

NATIONAL COVID-19 IMMUNISATION PROGRAMME



**LINDUNG DIRI,
LINDUNG SEMUA.**



**THE SPECIAL COMMITTEE FOR ENSURING ACCESS
TO COVID-19 VACCINE SUPPLY (JKJAV)**

18 FEBRUARY 2021

NATIONAL COVID-19 IMMUNISATION PROGRAMME



**THE SPECIAL COMMITTEE FOR ENSURING ACCESS
TO COVID-19 VACCINE SUPPLY (JKJAV)**

National COVID-19 Immunisation Programme, 18 February 2021

© The Special Committee for Ensuring Access to COVID-19 Vaccine Supply (JKJAV) 2021

All rights reserved. No part of this publication may be reproduced, stored in a retrieval system, or transmitted in any form or by any means, electronic, mechanical, photocopying, recording or otherwise without the prior written authorisation of the copyright owner.

This document has been drawn up based on available information deemed accurate as of 18 February 2021. This document provides up-to-date information on the Immunisation Programme policies, vaccine supply procurement strategies as well as the implementation of COVID-19 vaccination effort and monitoring to curb the COVID-19 pandemic in Malaysia. The information in this document will be updated from time to time based on latest developments and information.

Published by:

THE SECRETARIAT OF THE SPECIAL COMMITTEE FOR ENSURING ACCESS TO COVID-19 VACCINE SUPPLY (JKJAV)

Facebook Messenger Link: m.me/jkjavmy

Data analysis, content curation and writing services provided by the Academy of Sciences Malaysia



“The Government’s strategy is to ensure as many residents in Malaysia as possible will receive the vaccine to save lives in the fastest possible time.

The vaccine will be provided for free to all citizens and non-citizens of Malaysia.

Once the vaccine rollout is completed, the hope is that our national economy will be able to recover and the lives of the *rakyat* will improve. However, we must still take precautionary steps to ensure that the pandemic does not reoccur.”

YAB Tan Sri Muhyiddin Yassin
Prime Minister of Malaysia

“The document outlines the national strategic plan to ensure the

**National COVID-19
Immunisation Programme runs
smoothly, safely, effectively and
in an orderly manner in the effort
to curb and end the COVID-19
pandemic** in Malaysia. A whole-of-Government

and whole-of-society approach has been adopted, which involves numerous Ministries and Government Agencies, State Governments, Non-Governmental Organisations (NGOs), the private sector and members of the community to ensure the programme achieves its target.”

YB Dato' Sri Dr Adham Baba
Minister of Health Malaysia

YB Khairy Jamaluddin
Minister of Science, Technology
and Innovation

Co-chairs of the Special Committee for Ensuring Access to COVID-19 Vaccine Supply
(JKJAV)



LINDUNG DIRI, LINDUNG SEMUA.

Vaccines are one of the methods for us to curb this pandemic and one of the best ways to protect our society from COVID-19. Since the beginning of the pandemic, various efforts have been carried out globally to develop COVID-19 vaccines.

The Special Committee for Ensuring Access to COVID-19 Vaccine Supply (JKJAV) which is co-chaired by the Minister of Health Malaysia and the Minister of Science, Technology and Innovation, was established to ensure timely access to the supply of COVID-19 vaccines for the country.



Want to know about vaccines?

What is a vaccine?

Vaccines contain antigens that serve to stimulate the body's immune system and form immunity for specific infectious diseases.

What is a COVID-19 vaccine?

The COVID-19 vaccine stimulates the immune system so that in the instance of exposure to SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2), our body would be able to react against the COVID-19 infection. Various platforms such as RNA genetic sequencing, viral vectors, deactivating viruses and protein sub-units have been used to develop safe and effective coronavirus vaccines. It gives you the best protection against COVID-19.

Source: Ministry of Health (MOH)

What is the importance & the use of vaccines in Malaysia?

Since the early 1950s, vaccines have been given out through the National Immunisation Programme to protect Malaysian citizens from vaccine-preventable diseases.

To date, 11 types of vaccines to prevent 13 types of vaccine-preventable diseases have been given to children – which are Tuberculosis, Hepatitis B, Diphtheria, Tetanus, Whooping Cough (Pertussis), Polio, Haemophilus Influenza Type B (Hib), Measles, Rubella, Mumps, Pneumococcal, Japanese Encephalitis (JE) and Human Papillomavirus (HPV). Additionally, the meningococcal vaccine is also compulsory for all Malaysians heading to perform their *hajj* and *umrah*.

Source: MOH

How was the COVID-19 vaccine able to be developed so quickly?

Shortly after the virus genetic code was shared by researchers from China in January 2020, vaccine development efforts took place intensively at the global level. For the first time, the development of vaccines was accelerated through major global investment by various parties such as countries, world bodies, pharmaceutical companies and individuals. The rapid development of the vaccines is also the result of previous studies on pathogens that have triggered pandemics, epidemics and endemics such as the Nipah Virus, Severe Acute Respiratory Syndrome (SARS) and Middle East Respiratory Syndrome (MERS).

Source: JKJAV

JKJAV also plays an important role as the primary committee in the planning, implementation and monitoring of the entire National COVID-19 Immunisation Programme. The National COVID-19 Immunisation Programme outlines the policies, vaccine supply procurement strategies, implementation efforts and monitoring to curb the COVID-19 pandemic nationally.

This document aims to serve as a reference point for information and as a general guide for implementers (at the state and agency levels and the community on vaccines, the implementation process as well as security and monitoring efforts that will be carried out by the Government.

COVID-19 marks a new history in clinical trials

Clinical trials are important to test the effectiveness and safety of newly developed vaccines. COVID-19 has made history in the medical field as it involved 10 times the usual number of volunteers compared to other vaccines because it was easy to get volunteers as a result of the fact that the COVID-19 pandemic was happening concurrently globally and has posed a global threat.

