about it spreading leads to an area being designated one where emergency measures should be taken.

## **2. Overall Policies for Novel Coronavirus Disease Control**

- (1) Increase gradually the level of socio-economic activities by easing the request for refraining from leaving home and restricting the use of facilities with a certain period for transition after the lifting of the state of emergency, given that the “new lifestyle” is widely accepted, while taking into account situations of respective regions including infection situations and the capacity of medical service systems.
- (2) Establish the “new lifestyle” that prevents the spread of infection in the society and economy as a whole and urge business operators to implement guidelines for infection prevention to be developed for respective industries.
- (3) Monitor continuously the situation of infection through the development of surveillance system and appropriate information provision and sharing, recognizing that the risk of the spread of infection remains. Prepare for the future spreading of the infection through taking all necessary measures to maintain medical service system and strengthen the capacity of testing, health center system, and counter-cluster measures.
- (4) Achieve both of preventing the spread of infection and maintaining socio-economic activities in a sustainable manner through appropriate measures for infection prevention as well as for economic and employment.
- (5) Take promptly strong preventive measures if the spread of infection is observed again.

## **3. Key points in implementing measures against novel coronavirus disease**

### **(1) Provision and sharing of Information**

Provide the public with accurate information and clear message on the following points in a timely manner, promote awareness-raising to help change people’s behavior and call for calm response.

- the infection situation and the medical information
- the medical service system and test system
- the establishment of the “new lifestyle” that prevents the spread of infection, including avoiding “3 Cs” (closed spaces, crowded places, and close-contact settings) and basic counter-infection measures such as keeping distance, wearing a mask, and washing hands
- Avoiding of “3 Cs” indoors, in particular at daily lives, work places, and restaurants.
- Implementation of guidelines for infection prevention to be developed for respective industries.
- need to refrain from leaving home when feeling sick
- guidelines for visiting medical institutions
- discrimination against infected persons, close contacts and medical personnel
- the fact that the measure of "lockdown" (city blockade) will not be taken

Provide appropriately and expeditiously related information for Japanese national as well as foreign nationals living or staying in Japan and foreign governments.

## **(2) Surveillance and Information gathering**

- Identify suspected disease carrier and conduct tests that the doctor considers necessary.
- Strengthen the testing system by utilizing local and private institutes. Introduce new testing technology promptly in the medical field. Promote the utilization of private testing institutes. Grasp the PCR testing system and make necessary coordination. Furthermore, the Ministry of Health, Labor and Welfare will examine and evaluate the division of functions between PCR tests and antigen tests and implement more tests including PCR not only for medical personnel but also for other close contacts.
- Build a framework for effective surveillance, such as surveys on antibody prevalence. Furthermore, improve the current system to appropriately grasp excess mortality in flu and pneumonia deaths.
- Develop a system for sharing information about patients, etc. as soon as possible. Use the system to gather and analyze statistical data for more effective and efficient measures.
- Develop and operate a system for promptly grasping the situation at each medical institution and use it to coordinate prompt acceptance of patients, etc.
- Develop effective systems through antibody tests, etc. to grasp the infection situation in Japan.
- Continue to support the development of simple test kits for rapid diagnosis. Establish a domestic supply system.

## **(3) Pandemic Prevention**

- 1) Refraining from leaving home (except for going to workplaces, as mentioned later)
  - i) The Prefectures under Specific Cautions, in particular, will request cooperation in refraining from leaving home to "reduce the contact among people by 70% at minimum or 80% ideally." (Activities necessary for maintaining daily life and health, such as visiting hospitals, purchasing food, medicine and daily necessities, going to workplaces as necessary, exercising outdoors or taking a walk, are excluded.)
  - ii) All designated prefectures will:
    - request citizens to refrain as much as possible from moving to other prefectures for reasons such as non-urgent and unnecessary homecoming visits or trips
    - discourage citizens from visiting eateries with hospitality services in downtown areas where clusters have emerged
    - avoid the "3Cs" while also taking basic measures to prevent infection
    - inform residents using the "Ten tips" "New lifestyle practices (examples)," etc. presented by the Expert Meeting

### 2) Restrictions on holding events

All designated prefectures will make requests not to hold events where clusters could emerge or have gatherings under "3Cs" circumstances, especially in cases of nation-wide or large events and gatherings.

