



WORLDWIDE REACH. HUMAN TOUCH.

The Impact of COVID-19 On the Workforce and Travel

9 MAR | 10:00 AM – 11:00 AM YGN

SPEAKERS



Dr. Tay Zar Lin
Senior Medical Trainer
& Consultant
International SOS



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Senior Medical Advisor
International SOS



INTERNATIONAL
SOS

INTERNATIONAL SOS MEDICAL AND SECURITY SOLUTIONS

ACTIONABLE INSIGHTS & UNPARALLELED SERVICES

Together We Can Protect & Save Lives

WORLDWIDE REACH. HUMAN TOUCH.

Who is International SOS

WE CARE FOR CLIENTS ACROSS THE GLOBE, FROM MORE THAN
1,000 LOCATIONS IN **90** COUNTRIES



EMPLOYEES



11,000 employees



5,200 medical professionals



2,300 access to security experts



99 languages spoken



Brief Information of International SOS Services

- **Work Force Resilience Program for all employees (Medical and Security assistance for Expatriates & locals)**
- **Project Access Program (Just for the project base employees on project sites)**
- **Evacuation and Repatriation Services (Domestic and International)**
- **Medical Staffing Services**
- **Medical Supply Services**
- **Consulting Services for Medical and Security**
(Pandemic Preparedness, Health and Wellbeing Programs, Travel Security Escalation Plans, Occupational Health and Safety Assessment for the workforce)
- **Global/ Site Medical Advisory Services (Supporting Medical Agenda of the organization)**
- **Customising Physical and Mental Wellbeing Programs**
- **American Heart Association Certified Training and International SOS certified first aid training for both medical and non-medical persons.**
- **Health Promotion sessions (Monthly Health Talks and Life Resilience Training)**
- **International SOS Yangon Clinic in Inya Lake Hotel Compound (24/7 available)**

Please reach out to me if you need any assistance with
International SOS Health and Security Services.

THANK YOU!



Naw Wendy Aung
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AGENDA

- COVID-19 Situation Update in Myanmar
- The Impact of State Regulations on COVID-19
- Enabling Safe Travel in a COVID-19 World
- Workplace Management: Best Practices



SPEAKERS

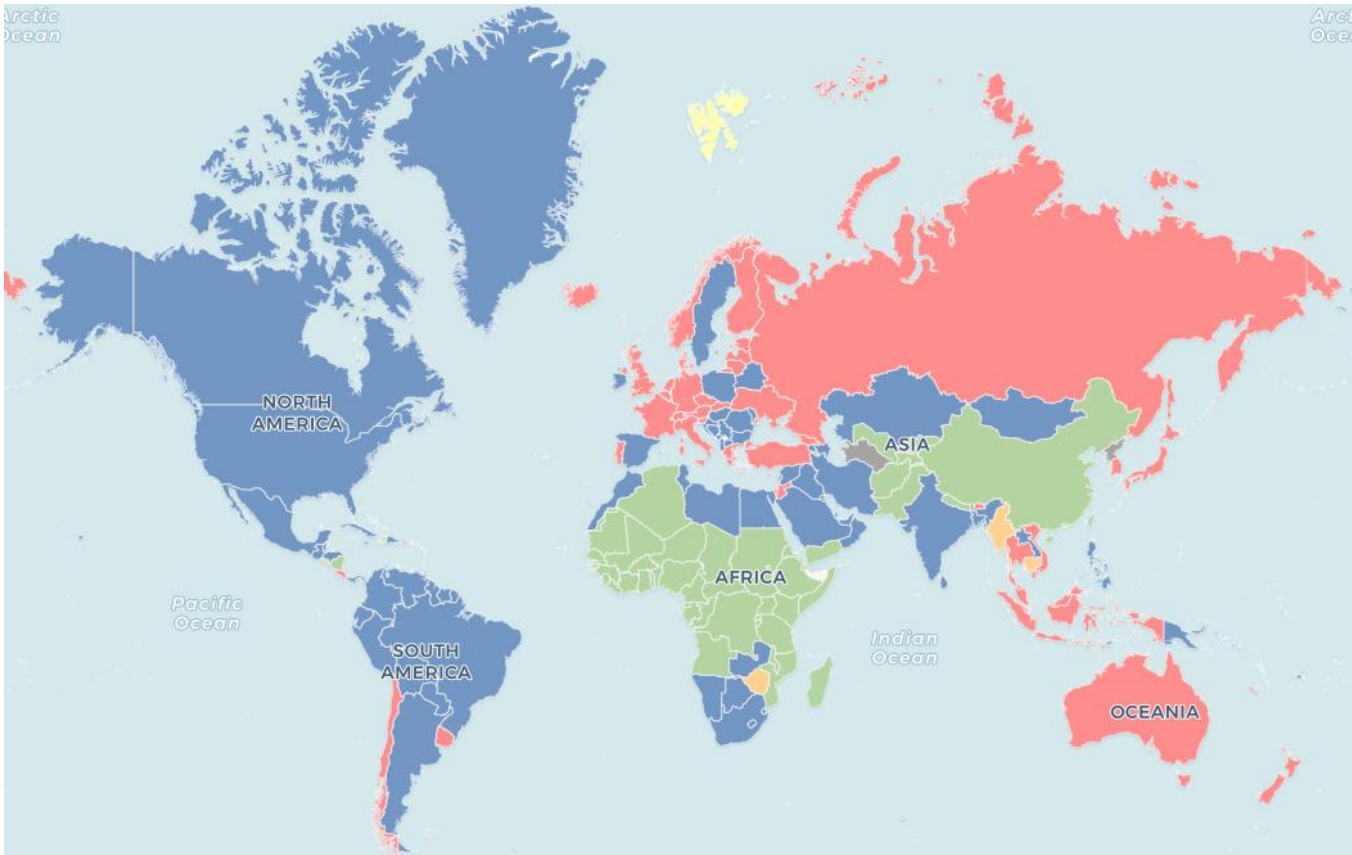
DR TAY ZAR LIN

Sr Medical Trainer & Consultant
International SOS

DR KYAW ZAY WINT

Sr Medical Advisor
International SOS

COVID-19 Case Activity



COVID-19 Status

● IMPORTED CASES ONLY

all cases have been imported

● LIMITED ACTIVITY

Countries may have:

- no reported cases (with ongoing testing).

- minimal number of new cases per day (sporadic or small clusters).

● INCREASING ACTIVITY

- moderate number of new cases per day.

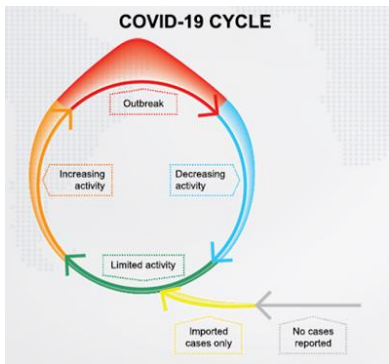
- increasing trend.

● OUTBREAK

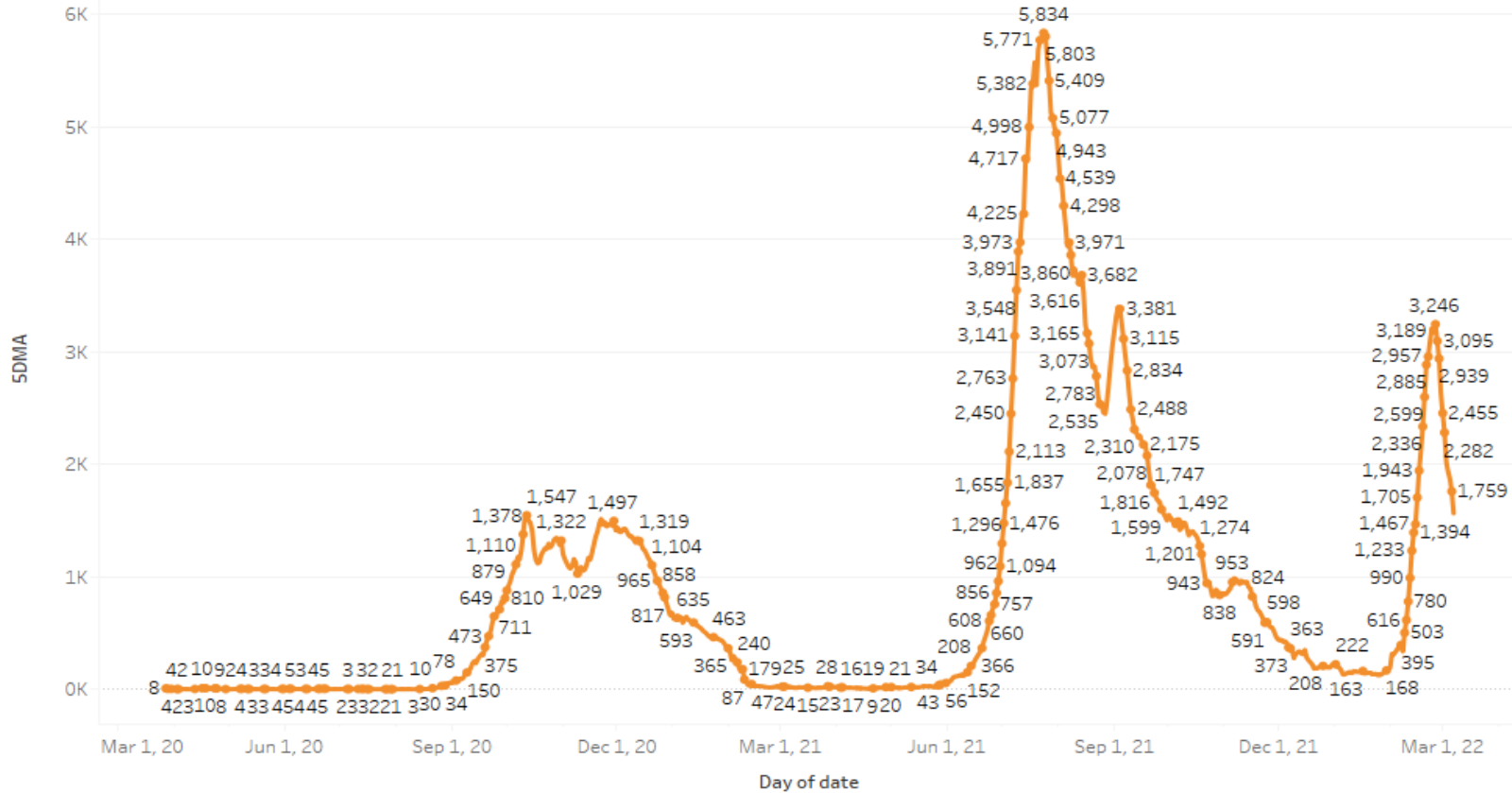
- high number of new cases per day.