Source: FAQ MOH & MOSTI

What is the fatwa for COVID-19 vaccination?

The Special Muzakarah (discussion) of National Council for the Islamic Religious Affairs (MKI) had decided that the use of the COVID-19 vaccine is permissible (*harus*).

The use of vaccines to protect mankind from dangerous diseases is unusual in Islam but has been in practice since 1988. Besides Malaysia, other world fatwa institutions have also decreed the need for vaccine use, among them are the leading institutions of al-Azhar al-Sharif; Fatwa Council of the United Arab Emirates Government; and Majma 'Fuqaha' al-Shari'ah United States.

Source: Department of Islamic Development Malaysia

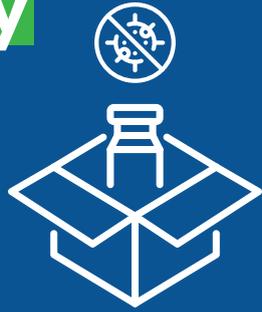
Has the COVID-19 vaccine fulfilled all the criteria of the relevant laws?

Yes, it has. The COVID-19 vaccine is regulated and complies with the following Acts:

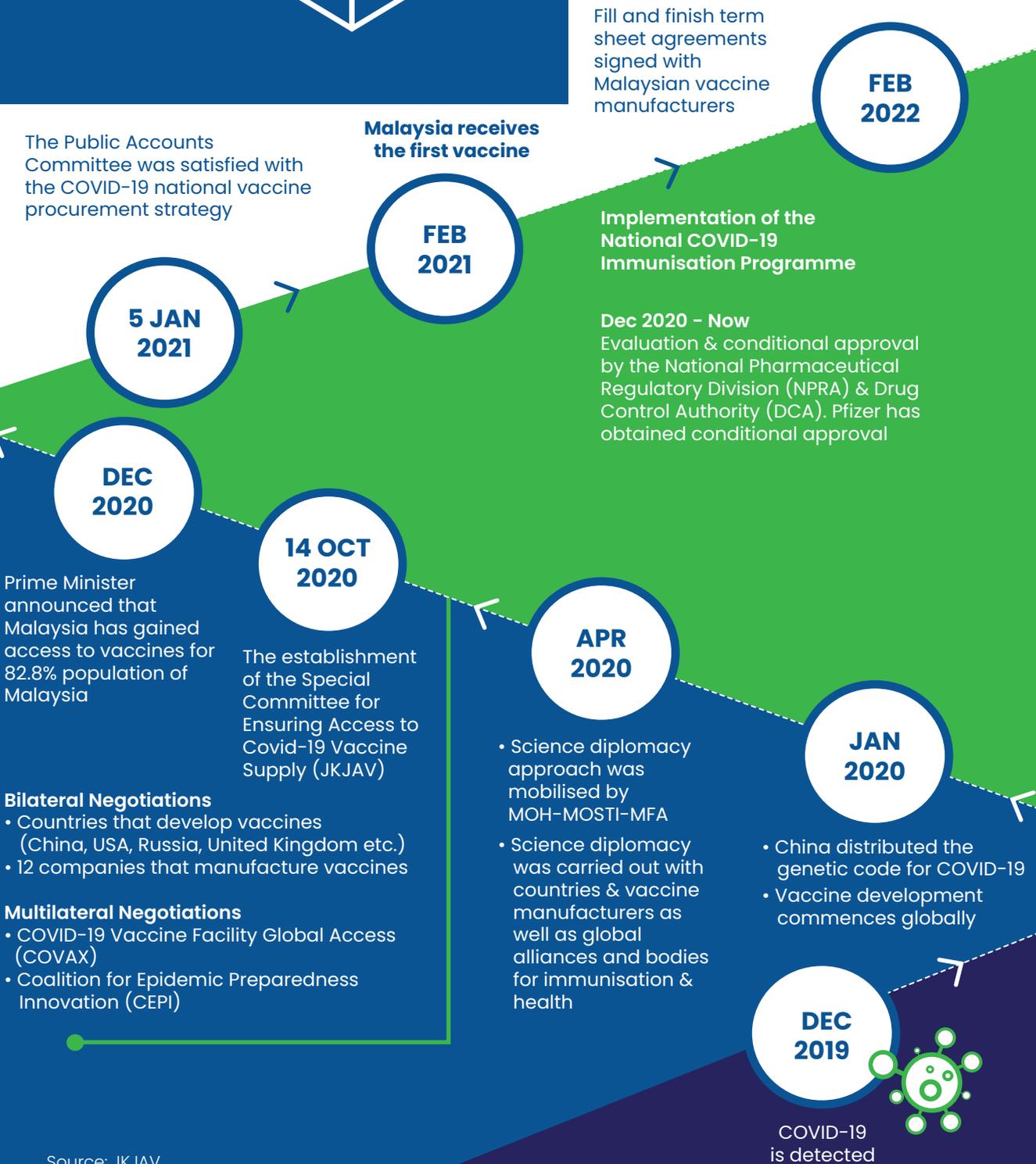
- Poisons Act 1952 (Act 366) and its regulations
- Sale of Drugs Act 1952 (Act 368) and its regulations
- Drugs and Cosmetic Control Regulations 1984
- Infectious Disease Prevention and Control Act (Act 342)

Source: MOH

Vaccine Supply



Timeline for Malaysia's vaccine acquisition



Source: JKJAV
 Analysis & compilation: ASM

Strategies for the Access and Acquisition of the COVID-19 vaccine

The need to get supplies of safe and efficacious vaccine is a national priority to ensure that the National COVID-19 Immunisation Programme can be implemented to curb this pandemic.

The Government has taken an integrated and structured approach in its vaccine acquisition effort for the country by leveraging on its diplomatic relations and strategic international cooperation with countries, vaccine manufacturers as well as world health bodies and affiliates.