### 3) Restrictions on using facilities (related to restricted events mentioned earlier, excluding schools and other facilities mentioned later

- i) Prefectures under Specific Cautions will issue requests to follow restrictions on the use of facilities that may cause infections to spread. If such requests are not met and no justifiable reason is given, prefectures will issue further requests and instructions based on the Act, and they shall publicize the fact.  
Additionally, considering the impact of the extended measures on society, the economy, and the lives and health of the citizens, the Governors of each prefecture may make appropriate decisions on opening facilities such as museums, art galleries, libraries and outdoor parks.
- ii) In designated prefectures that are not included in the Prefectures under Specific Cautions, decisions will be made based on the local situation from the viewpoint of preventing the spread of infections and maintaining socio-economic activities.
- iii) Business operators and related organizations will promote voluntary infection prevention measures including the implementation of the guidelines for infection prevention to be developed for respective industries, looking at sustainable measures toward the future.

#### 4) Going to workplaces

- i) Particularly in Prefectures under Specific Cautions, working in rotations at workplaces that require employees to come to work and teleworking will be strongly encouraged to reduce contact, including aiming for a "70 percent reduction in employees coming to work."
- ii) Based on the expectation that all designated prefectures will need sustainable measures in future:
  - Measures to reduce contact with people, including teleworking, working in rotations, staggered work hours, and bicycle commuting, will continue.
  - Workplaces will be encouraged to put thorough measures in place to prevent infections and avoid the "3Cs."
  - Businesses engaged in work essential for ensuring the stability of people's lives and the national economy (examples given in the attachment) as well as businesses supporting such work, must continue operating, depending on the characteristics of the businesses, while taking comprehensive measures to prevent the spread of infections, including measures to avoid the "3Cs."

#### 5) Schools

- i) The Ministry of Education, Culture, Sports, Science and Technology will swiftly develop comprehensive measures to ensure an environment for students to learn according to the situation of infections in each region, while placing utmost attention on preventing infections.
- ii) The Ministry of Health, Labour and Welfare (MHLW) will provide guiding principles for nursery schools and after-school children's clubs, etc. on the down-sizing of childcare and temporary closure of facilities.

#### 6) Measures in prefectures after the lifting of the state of emergency

- i) Sustainable measures are expected to be needed.  
Until the "new lifestyle" is well-established in the society and economy as a whole, a certain period of transition will be introduced. Based on the assessment of the situation

of infection and the risk of further infection in respective regions, the request for refraining from leaving home as well as restrictions of holding events and using facilities will be gradually eased approximately every three weeks (for example, (a) three weeks until June 18, (b) the next three weeks until July 9, (c) the three weeks after next until July 30).

(Refraining from leaving home)

- Spread awareness among residents and business operators about establishing the "new lifestyle" for preventing the spread of infections, including continuing the basic infection prevention measures.

- To prevent infections, request citizens to refrain from moving to other prefectures for reasons such as non-urgent and unnecessary homecoming visits or trips by the end of May. During the period of (a), particular caution should be made in case of movements to/from areas which were designated as the "Prefectures under Specific Cautions" when the state of emergency was lifted on 25 May.

As for the revitalization of tourism, in-prefecture tourism will be promoted first (the period of (a)), followed by the promotion of tourism beyond prefectures if the situation allows (after the period of (b)).

- Consider easing of request for refraining from leaving home for those sectors that can ensure a certain level of safety through the implementation of guidelines for infection prevention and others (even during the period of (a)).

- Promptly request necessary cooperation to residents on refraining from leaving home, if there is a sign of infection spreading or the occurrence of clusters at facilities.

(Holding events)

- Gradually ease the restriction of the size (maximum capacity) of events based on the assessment of the situation of infection and the risk of infection spreading in respective regions for approximately every three weeks.

For indoor events, the number of participants should be restricted to approximately half of the maximum capacity of the venue.

Specific conditions to host an event and necessary infection prevention measures to be taken by organizer should be considered depending on the nature (i.e. indoor/outdoor, national/regional, etc.) and type (i.e. concert, exhibition, sports games, championship, festival, etc.) of the event.

Restrictions on large-scale events that will cause people's nationwide movements such as sports games are expected to be gradually eased (expected in the period of (b)), while organizers are requested to hold the events without audiences for the first step.

Organizers will be requested to demonstrate caution by canceling or postponing events if they are not prepared for the risk of infection.

Regardless of the size of event, urge organizers to prepare seating plan that can avoid "3Cs" and to take basic counter infection measures.

- Swiftly request organizers for necessary cooperation if there is a sign of infection spreading or the occurrences of clusters in events.

(Commuting to work)

- Promote measures to reduce contact between people, including teleworking, staggered

work hours, and bicycle commuting. Furthermore, promote efforts for infection prevention including the development of guidelines of infection prevention for respective industries.

(Restrictions of using facilities)

▪ For the facilities where clusters are occurring and “3Cs” are observed, continue to request facility managers for necessary cooperation based on the situation of infection in the region and others.

ii) Monitor the infection situation and provide residents with information properly.

iii) Prefectures should take measures promptly and appropriately if the tendency of spreading of infection is observed.