● DECREASING ACTIVITY

- decreasing trend (> 2 weeks declining case numbers).

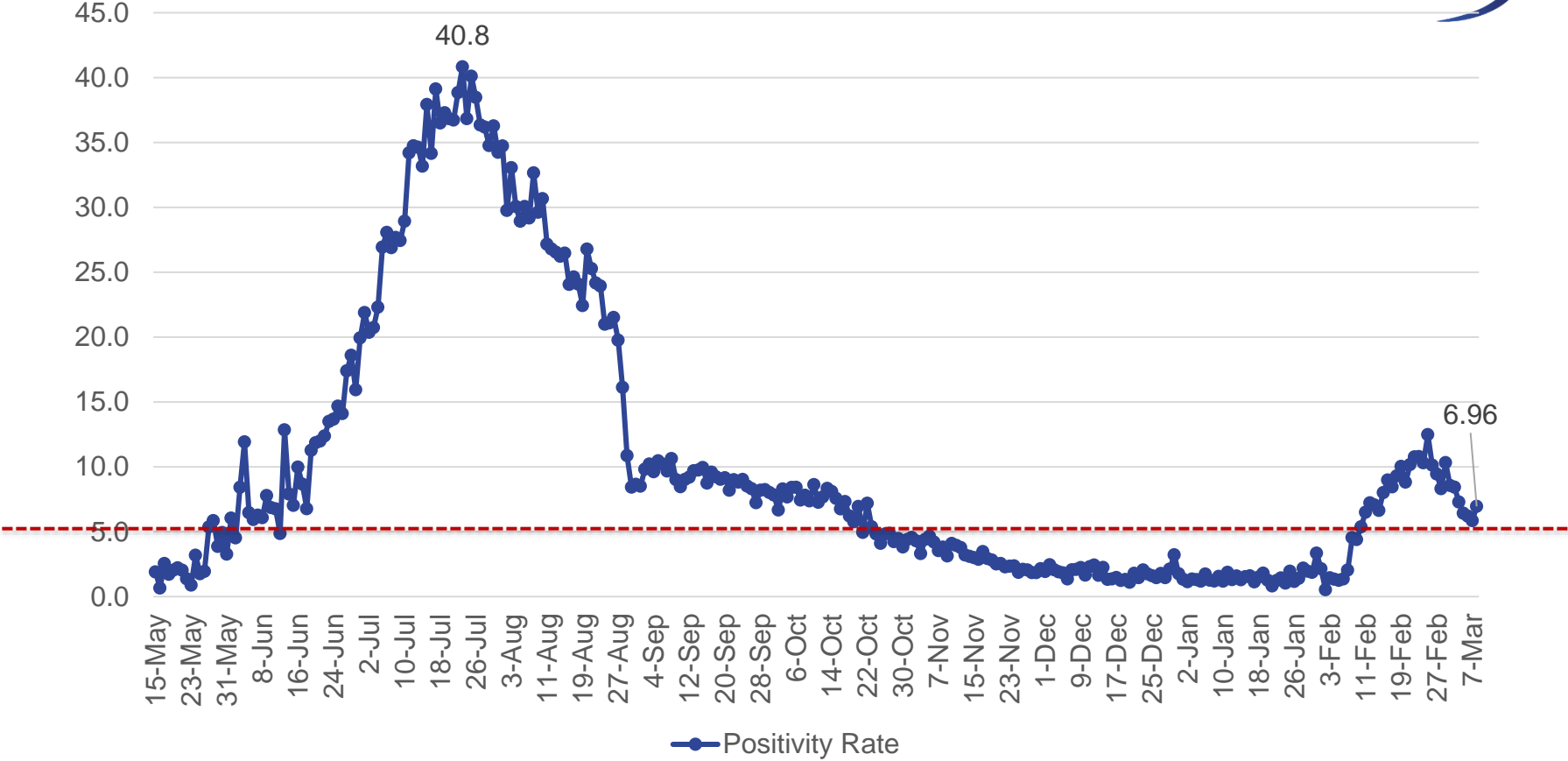


5 Days Moving Average



The trend of 5DMA for date Day. The data is filtered on Location, which keeps Myanmar.

COVID-19 Positivity Rate



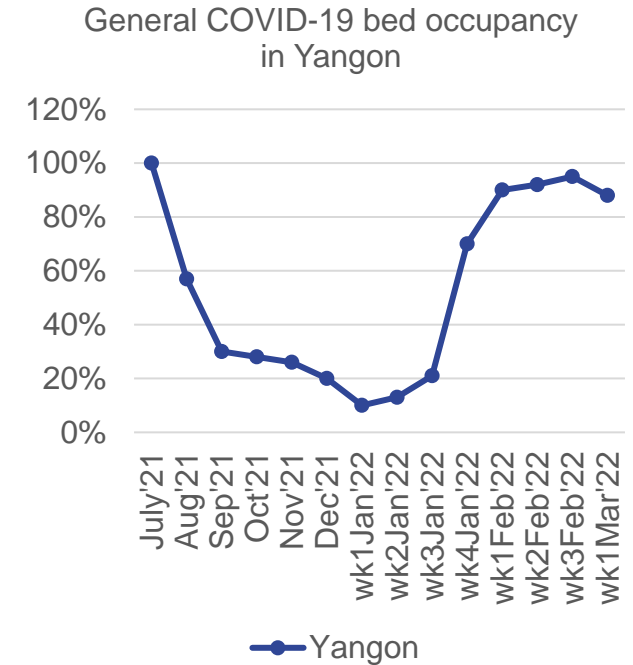
COVID-19 GENERAL BED OCCUPANCY RATE



City	Public Hospital	Occupancy Rate
Yangon	Pun Hlaing Hospital	80-90%
	Aryu Hospital	85-90%
	Asia Royal Hospital	90%
Mandalay	City Hospital Mandalay	80-85%
	Mingalar Hospital	80-90%
	Mandalar Hospital	85%

Updated as of 8 Mar 2022

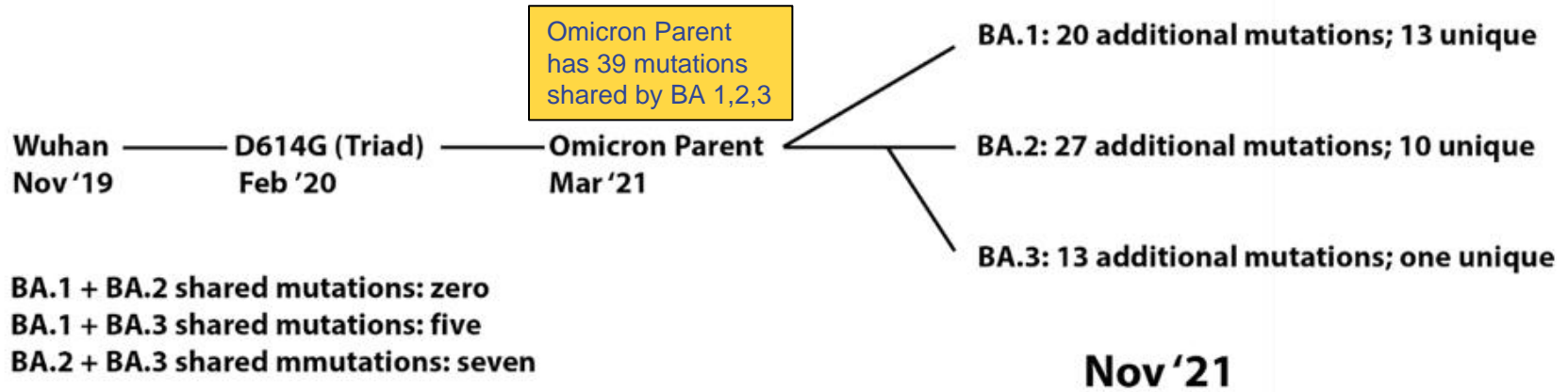
Subject to data availability. The information is provided "as is" and includes reasonable judgements in the circumstances prevailing at the time.