Through science diplomacy efforts that were jointly carried out by the Ministry of Health (MOH), Ministry of Foreign Affairs (MFA) and the Ministry of Science, Technology and Innovation (MOSTI) starting April 2020, the Government has adopted a multi-pronged approach to enable Malaysia to secure access to a portfolio of COVID-19 vaccines which is being actively developed worldwide.

The strategic international cooperation, be it at a multilateral or bilateral level, is a step by the country to support the national aspirations and participate in solidarity efforts at a global level towards combating COVID-19. It has allowed for the diversification of vaccine procurement options for the country and reduced dependence on a single source of supply.

Negotiations with COVID-19 vaccine manufacturers looked at not only the technical aspects such as durability, development, methods, stability, contraindications, population target, safety, effectiveness, dosage, registration and access, but also the commercial aspects of the vaccine such as pricing, refunds, delivery schedule, advance payment as well as logistics.

Apart from that, the negotiations also cover aspects of cooperation and value add to the development of the national supply of vaccines. This includes the development of vaccine bottling (fill and finish), research and development (R&D) as well as technology transfer and vaccine manufacturing in the future.

Malaysia's Involvement in the COVID-19 Vaccines Global Access (COVAX) Facility

The COVID-19 Vaccine Global Access (COVAX) facility is a global initiative launched by Global Alliance for Vaccines and Immunisation (GAVI), the Coalition for Epidemic Preparedness Innovation (CEPI) and the World Health Organization (WHO) to provide equitable access globally for diagnostics, treatment and vaccines.

On 13 November 2020, Malaysia officially signed on to the COVAX Facility. The COVAX facility is a multi-pronged strategy approach that will enable countries to diversify their options as well as reduce the risk of focusing on only bilateral efforts to procure COVID-19 vaccines. Participation in this facility guarantees the supply of vaccines for 10% of those living in Malaysia. Malaysia's participation also shows that we are working in global solidarity to ensure equitable access to COVID-19 vaccines.

Bilateral Agreement between Malaysia and China

The Governments of Malaysia and the People's Republic of China signed an agreement on their cooperation for the safe and efficacious development of vaccines on 18 November 2020. This agreement serves as a platform to provide Malaysia priority access to the COVID-19 vaccines developed by the People's Republic of China. Apart from that, it will facilitate expertise and knowledge sharing, as well as facilitate cooperation in the fields of science and technology between the two countries, in line with the aspiration to develop the vaccine industry of both nations.

Source: JKJAV & KLN

Malaysia's COVID-19 Vaccine Portfolio

As of February 2021, Malaysia has secured 66.7 million doses of COVID-19 vaccines through the COVAX Facility and advance purchases from five vaccine manufacturers. Of the five vaccine manufacturers, the Pfizer-BioNTech vaccine has obtained conditional approval from the Drug Control Authority (DCA) and the National Pharmaceutical Regulatory Agency (NPRA) on the 8th of January 2021. The remaining four COVID-19 vaccine candidates are still pending approval from NPRA. The supply of vaccines from these five suppliers will be received in stages by Malaysia starting February 2021, subject to NPRA approval.

Supply of COVID-19 vaccines that have been acquired by Malaysia

Vaccine		 (including COVAX Facility purchases)			
Type of Vaccines	mRNA	Viral vector	Inactivated virus	Viral vector	Viral vector
Manufacturer's Country	The United States of America	United Kingdom	China	China	Russia
Number of doses	2	2	2	1	2
Efficacy	95%	62% - 90%	50.4% - 91.25%	65.7%	91.6%
Storage Temperature	-75°C	2-8°C	2-8°C	2-8°C	-20°C
Number of doses (Million)	32	12.8	12	3.5	6.4
% of Populations	50%	20%	18.75%	10.9%	10%
Countries that have used the vaccine	United States of America, Singapore, UK, Bahrain, Canada, Mexico, Switzerland, the European Union	UK, South Africa, Ukraine, Brazil, the European Union, Canada, India	China, Indonesia, Turkey, Chile, Hong Kong, Brazil, Cambodia	China; Mexico; Pakistan	Russia, Argentina, Brazil, South Korea, Belarus

* The vaccine supply is subject to periodic negotiations

* This information is valid as of 16 February 2021 and will be updated from time to time

Source: JKJAV

Overall number of doses:
66.7 million covering
109.65% of those in
the country

Efficacy of COVID-19 vaccine and why is it different?

The efficacy of a vaccine, or how well the vaccine works, is seen through its ability to protect individuals from the symptoms of COVID-19 through vaccination. The efficacy level varies according to the way clinical studies are conducted, the type of vaccine, the risk of disease in volunteers and various other factors. Although the efficacy level varies, WHO has prescribed that the minimum level of efficacy for the COVID-19 vaccine is 50%. All vaccines approved by NPRA are safe and efficacious for use in Malaysia.



What are the types of vaccines?

Types of vaccines	mRNA	Viral vector	Inactivated virus
Primary content and how it reacts 	mRNA sequence which enters the individual cell to produce the specific virus protein	Contains modified (vector) virus to transport the antigen genetic code. The human cell will produce the targeted protein	Virus that have been killed using high heat, chemical or radiation
Function 	Uses the mRNA molecule to stimulate the immunity in order to recognise the targeted virus protein	A safe viral vector is used to deliver the genetic material of the targeted virus and stimulating the human immune response	Virus that has been killed and used to stimulate the human immune response
Advantages 	<ul style="list-style-type: none"> • Simple and quick to produce • Does not require living component and synthetically produced. • Triggers an adaptive immune response 	<ul style="list-style-type: none"> • Proven technology • Triggers an adaptive reaction for a more effective immune response 	<ul style="list-style-type: none"> • Proven technology • Suitable for those who have a weak immune system • Easy to produce
Challenges 	<ul style="list-style-type: none"> • Some mRNA vaccines require extremely cold storage conditions • Used as a vaccine for the first time in medical history 	<ul style="list-style-type: none"> • Complex manufacturing process • Important to ensure the virus vector is safe to be used 	<ul style="list-style-type: none"> • High manufacturing cost
Example	None	Ebola, Vaccines for livestock	Polio, Japanese Encephalitis & Rabies
Vaccine candidate	<ul style="list-style-type: none"> • Moderna • Pfizer/BioNTech 	<ul style="list-style-type: none"> • AstraZeneca • CanSino Biologics • Johnson & Johnson • Sputnik V 	<ul style="list-style-type: none"> • Sinovac