7) Border-control measures

The Government will continue to implement entry restrictions, travel warnings, strengthened quarantine, and visa restrictions, from the viewpoint of preventing the flow of infected people into Japan and the spread of infections throughout Japan.

8) Strengthening counter-cluster measures

i) Active epidemiological investigations will be organized to identify individuals who have been in close contact with infected persons, monitor their health conditions, request them to refrain from leaving home, and properly grasp the scale of the spread of infections for appropriate infection control.

ii) Experts will be secured and trained to conduct the counter-cluster measures and strengthen the health center system. Technologies such as apps and social networking systems will also be utilized to promptly introduce a system for efficiently controlling infections and quickly grasping the infection situation.

iii) Create more effective counter-cluster measures, while gaining an understanding of the people with regards to apps for confirming contacts developed by smartphone developers, and also while paying close attention to personal information protection and privacy.

9) Other common issues

i) Designated prefectures will take effective emergency measures that consider the characteristics of each area. The measures must be the minimum necessary, and prefectures must carefully explain the details and need for the measures to their residents.

ii) Since sustainable measures will be needed, attention will focus on balancing prevention of the spread of infections and maintaining socio-economic activities.

iii) Prefectures will inform their residents that the emergency measures are different from the "lockdowns" (city blockades) that are being implemented in other countries, and they shall call for a calm response through asking people not to panic-buy food, medicines and daily necessities.

iv) A help desk for business operators will be established, logistics will be secured, and a robust lifeline system will be ensured, etc., in order to support the smooth operation of businesses.

- v) Thorough measures to prevent infection will be taken in public transportation and other facilities where many people gather.

**(4) Medical care, etc.**

- i) A hospital treatment system will be secured that focuses on providing medical care to those with severe symptoms
  - Asymptomatic pathogen carriers and patients with mild symptoms who do not require hospitalization will recuperate at lodging facilities, etc.  
Temporary lodging facilities such as hotels will be secured and managed for this purpose.  
Use information communication devices to monitor the health status of those who recover at home for reasons such as childcare.
  - To secure hospital beds, roles will be divided among medical institutions in each region, such as by designating preferred medical institutions to gather novel coronavirus patients.
  - A system will be set up to coordinate the acceptance and transfer of patients. Medical institutions' information-gathering systems will be utilized so that the institutions can visualize information necessary for coordinating patient acceptance.
  
- ii) An outpatient and testing system will be secured for suspected COVID-19 patients to:
  - Provide outpatient services to suspected COVID-19 patients under proper infection control by having them access Outpatient Services for Returnees and Contact Persons via the Call Centers for Japanese Returnees and Potential Contacts.
  - Secure efficient medical care and testing systems by having institutions established that focus on conducting tests (local outpatient/testing centers), sending medical workers to Outpatient Services for Returnees and Contact Persons, and providing so-called drive-through and walk-through medical care in large tents and prefabricated buildings.
  - If there is risk of patients increasing further, boost the limit of medical services that can be provided, and provide outpatient service at general medical institutions, taking necessary measures to prevent infection.  
Under these circumstances, the risk of infection could rise due to people seeking care at medical institutions due to fear of infection. Therefore, if symptoms are mild, people should rest and recuperate at home in principle. If their condition changes, they should consult their doctor before seeking further medical care.
  - Designate medical institutions to treat people who may develop severe symptoms as medical institutions that do not provide COVID-19 outpatient services, in principle.
  - By around the summer, consider outpatient care that takes into account the winter flu season.
  
- iii) A medical service system will be established for entire regions, including service for patients with diseases other than COVID-19, by:
  - Dividing roles among medical institutions in each region.
  - Establishing a medical care system using communication devices such as telephones.

iv) Securing medical workers

- Measures will be promoted to prevent temporary leave/leaving of jobs by medical workers, return of potential qualified personnel to the workforce, reallocation of human resources in the medical field, etc.

v) Securing the supply of medical goods

- A secure manufacturing system will be set up for medical supplies, medical equipment, and medical materials to provide them promptly and smoothly to medical institutions that need them.
- In particular, the securing of supplies of personal protective equipment, such as masks for medical institutions that conduct PCR tests and admit patients, will be prioritized.

vi) In-house infections at medical institutions and facilities for the elderly will be thoroughly prevented by:

- Thoroughly avoiding the “3Cs,” wearing masks, and disinfecting to prevent workers from becoming sources of infection
- Temporarily prohibiting visitors except for emergency cases in order to prevent infection
- Suspending or restricting temporary use such as daycare services in facilities
- Isolating suspected patients/users immediately and implementing counter-infection measures under the guidance of public health centers.

vii) The spread of infections in medical institutions and facilities will be prevented by: Implementing measures to prevent infection, such as fully isolating infected patients from non-infected patients.