LINEAGE OF OMICRON FAMILY VIRUSES

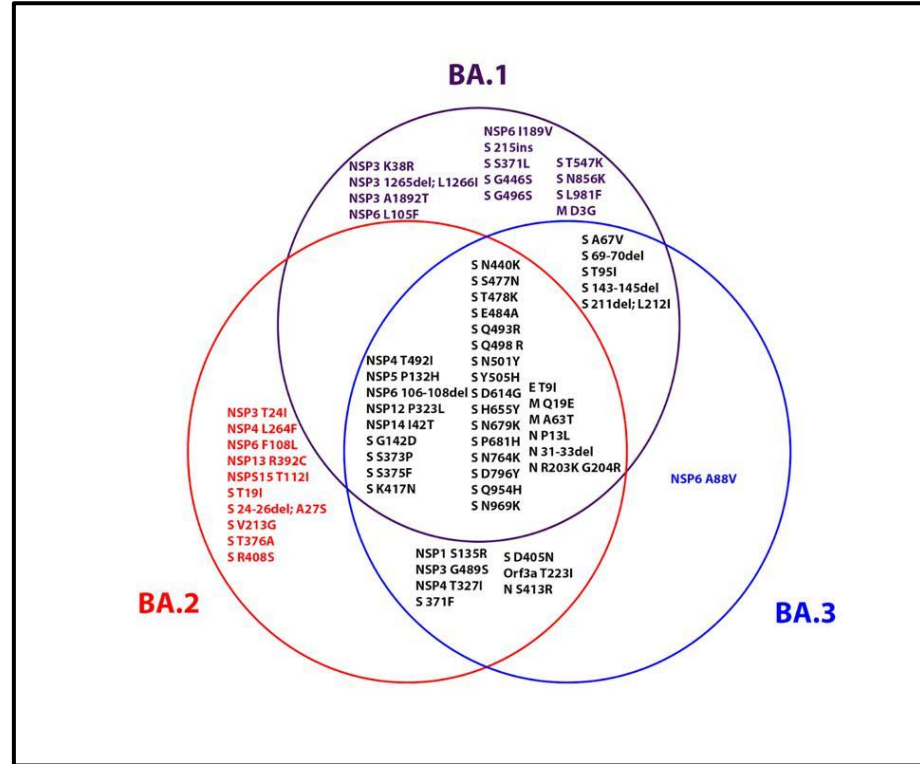
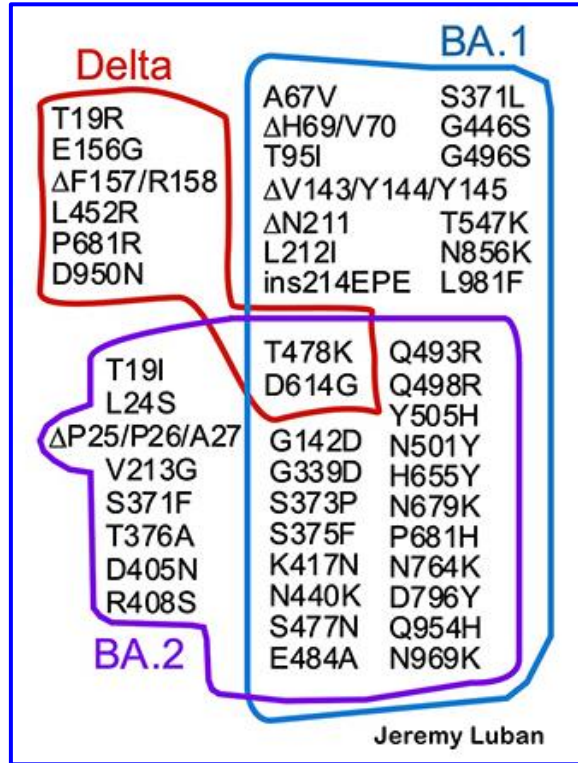
Access Health International. 26 Jan 2022

Omicron Family



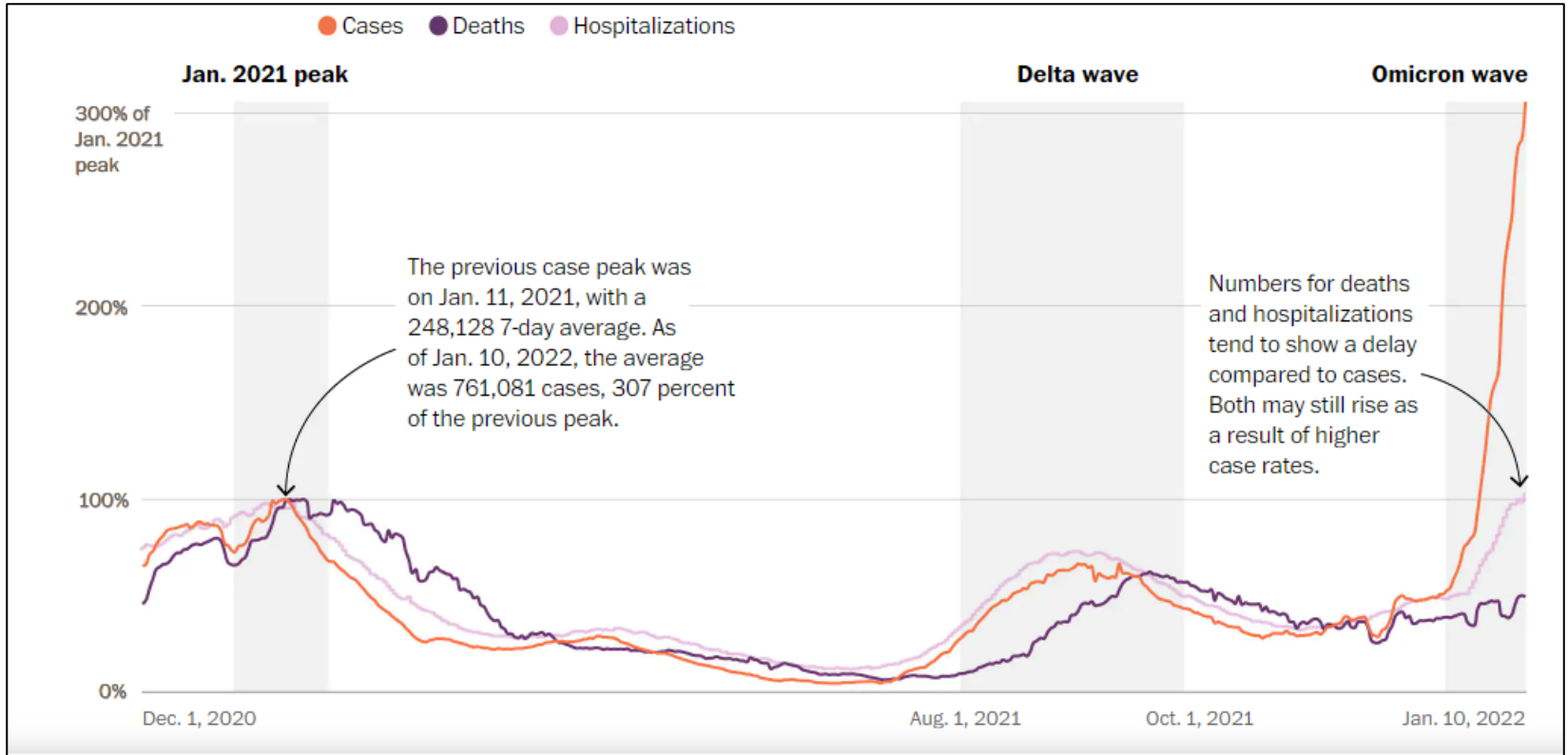
MUTATIONS

DIFFERENCES BETWEEN THE DELTA & 3 OMICRON FAMILY VIRUSES



COVID WAVE: CASES-HOSPITALIZATIONS-DEATH

The Washington Post 11 Jan 2022



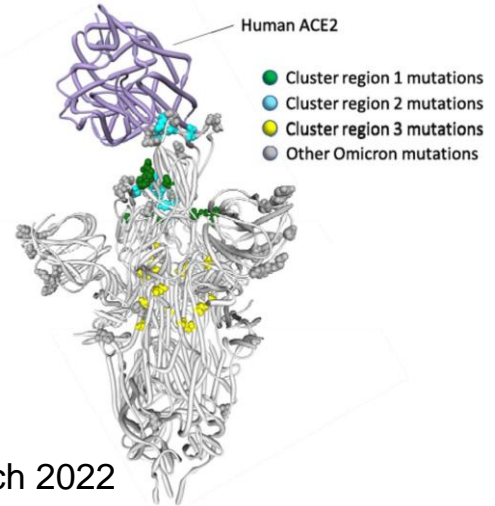
SUMMARY OMICRON INFECTION



- Omicron Variant displaces Delta Variant to become Dominant Variant
- Omicron Wave Pattern
 - Sharp Increase and Sharp Decrease with pointed sharp apex
 - Omicron waves does not seem to linger high numbers like Delta Wave
 - Omicron Peak > the Delta Peak
 - Less Severe Illness
 - ↓ Case Fatality Rate → death does not increase as much as cases
 - Hospitalization is low but actual Hospitalization is high due to pure Number Game
 - Increase in children being infected
- Main Impact on Workforce (deplete the workforce)
- Government Paradoxical Relaxation