Analysis & compilation: The Academy of Sciences Malaysia

Value added

Currently, Malaysia does not have the capacity or complete facilities for vaccine manufacturing. Therefore, Malaysia needs to get supplies of COVID-19 vaccines that have been developed by other countries. In negotiations for the purchase of the COVID-19 vaccine, the Government has included value-added elements to enable Malaysia to develop our vaccine development capacity in the country.

For example, the Malaysian Government has signed Terms Sheet agreements with Pharmaniaga and Solution Biologics Sdn Bhd to carry out the fill and finish manufacturing process locally, which is the last step of filling the vaccine into the vials before it is distributed. Through this measure, the Sinovac and CanSinoBio vaccines will be purchased in bulk and the manufacturing process will be implemented in Malaysia, which in turn will accelerate vaccine deployment. The Government is also in talks with the Russian Government about R&D and manufacturing of the Sputnik V vaccine in Malaysia to increase the amount of COVID-19 vaccine doses that can be used in Malaysia and the region.

The Government has also signed a Bilateral Investors Agreement with the Coalition for Epidemic Preparedness Innovation (CEPI) to enable Malaysia to gain access to vaccine R&D, technology transfer and new expertise for local researchers.

MOSTI has also funded local vaccine research and development for COVID-19 through the MOSTI Combating COVID-19 Fund (MCCOF) to two groups of researchers from Universiti Malaya (UM) and Universiti Putra Malaysia (UPM).

Malaysia is also the first country outside of China to conduct clinical trials for an inactivated COVID-19 vaccine made by the Institute of Medical Biology Chinese Academy of Medical Sciences, China (IMBCAMS) involving 3,000 volunteers.

Given that Malaysia and the world are at risk of being exposed to other pandemics in the future, the Government, through the National Science Council, in a meeting in July 2020 agreed that the National Vaccine Development Roadmap be drafted as a long-term plan for Malaysia to manufacture vaccines locally.

How is the vaccine evaluated and approved?

Like other pharmaceutical products, vaccines are constantly monitored in terms of quality, effectiveness and safety. Right now, only the Pfizer-BioNTech vaccine has been given conditional approval based on strict compliance standards through the evaluation of scientific, clinical and technical data. The National Pharmaceutical Regulatory Agency (NPRA) is the body responsible for evaluating the vaccines to be registered in Malaysia. The Drug Control Authority (DCA), on the other hand, approves the use of the vaccines based on the results of NPRA's evaluation. Each group of vaccines that will be used in Malaysia will be monitored from the aspect of compliance, according to WHO standards. After the vaccine is administered in Malaysia, monitoring of Adverse Events Following Immunisation (AEFI) will be carried out by MOH.

Good Manufacturing Practices (GMP)

Among the aspects assessed are vaccine manufacturers' compliance with Good Manufacturing Practice (GMP) requirements. This is to ensure that the vaccines produced are of good quality, in accordance with standards while minimising the risks that may exist in the manufacturing process.

International regulatory standards- WHO and The International Council for Harmonisation of Technical Requirements for Pharmaceuticals for Human Use (ICH)

NPRA's assessment is based on international regulatory practices and standards:

- a. **Quality** - aspects of control of raw material and manufacturing process in order to ensure that the product is developed according to specifications.
- b. **Safety** - in addition to being effective in providing protection, the vaccine may have other side effects. The role of NPRA is to ensure that the benefits of the products received outweigh the risk of known side effects.
- c. **Effectiveness** - the aspect of producing sufficient antibodies to fight infections and also the effectiveness of vaccines in providing protection from infections.

Source: MOH, WHO & ICH

Vaccine Policy



COVID-19 Vaccination Policy

The COVID-19 vaccination is voluntary and will be provided **free of charge** to all those living in Malaysia (citizens and non-citizens). The age limit is 18 years and above, this will be evaluated from time to time.

The approach by the Government is to ensure that at least 80% of Malaysia's adult population receive vaccines by February 2022 to reduce infections, hospitalisations and death.

For vaccines that require two doses, each individual will get a vaccine of the same type and the duration of receiving the second dose will depend on the type of vaccine allocated to them. For example, the interval between the first and second dose for:

- the Pfizer & Sputnik V vaccine- 21 days;
- the AstraZeneca vaccine- 28 days; and
- the Sinovac vaccine - 14 days

Vaccines will be distributed in stages nationally based on supplies and deliveries from vaccine manufacturers.

Vaccine Distribution Strategy and Target Groups

The first strategy is to vaccinate frontliners, especially those in the health sector, to ensure that they are protected from contracting COVID-19. This is to ensure that the health sector continues to operate optimally.

The second strategy is to reduce the burden of disease for those in high-risk groups so they are protected from a COVID-19 infections. This in turn can reduce the load on the Malaysian public health system.

The third strategy to control this pandemic is for the vaccination to be carried out in high-risk areas throughout phases two and three through risk assessment to control the spread of the disease.

Overall, MOH has developed the priority list for vaccination based on:

- a. The epidemiology of the disease and clinical data;
- b. Types of vaccines;
- c. Operational factors; and
- d. Risk assessment.

