

Upcoming measures based on  
the current situation of COVID-19 infection cases

February 22<sup>nd</sup>, 2021

Kyoto Prefectural Government

## 1 Transitioning from the state of emergency measures to the next stage

Based on the recent infection situation, while collaborating with Osaka and Hyogo Prefectures, we will request the national government to consider a transition from the state of emergency measures to the next stage.

Additionally, Kyoto Prefecture will decide at the next task force meeting to urge the central government to take all possible measures to prevent the re-spread of infection, and we will also review and decide the content of measures that should be continued with regards to the ongoing request to restaurants to shorten their business hours.

## 2 Strengthening medical and inspection systems

### 1 Promotion of the vaccination

#### (1) Establishment of Kyoto COVID-19 Vaccination Consultation Center

The consultation center in which its staff will specialize in consultations with regards to side effects of the COVID-19 vaccine

- ① Starting date of the consultation and open hours  
Starting date: Saturday, May 8<sup>th</sup>, 2021 (including Saturday, Sundays and holidays)  
Open hours: From 9 a.m. till 9 p.m.
- ② Telephone number  
075-414-5490 (10 telephone lines)
- ③ Specialized consultants  
Pharmacists, nurses

#### (2) Strengthening of the organizational system

A new organization called the “Vaccination Measures Office” that oversees vaccination operations will be established at the Kyoto Prefectural Department of Health and Welfare in order to ensure smooth vaccination operations.

- ① Starting date of operations: March 1<sup>st</sup>, 2021
- ② Number of staff: 21 persons  
(Deputy Directors of Kyoto Prefecture will be stationed at Kyoto City, and each of the Kyoto Prefectural Regional Promotion Office)
- ③ Operation: As the start of the vaccination operation run by local governments to residents is approaching, the office will promptly respond to individual vaccination matters of local governments such as vaccination procedures, places, and the securing of medical staff

#### (3) Commencement of priority vaccinations of medical personnel

We will start vaccination operations by vaccinating medical personnel, such as doctors and nurses who are regarded as close contacts to patients who are infected with COVID-19.

- ① Vaccination starting period: Early March
- ② Vaccination procedures: Start in phases with hospitals treating severely and moderately ill patients with high risk of infecting people.

## 2 Prevention measures for cluster cases at elderly care centers

~Intensive implementation of testing for those who works at elderly care centers where there are people at risk of developing severe symptoms~

As an intensive implementation plan based on the fundamental prevention measure run by the central government, Kyoto prefecture and Kyoto city will conduct testing for workers such as those at elderly care centers in order to prevent cluster cases from occurring.

- ① Eligible facilities: Care homes for the elderly and people with disabilities (931 locations in Kyoto)

Special nursing homes for the elderly Community based special nursing homes for the elderly Health care facilities for the elderly requiring long-term care Sanatorium type medical care facilities for the elderly requiring care Medical care institutions Group homes for the elderly with dementia Daily life care for the elderly in specific facilities Community based daily life care in specific facilities Low-cost care homes for the elderly Nursing homes for the elderly Private nursing homes for the elderly Serviced housing for the elderly Facilities for people and children with disabilities
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- ② Eligible: Staff members who work at the above stated facilities: About 32,000 people
- ③ Duration period: Late February till March 31st, 2021
- ④ Implementation: Antigen tests and PCR tests

※In the case of a positive test , the public health center will initiate an epidemiological inspection and dispatch “the support team specialized in institutional infection” to the relative center.