TRAVEL IN 2022: PARADOXICAL RELAXATION IN FACE OF OMICRON SURGE

- Greece removed Testing Requirement for Vaccinated Travelers
- Netherlands removed the need from arrival quarantine for vaccinated travelers
- Denmark and Norway lifted all Domestic Travel Restrictions
- Sweden has dropped Covid Negative Test Requirement from Arrivals
- Switzerland and Austria has relaxed travel restrictions for UK travelers
- UK has removed all Travel Restrictions for Covid Vaccinated Travelers
- Thailand has scrapped 7-day quarantine for vaccinated Tourists
- Malaysia Multi-Ministry Covid Task Force proposed to fully open borders in March 2022
- Countries with High Vaccination Rate → Likely to Relax Covid Measures



Domestic Restrictions



STAY AT HOME RESTRICTIONS



WORKPLACES



SCHOOLS



DOMESTIC TRAVEL

Domestic Air Travel

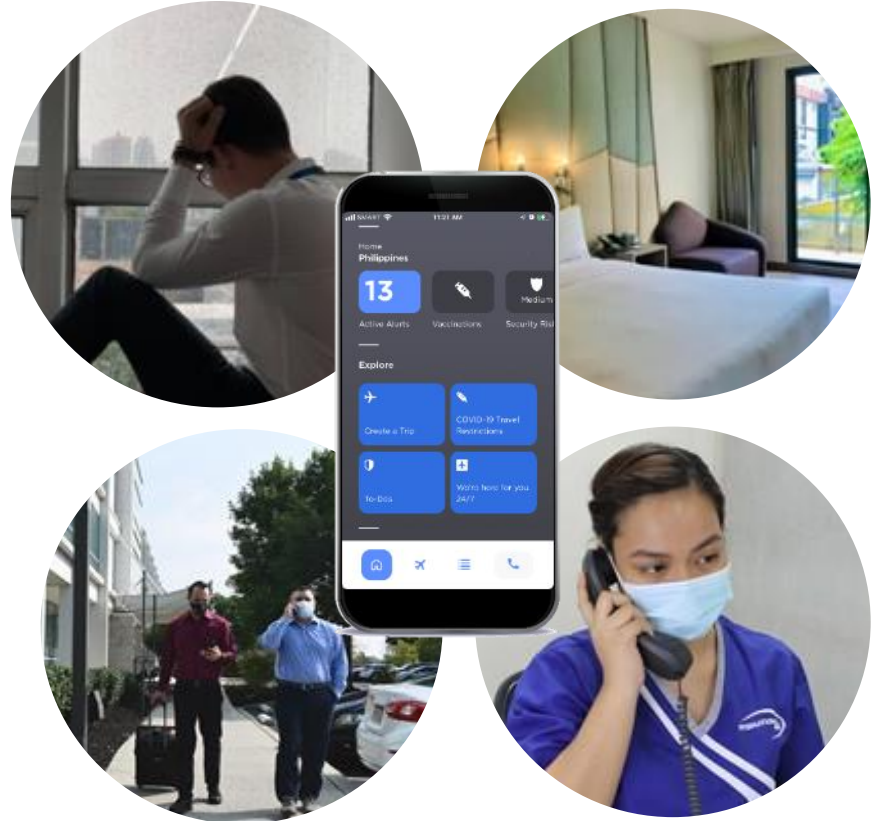
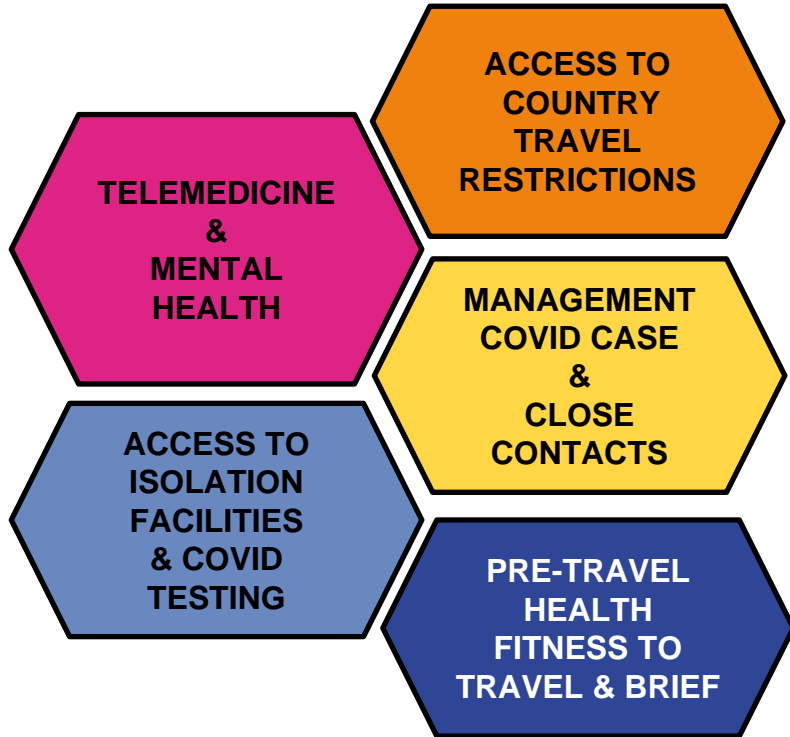
- As of new version of guidelines, all passengers of domestic flights have to present negative COVID-19 certificate with RDT within 48 hours before flight time.
- This will apply to all passengers regardless of vaccination status.

Domestic Land Travel

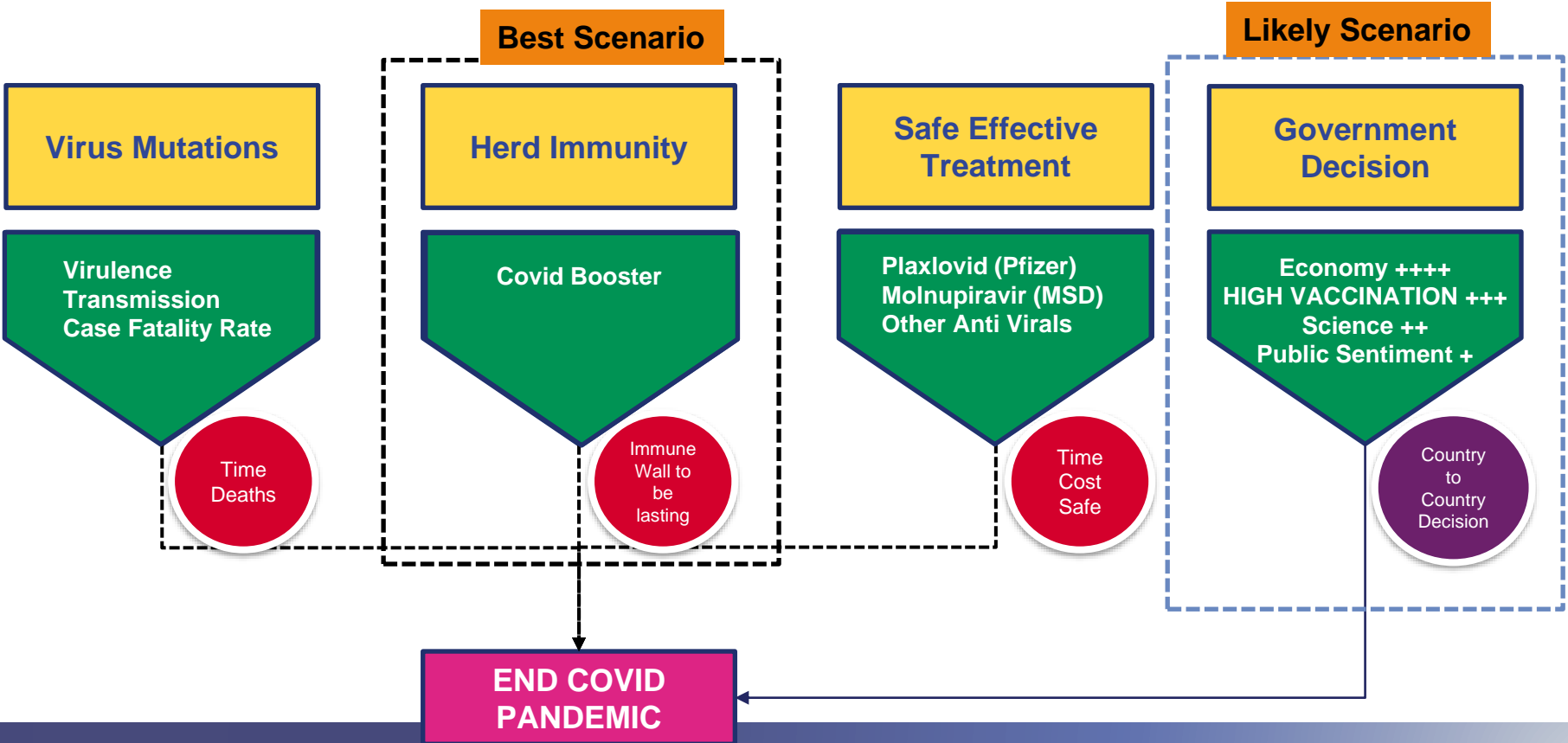
- To anticipate checkpoints
- To anticipate testing and vaccination requirements
- To anticipate the presentation of national ID or similar documents at the checkpoints



TRAVEL DURING OMICRON



ENDING THE COVID-19 PANDEMIC



WORKSAFE | A CASE STUDY

COMPREHENSIVE COVID-19 STRATEGY FOR MANUFACTURING SECTOR

CHALLENGE

- Company facing return to operations challenges due to the nature of their business

SOLUTION

- Comprehensive COVID WorkSafe strategy (and support) to enable manufacturing Client to reopen factories, safely mobilize and monitor staff, and managing various COVID-related risks faced by employees, all under Client's Duty of Care approach.