Target groups for the 3 phases of vaccination and the estimated number of individuals to be vaccinated

PHASE 1 (February – April 2021)

Priority group 1

Frontliners comprising of public and private healthcare personnel

500,000
people

Priority group 2

Frontliners consisting of essential services*, defence and security personnel

* Will be updated from time to time by JKJAV

PHASE 2 (April – August 2021)

Priority group 1

Remainder of healthcare workers as well as those in essential services and defence and security personnel

9.4
million
people

Priority group 2

Senior citizens (those aged 60 and over), high-risk group with chronic diseases such as heart disease, obesity, diabetes and high blood pressure and people with disabilities (OKU)*

* The information will be reviewed periodically

Pandemic control measures

PHASE 3 (May 2021 – February 2022)

Priority group

Adult population aged 18 years and above (citizens & non-citizens)

Priority will be given to those in the red zones; followed by those in yellow zones and finally those in green zones

Target
13.7
million
people/
more

Pandemic control measures

Source: MOH

Why is the vaccination for those aged 18 years and above only?

Currently, clinical trials that have been conducted are for volunteers aged 18 and above. Several vaccine companies will be conducting clinical trials on children. As such, the Government will consider the use of the COVID-19 vaccine in children when there is scientific data that proves its effectiveness and safety to those in this age group.

Success of COVID-19 vaccinations in the world

Countries that have initiated COVID-19 vaccinations have shown positive developments such as a decline in new COVID-19 cases in their respective countries. For example, a country that has vaccinated 600,000 of its residents has reported that the effectiveness of its vaccination has shown a 94% reduction in COVID-19 infections, in the group.

Source: Thomson Reuters



Vaccination Implementation Method

Precautionary measures

The COVID-19 vaccine is safe for the majority of people. However, some groups will need further consideration prior to receiving the vaccine:

- Individuals with severe allergies
- Women who are pregnant and lactating
- Individuals who have tested positive for COVID-19
- Individuals with immune system issues

*MOH will update the list of precautionary measures from time to time.

Vaccination Process

The vaccination implementation process under the National COVID-19 Immunisation Programme covers the enrolment process of the target groups based on the priorities of each phase right up to the vaccination and monitoring of adverse effects. The process will be carried out through the MySejahtera application and a special website or be done manually for those who do not have access to the MySejahtera application.

Vaccination Registration and Appointments

The administration of the COVID-19 vaccine is voluntary but highly encouraged in order to achieve significant coverage of the population.

Registration for the vaccine, which will start on the **1st of March 2021**, will be implemented through the following methods:



Through the
MySejahtera
application



Hotline
(soon-to-be launched)



Outreach programme for
rural and interior areas



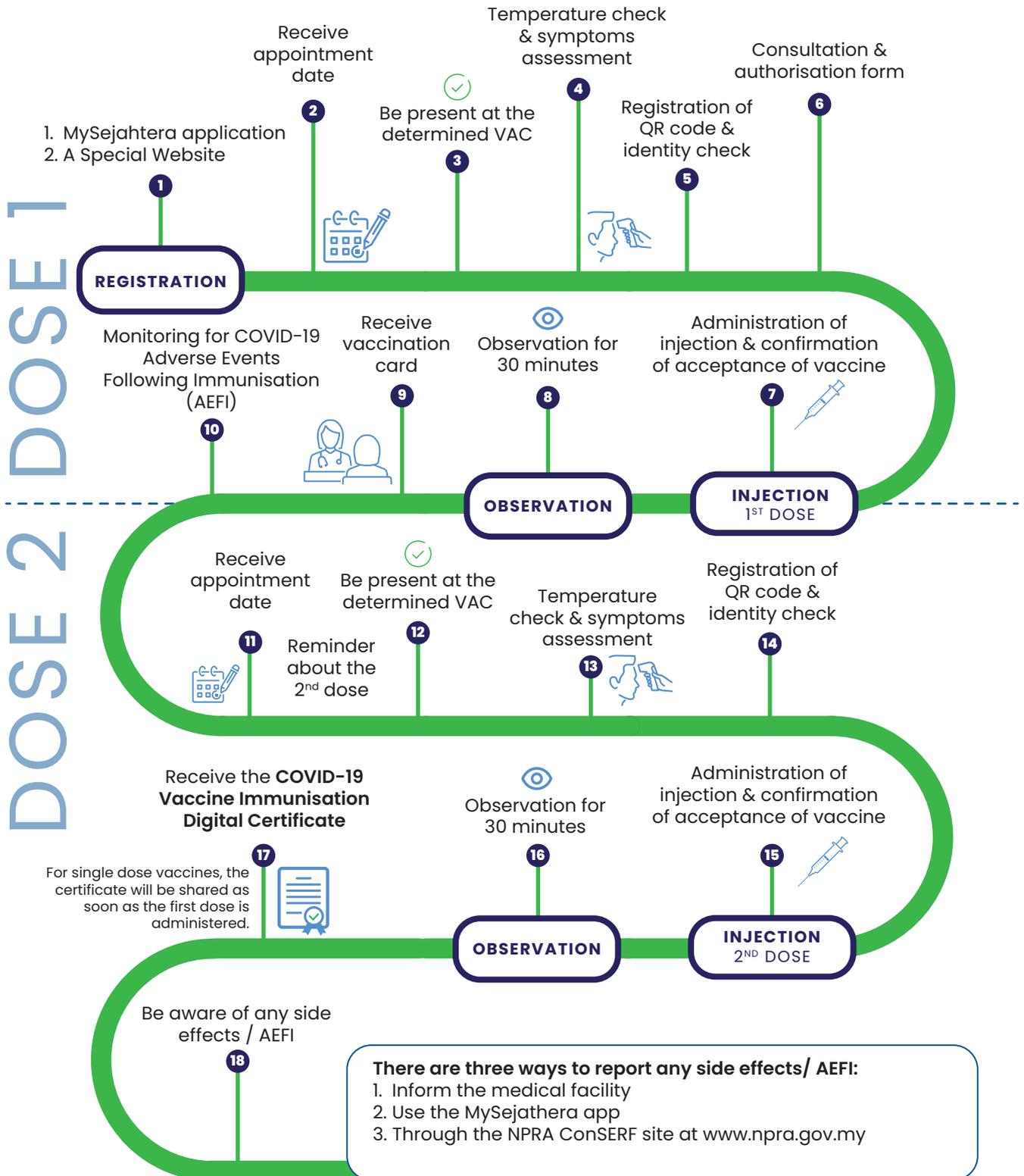
Through the website
www.vaksincovid.gov.my