Prioritizing PCR tests for suspected medical/facility workers and inpatients.

viii) Others

- Preventing infection of outpatients and pregnant women
- Providing medical interpreters for foreigners
- Aiming for a smooth supply of Remdesivir
- Accelerating clinical research and treatment to verify the effects of therapeutic agents
- Vaccinations will be developed promptly under the coordination of relevant government ministries and agencies, with the goal of commercializing and providing vaccines to the citizens as soon as possible.

**(5) Economic and employment measures**

While maintaining balance with prevention of the spread of infection, and taking into account the situation of infection and the capacity of medical service system in the region, gradually increase the level of socio-economic activities. By implementing the measures under the "Emergency Economic Measures for Response to COVID-19" (Cabinet decision April 20, 2020), including the supplementary budget for FY2020, nationally and locally, the government will work to prevent the spread of infections, as well as strive to maintain employment, continue business, and support people's lives.

**(6) Other important considerations**

- Consideration for the human rights, response to social issues, etc.
- Supply of goods and materials necessary for the medical operation
- Collaboration with related organizations (including local governments, the international community, and the research institutions)
- Maintenance of social functions
- Measures after the lifting of a state of emergency

**Business operators who are required to continue their business during the period of the state of emergency**

**1. Maintaining Medical System**

- We request the continuation of all business by medical personnel not only for treatment of COVID-19 infections, but also for their duties to deal with other severe diseases.
- The abovementioned businesses by medical personnel include hospitals, pharmacies, and other manufacturing and service industries related to all the supplies and services necessary for treatment of patients including importing, manufacturing and sales of pharmaceuticals and medical equipment, blood collection for blood donations, and providing meals to inpatients.

**2. Continuing to protect those in need**

- We request the continuation of all life support businesses for people who need assistance, especially the elderly and the people with disabilities, including housing and support for them.
- The abovementioned life support businesses include all manufacturing and service industries related to the goods and services necessary for the lives of the elderly and the people with disability, such as management of facilities for nursing care and for people with disability, as well as providing meals to residents of the facilities.

**3. Securing stable lives of the people**

- We request the continuation of all concerned businesses which provide essential services for those who stay at home to lead minimum necessary lives.
- (1) Infrastructure operation (electricity, gas, oil, petrochemical, LP gas, water and sewage, telecommunications and data centers, etc.)
- (2) Food and beverage supply (agriculture, forestry, fishery, importing, manufacturing, processing, distribution, and online shopping of food and beverage, etc.)
- (3) Supply of daily necessities (importing, manufacturing, processing, distribution and online shopping of household goods, etc.)
- (4) Canteens, restaurants, coffee shops, home delivery and take-out, retailers of daily necessities (department stores, supermarkets, convenience stores, drugstores, hardware stores etc.)
- (5) Maintenance of household goods (plumber, electrician, etc.)
- (6) Services related to daily necessities (hotel and accommodation, public bath, barber shop and hairdressers' salons, laundry, veterinary, etc.)
- (7) Waste disposal services (collection, transportation, and disposal of waste, etc.)
- (8) Ceremonial affairs (operators engaged in cremation and post-mortem treatment of bodies)
- (9) Media (TV, radio, newspapers, internet related business, etc.)
- (10) Services for individuals (webcast, remote education, facilities and services related to

maintenance of the internet environment, maintenance services of private vehicles, etc.)

#### **4. Maintaining the stability of the society**

- With a view to maintaining the stability of the society, we request the continuation of the businesses, at their minimum level, who provide essential services to maintain corporate activities during the period of a state of emergency.

(1) Financial services (banks, credit banks and credit unions, securities, insurance, credit cards, and other settlement services etc.)

(2) Logistics and transportation services (railways, buses, taxis, trucks, maritime transportation and port management, aviation and airport management, postal services, etc.)

(3) Maintenance of manufacturing and service industries necessary for national defense (aircraft, submarines, etc.)

(4) Services necessary to maintain corporate activities and security (maintenance and security of building, etc.)

(5) Social infrastructure necessary for safety and security (management of public goods such as of rivers and roads, public works, waste disposal, hazardous goods management based on respective law, etc.)

(6) Administrative services (police, fire fighting, other administrative services)

(7) Childcare services (daycare centers, etc.)

#### **5. Others**

- Among medical and manufacturing industries, we request the continuation of the following business operators in consideration of infection prevention: operators who are difficult to stop production line due to the characteristics of the equipment (such as blast furnaces and semiconductor factories); and operators who produce essentials (including important items in supply chains) for protection of the people who need medical care and support, as well as for maintenance of social infrastructure. We also request the continuation of the business operators who sustain medical care, the lives of the people, and maintenance of the national economy.