IMPACT

- Enabled Client and employees to implement measures at various levels to return to activities
- International SOS' Team continue to respond to new challenges Client faced as the Pandemic continue to unfold.

WORLDWIDE REACH. HUMAN TOUCH.

Key factors to consider in Return To Work(RTW)

Figure 1 below presents the key factors to consider in the RTW risk assessment. Each of these are described in more detail in the following section.

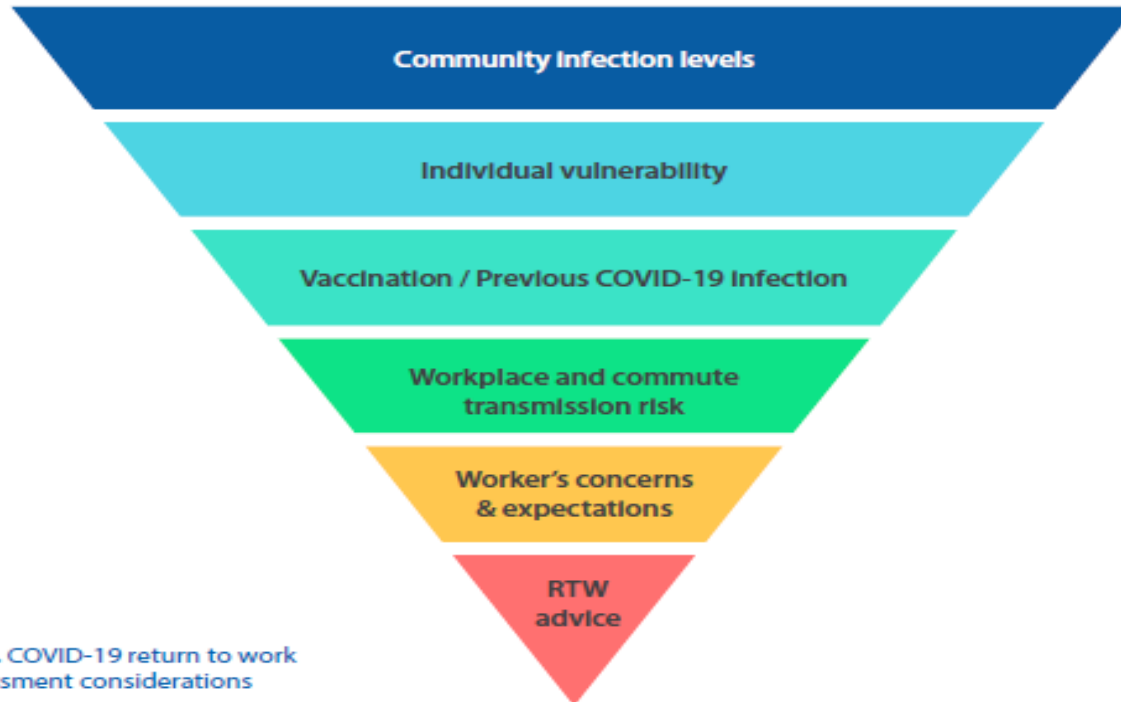
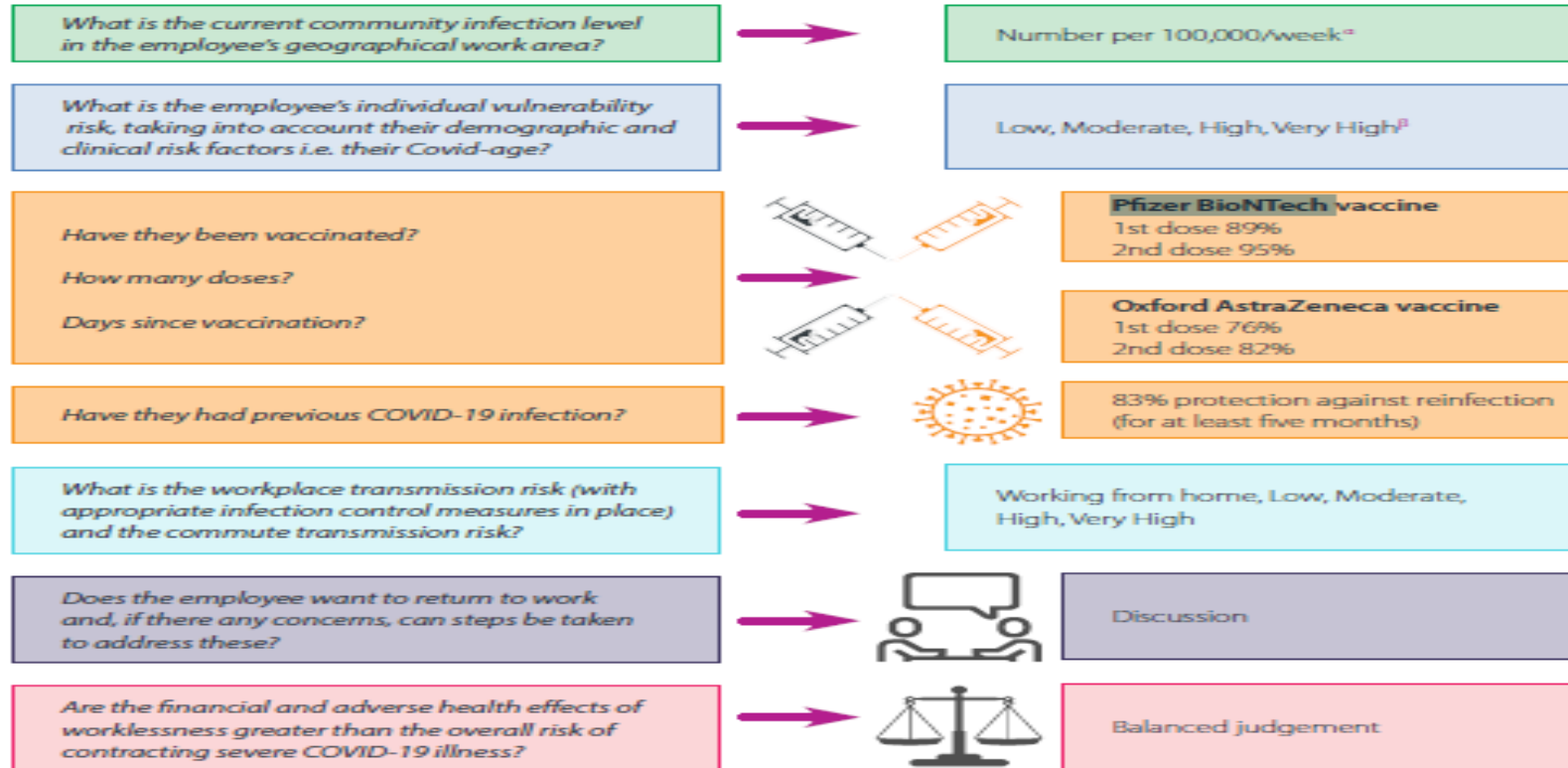