Registration at public and
private health facilities

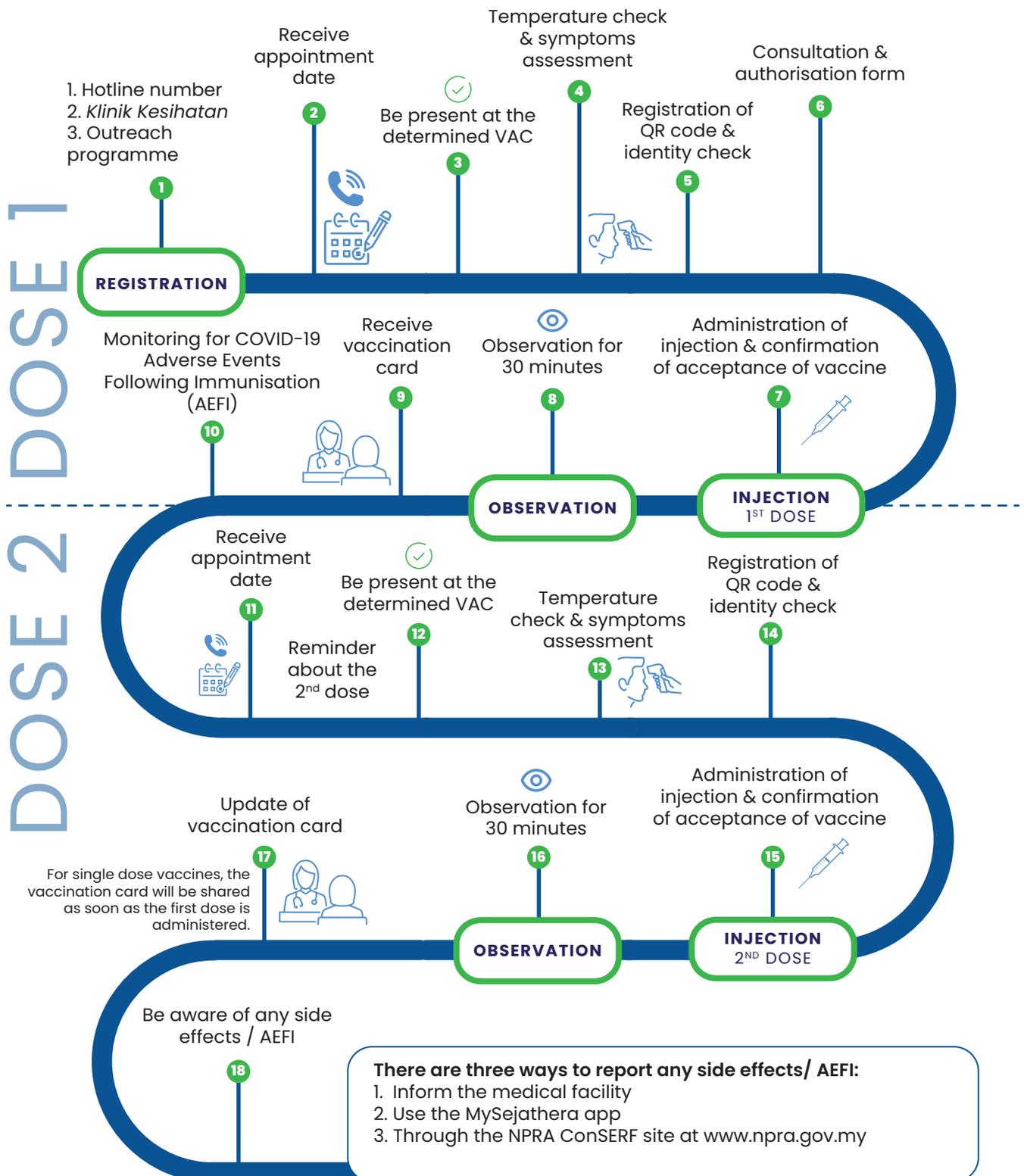
Appointment details such as dates and vaccination centre will be shared through the MySejahtera application, phone calls or SMS.

Vaccination process through the MySejahtera application & a Special Website



For single dose vaccines, the vaccination process will end at step 9
 *Subject to the type of vaccine
 Vaccines Administration Centres (VAC)

Manual vaccination process

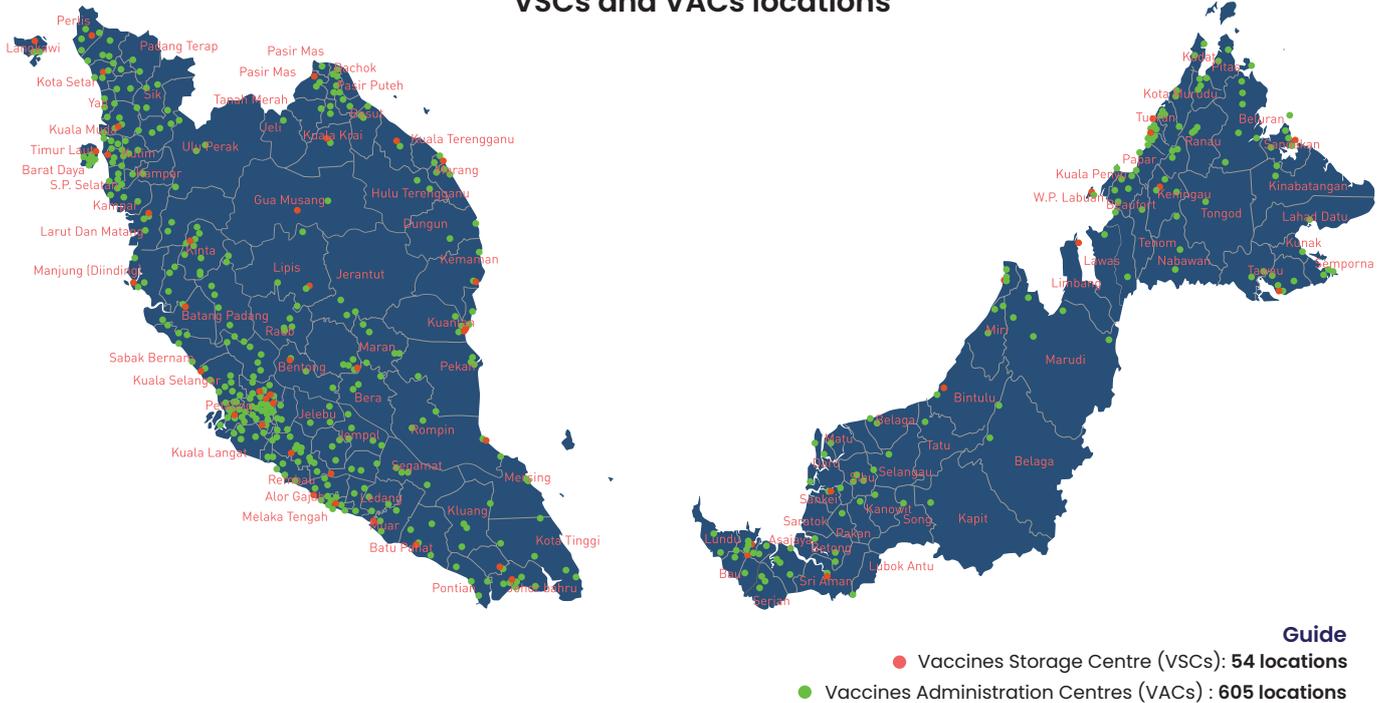


For single dose vaccines, the vaccination process will end at step 9
 *Subject to the type of vaccine
 Vaccines Administration Centres (VAC)

Location of Vaccination Centres

Vaccinations will be carried out at 605 Vaccination Administration Centres (VACs) which have been identified by MOH. Temporary vaccination centres like stadiums, convention centres, community halls, universities and other appropriate facilities will be set up according to the need.

VSCs and VACs locations



COVID-19 Immunisation Programme Integrated Platform (end-to-end)

The integrated platform includes the Pharmacy Information System (PHIS& CPS), the Vaccine Management System (VMS), the MySejahtera app and the National COVID-19 Immunisation Programme dashboard will be used to ensure efficient and accurate implementation and assist in real time monitoring.

Vaccine Logistics

Vaccine delivery and storage involves the integrated operation of multi-government agencies through MOH, the Malaysian Armed Forces (ATM) and other security authorities. MOH has successfully carried out a vaccine dry run from the Pfizer factory in Belgium to Klinik Kesihatan Belaga in rural Sarawak and Bintulu Hospital on 29-30 January 2021 as a precautionary measure before the immunisation process is carried out.

Side effects of the COVID-19 vaccine

The side effects of the COVID-19 vaccine that have been reported are mild and temporary. The most commonly reported side effects are:

- pain/swelling/redness at the injection site
- tiredness
- headache
- chills
- joint pain
- fever
- nausea
- feeling unwell
- swelling of the lymph nodes
- other side effects that may be reported from time to time

Monitoring of Side Effects & Adverse Events Following Immunisation (AEFI)

The monitoring of side effects and adverse effects following immunisation (AEFI) will be carried out through enhanced surveillance where vaccine recipients will receive a scheduled notification/ reminder through the MySejahtera application for them to report any AEFI experience. The AEFI report can also be made by health workers via the existing public healthcare system. Investigations for serious AEFI will be conducted carefully, whereby a special expert committee will be set up to assess AEFI cases and security issues related to the COVID-19 vaccines.

Whole of Government & Society Approach



The implementation of the National COVID-19 Immunisation Programme will involve the whole of society and will consist of advocacy efforts and support services throughout the vaccination process across the country.

Advocacy and Support Services

Advocacy and support services will help the community to better understand the details and information regarding the National COVID-19 Immunisation Programme. A special hotline for the COVID-19 Immunisation Programme will be set up to answer any questions related to this immunisation programme.

Information on this Immunisation Programme can also be obtained at the official website <http://vaksincovid.gov.my> as well as through the official social media accounts to ensure the latest information and developments of this programme can be easily accessed.

Leveraging on Local Authorities to reach Local Communities

- a. The role of the State Government and Local Authorities in the implementation of this Immunisation Programme is important as a liaison to the local community.
- b. Among the roles of local authorities are:
 - i. To build confidence in the local community about the safety and the effectiveness of the vaccine.
 - ii. To assist in logistic matters at Mobile Vaccination Centres according to local community requirements.

Mobilising the workforce

MOH, MOSTI, the security forces, all other ministries and Government agencies, the private sector and volunteers will work cohesively, in an integrated manner, to implement this programme.

In addition to MOH frontliners, this immunisation programme will also be assisted by many former clinicians, medical and dental students, and trainee nurses. Medical personnel in the private sector and NGOs will also be involved in the effort.