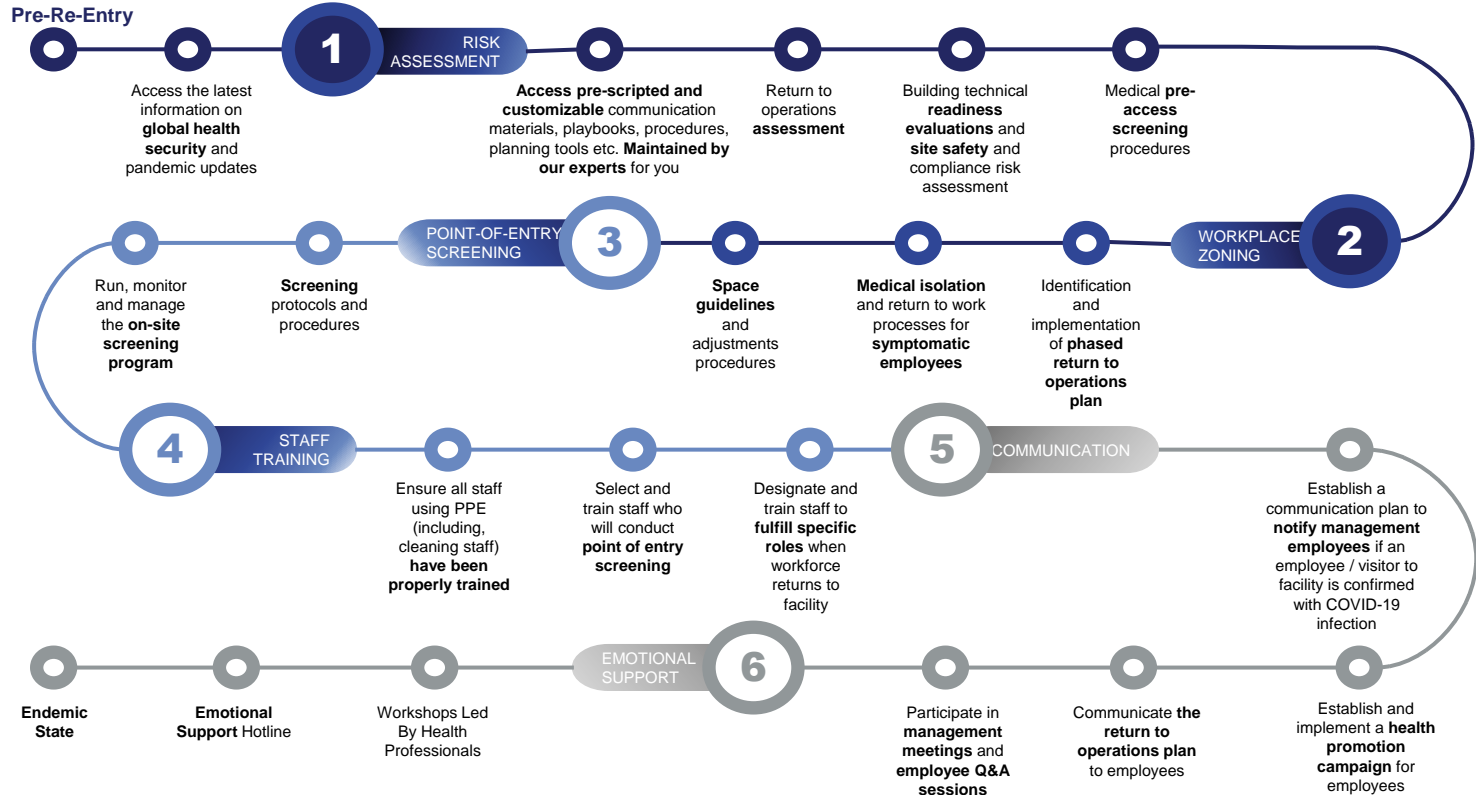
Figure 1. COVID-19 return to work risk assessment considerations

Key factors to consider in Return To Work(RTW)

Figure 2. Flow chart summarising the RTW risk assessment steps



RETURN TO OFFICE THE JOURNEY



RETURN TO OFFICE: WORKSAFE ADVISORY SERVICES – DESIGNING BESPOKE SOLUTIONS

Expert Medical Advisory

- Review the existing process and protocols for your workplace
- Identify gaps, resources needed, and services required

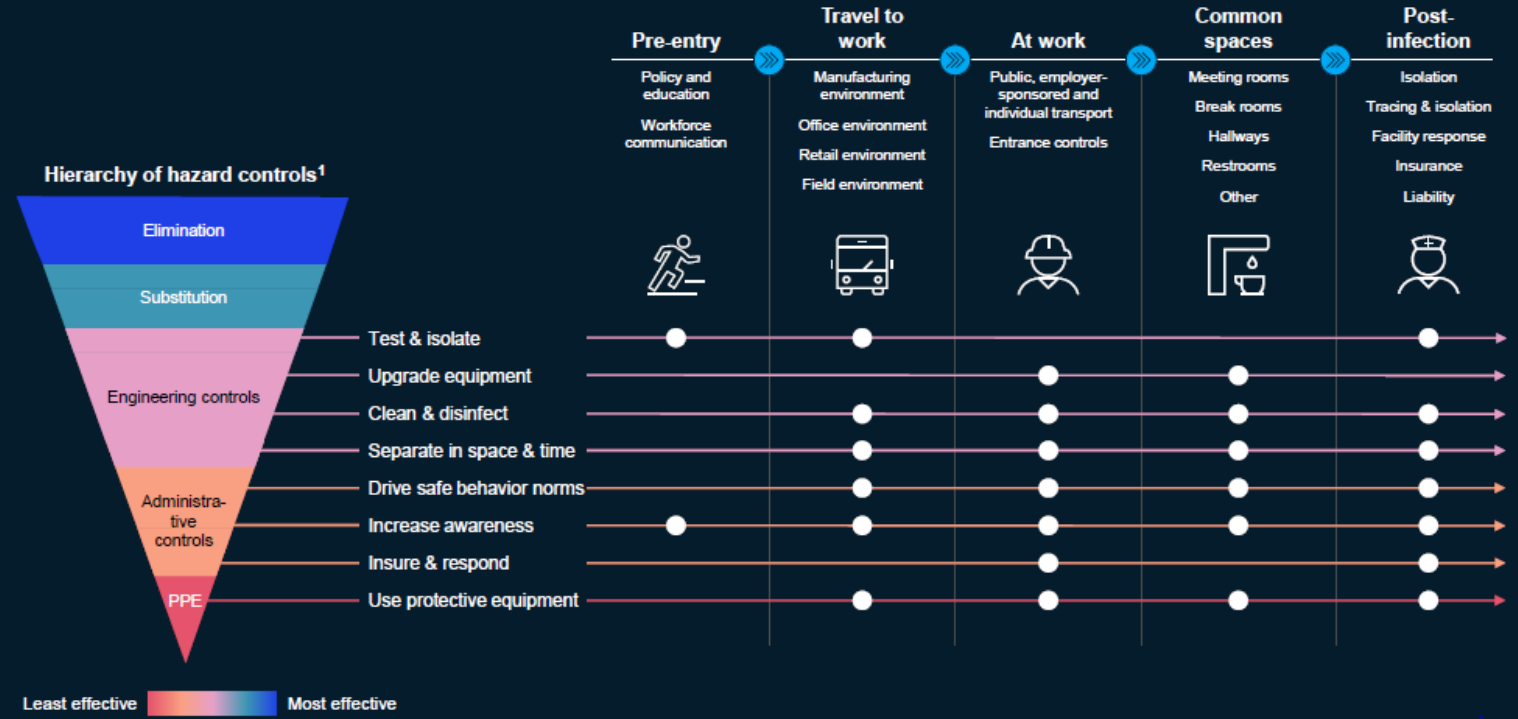
Return to Operations

- Dedicated medical professional as health advisor for your organization
- Screening procedures, vaccinations and testing requirements
- Barrier measures such as social distancing, hygiene, masks
- Up-to-date Government policies and guidance
- Risk categories and employee fitness
- Medical isolation and processes for symptomatic employees
- Update health, travel and safety policies



How to consider transition: Ensuring protection across workforce journey

Workforce protection interventions across manufacturing, office, retail and field environments



COVID-19 RISK ASSESSMENT



Factor		Score
Sex	Female	0
	Male	1
Age	Age <47	0
	Age 47<55	1
	Age 55<60	2
	Age 60<65	3
	Age 65<70	5
	Age ≥70	8
BMI	BMI 30-34.9	1
	BMI 35-39.9	2
	BMI ≥40	3

Factor		Score
Immunosuppressive Condition	Disease and condition effecting your immune system (e.g HIV, autoimmune diseases, Thalassemia, Post-Organ transplant etc)	3
	On oral steroids or other immunosuppressive drugs (chemotherapy agents) such as: Prednisone, Dexamethasone, Methotrexate, Cylosporine, Azathioprine (not an exhaustive list).	2
	Undergoing other immunosuppressive treatment such as: radiotherapy	2

Total Score	Risk Category	Action
Under 5	Low	Unrestricted work, practice COVID-19 preventive measures at all times
5 to 7	Medium	Enhanced mitigation (use PPE at all times) Office work and working office hours only
8 or more	High	Unfit till modifiable factor are addressed, conditions controlled. If in doubt escalate individual profiles for determination.

COVID-19 RISK ASSESSMENT



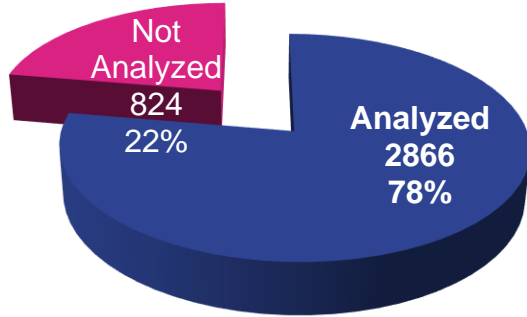
Factor		Score
Respiratory Disease	Asthma/COPD	1
	Asthma/COPD on inhaled steroids such as: Pulmicort, Flovent, Symbicort (not an exhaustive list)	2
	Asthma/COPD with physical limitation in exercise (poor Harvard Step Test result).	3
	Other chronic respiratory diseases, such as: Tuberculosis Referral to Pulmonologist if 'active'	2
Diabetes	DM/NIDDM	1
	DM/NIDDM with last recorded HbA1c >6.5%	2
Hypertension	Hypertension: treated (and controlled) and Systolic BP \geq 140 mmHg Diastolic BP \geq 90 mmHg on examination	1

Factor		Score
Cancer	Hematological cancer	3
	Non-hematological cancer	2
Cardiac Diseases	Heart Failure (decreased exercise capacity/poor Harvard Step Test result, peripheral oedema or on heart failure treatment). Mild, moderate or severe.	2
	History of Ischemic Heart Disease	2
	History of Malignant Heart Rhythm Disorder	2
Kidney Disease	Kidney Disease (recorded abnormal urea / creatinine levels).	2
Liver Disease	Chronic Liver Disease (recorded abnormal LFTs). Requires repeat LFTs, ultrasound (if indicated) and referral to hepatologist if 'active'	1

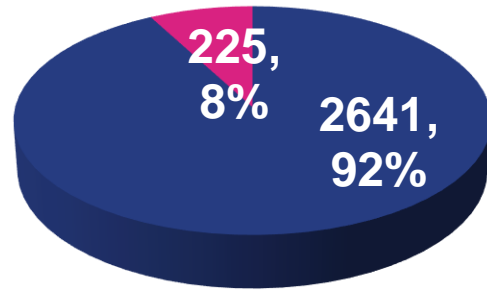
COVID-19 RISK ASSESSMENT AUDIT

DEMOGRAPHIC DATA

Raw Data: 3690

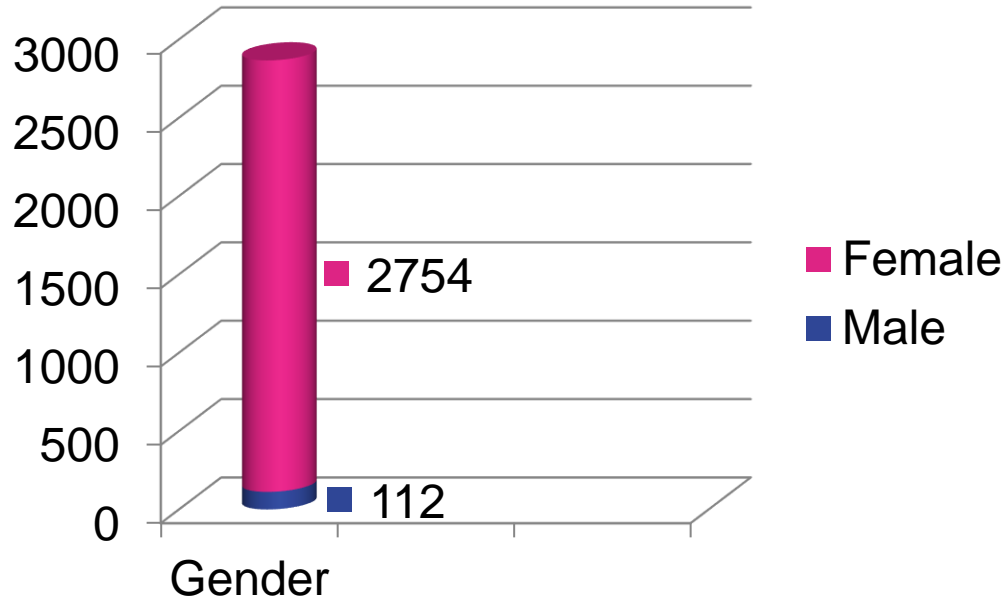


Reviewed Data: 2866

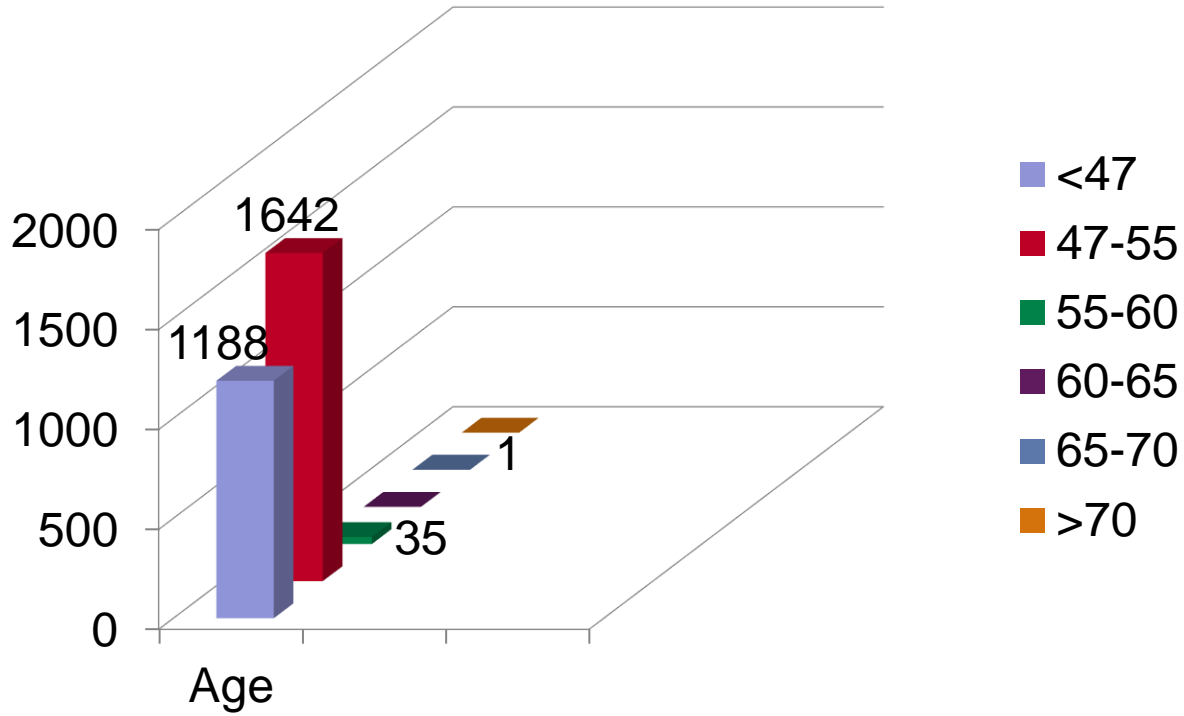


- Complete Data
- Incomplete Data

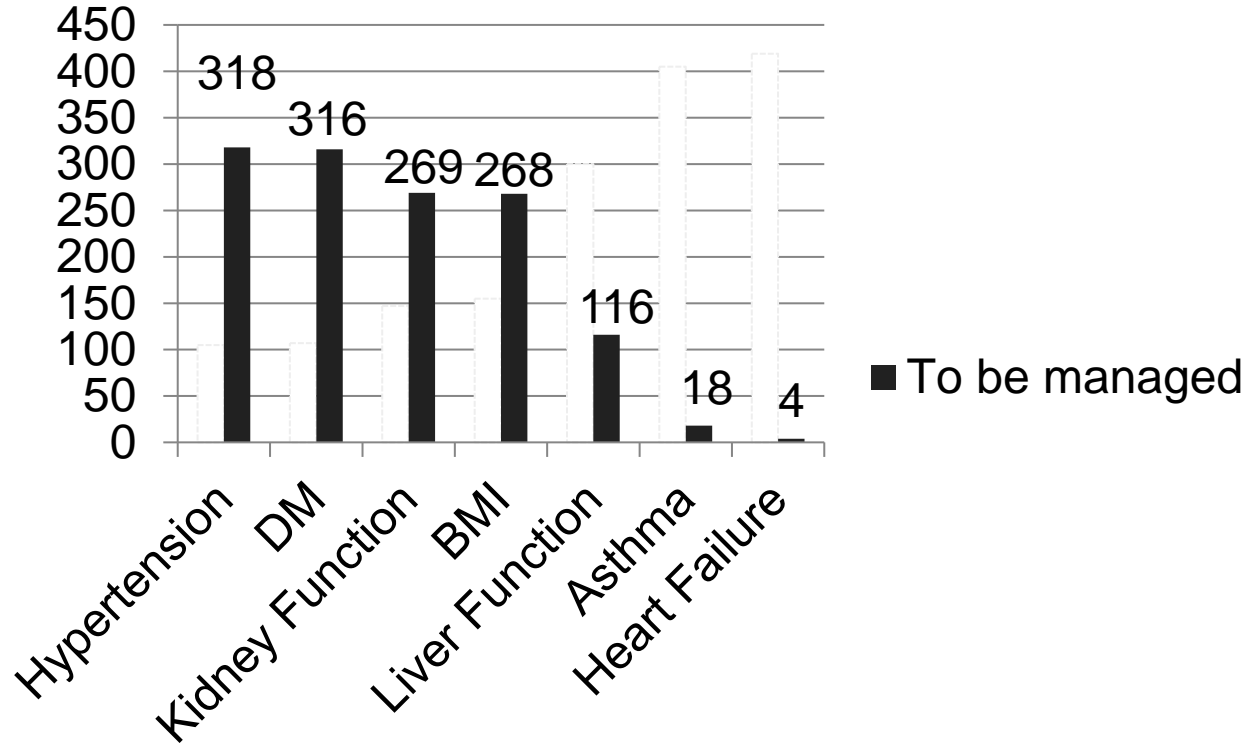
DEMOGRAPHIC DATA (GENDER)



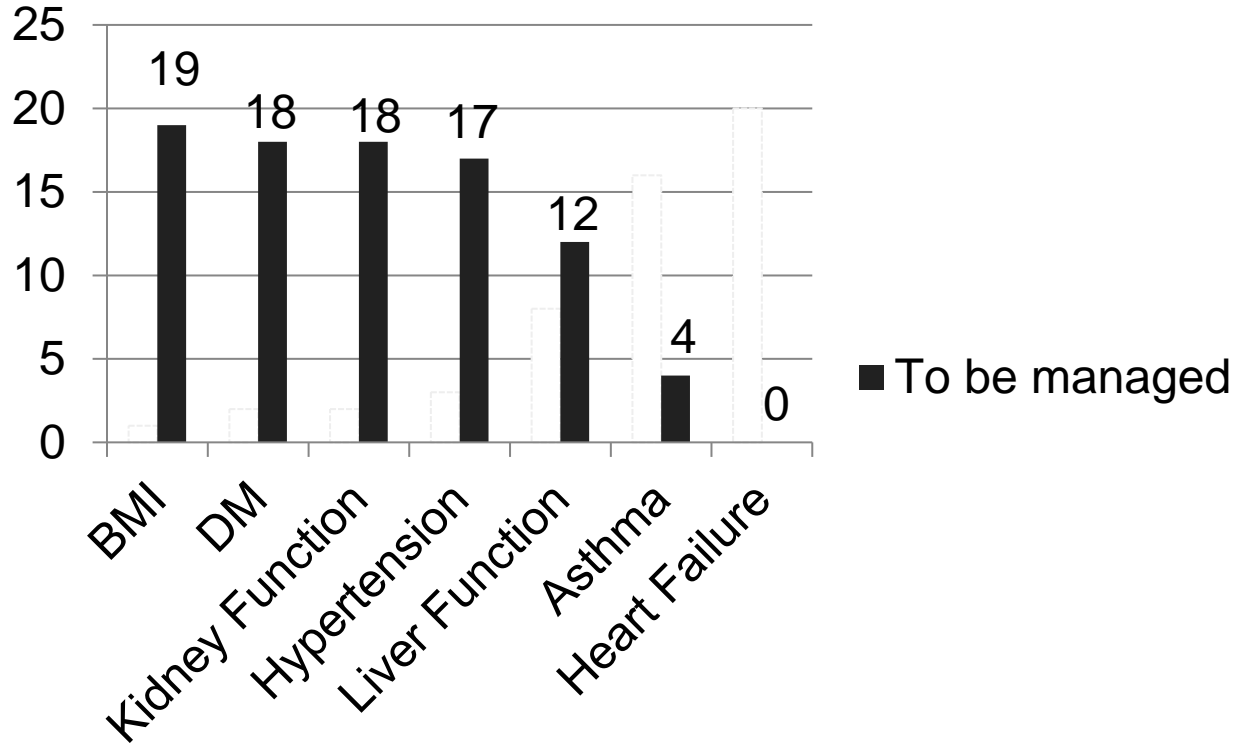
DEMOGRAPHIC DATA (AGE)



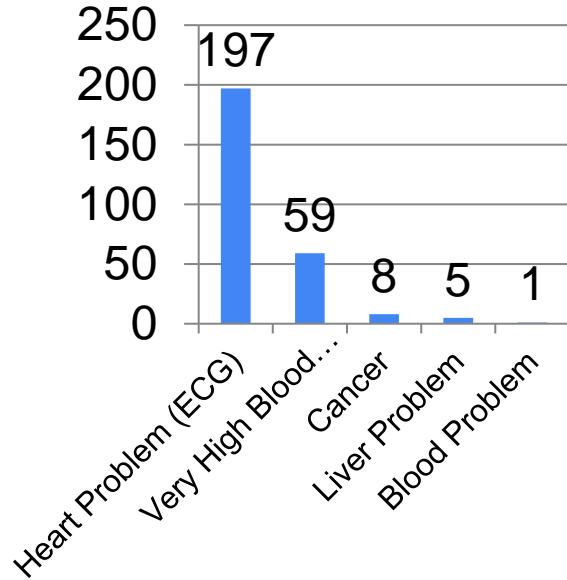
MODERATE RISK MODIFIABLE FACTORS



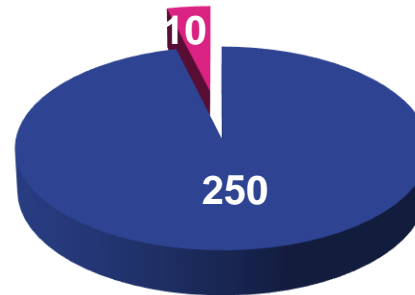
HIGH RISK MODIFIABLE FACTORS



ADDITIONAL REMARKS



■ Total Case:
260



- Single Factor
- Multiple Factors

RECOMMENDATION: THE WELLNESS PROGRAMME

Population Approach

- Health Promotions
- Regular Exercise Program
- Ideal Weight Challenge
- Workplace Nutritional Assessment

High – Medium Risk

- Detailed Care Plans & Referrals
- Monthly health coaching
- Nutritionist consultation
- BLS training for spouses

RETURN TO OFFICE GUIDELINES

RETURN TO OFFICE GUIDELINES

	PPKM Level 4	PPKM Level 3	PPKM Level 2	PPKM Level 1	Very Low
Level of transmission					
Confirmed case	>150/100.000 per week	50-150/100.000 per week	20-50/100.000 per week	<20/100.000 per week	0/100.000/week
Hospitalization	>30/100.000 per week	10-30/100.000 per week	5-10/100.000 per week	<5/100.000 per week	0/100.000/week
Death case	>5/100.000 per week	2- <5/100.000 per week	1-<2/100.000 per week	<1/100.000 per week	0/100.000/week
Mitigation Measures					
Vaccination	YES	YES	YES	YES	YES
Pre-Deployment Quarantine	YES	YES	YES	Y, for uncomplete vaccination	NO
Face Mask	YES	YES	YES	YES	YES
Safe Distancing	YES	YES	YES	YES	YES
Team Segregation	YES	YES	YES	YES	YES
Testing: Reactive/Case Base	PCR	PCR	PCR	PCR	PCR

RETURN TO OFFICE GUIDELINES

	PPKM Level 4	PPKM Level 3	PPKM Level 2	PPKM Level 1	Very Low
Testing Preventive/periodic for WFO Staff (Screening)	RDT-Ag biweekly or weekly	RDT-Ag weekly & biweekly uncomplete vaccinated	RDT-Ag weekly & biweekly uncomplete vaccinated	RDT-Ag weekly for uncomplete vaccinated	RDT-Ag 2 weekly for uncomplete vaccinated
Case tracking	YES	YES	YES	YES	YES
Travel	Deffered	Essential			
Work from Office					
Non-Essential Sector	0%	50%	50%	75%	100%
Essential Sector	50%	100%	100%	100%	100%
Vulnerable Group Specific Mitigation	WFH	WFO for low risk Category and complete vaccinated	WFO for medium risk Category and complete vaccinated	WFO for complete vaccinated	WFO for at least 1 dose vaccinated
Booster Recommendation	YES	YES	YES	YES	YES
Desinfection after cases	Full disinfection of accommodation room / enclosed office / LV space only.	Full disinfection of accommodation room / enclosed office / LV space only.	Full disinfection of accommodation room / enclosed office / LV space only.	Full disinfection of accommodation room / enclosed office / LV space only.	Full disinfection of accommodation room / enclosed office / LV space only.
Daily Cleaning - common areas	3 times daily	3 times daily	twice daily	Daily	Daily

RETURN TO OFFICE GUIDELINES

	PPKM Level 4	PPKM Level 3	PPKM Level 2	PPKM Level 1	Very Low
Office pantry - dining room	Segregated or fixed meal times with strict occupancy	Segregated or fixed meal times with strict occupancy	Controlled occupancy / queues - no segregation	Controlled occupancy / queues - no segregation	Controlled occupancy / queues - no segregation
Meeting off line - room capacity	0%	0%	50%	75%	75%
Praying room	25%	50%	50%	75%	75%

OUR DIGITAL TOOLS

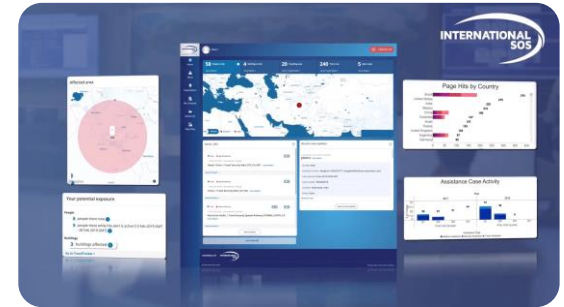
INTERNATIONAL SOS ASSISTANCE APP



INTERNATIONAL SOS HEALTHCLOUD360



MANAGER VIEW





Q&A NOW OPEN

THANK YOU FOR ATTENDING

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For any further enquiries, please contact:
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