The National COVID-19 Immunisation Programme is also supported by various non-medical support members to ensure that the public get the best service at a VAC. This includes Statutory Bodies, NGOs and Support Teams such as the Malaysian Red Crescent Society and RELA as well as thousands of other non-medical volunteers whose role is to assist the public for screening and registration at a VAC.

The registration process to be a volunteer will be made available through the **<http://vaksincovid.gov.my>** website or the JKJAV social media accounts.

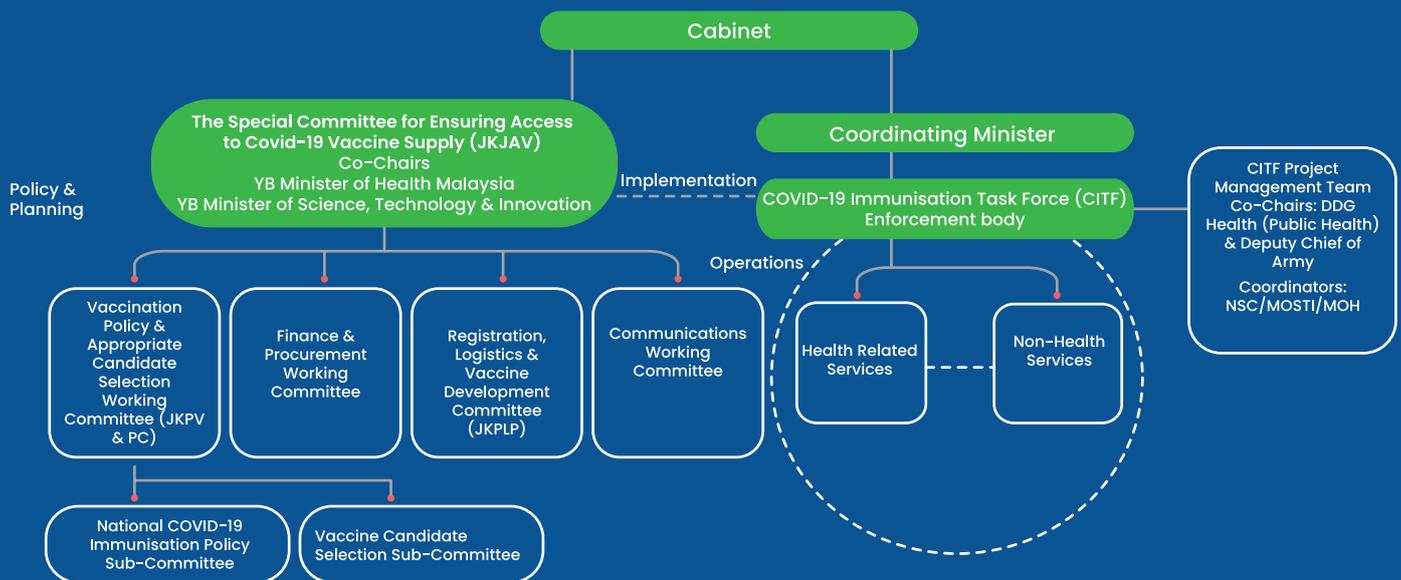


Figure 1 Governance Structure of the National COVID-19 Immunisation Programme

JKJAV Members

Ministry of Health Malaysia (MOH), Ministry of Finance Malaysia (MOF), Ministry of Science, Technology and Innovation (MOSTI), Ministry of International Trade and Industry (MITI), Ministry of Foreign Affairs (KLN), Ministry of Home Affairs (KDN), Ministry of Communications and Multimedia (KKMM), National Security Council (MKN), Attorney General's Chambers (JPN) and YAB Prime Minister's Special Advisor (Public Health).

JKPV & PC (MOH)

- National COVID-19 Immunisation Policy (JKPICK).
- Selection of vaccine candidates.

JKPLP (MOH & MOSTI)

- Selecting vaccines that fully comply with the quality, safety and efficacy requirements.
- Coordinate the logistical requirements for the supply of COVID-19 vaccines from the receipt, storage and distribution of the vaccines to the health facilities involved.
- Evaluate the developmental needs for the national stockpile of vaccines such as technology transfer, industrial development (fill & finish, cold storage etc.) and capacity development.

Finance and Procurement Committee (MOH)

- Review and ensure that the required financial allocation is provided.
- Identify procurement procedures that can be implemented.

Communications Committee (MCMC & MOSTI)

- Disseminate strategic information at a national level on the supply of COVID-19 vaccines as well as other developments from time to time.

National COVID-19 Immunisation Programme Operations Room
 Level 3, Block F1, Parcel F, Presint 1
 Federal Government Administrative Centre
 62502 Putrajaya, Wilayah Persekutuan Putrajaya
 Operation Hours: 9.00 am – 5.00 pm,
 daily (including public holidays)

CITF Health Related Services

Vaccine Logistics Management

- Transportation
- Storage
- Delivery
- Immunisation

Registration

- MySejahtera Application
- Website
- Hotline number
- Manually at Klinik Kesihatan and private medical facilities
- House visits in rural areas

Identify the categories of vaccine recipients

Post-vaccination monitoring

Vaccine Administration

Centres at MOH facilities

Human resource management

CITF Non-Health Services

Logistics management

- Utilities
- Parking
- ICT & non-ICT equipment

Documentation, records & registration

Geo-Big Data information management

Strategic communications

Vaccine Centre Administrators in public facilities

Transportation management for vaccine recipients

Human resource management

Departments & agencies

Volunteers

Uniformed Bodies

- Polis Diraja Malaysia (PDRM)
- Malaysian Armed Forces (ATM)
- Fire and Rescue Department of Malaysia (JBPM)
- Malaysia Civil Defence Force (APM)

LINDUNG DIRI, LINDUNG SEMUA.



JAWATANKUASA KHAS JAMINAN AKSES
BEKALAN VAKSIN COVID-19 (JKJAV)



JKJAV



JKJAVMY



jkjavmy



JKJAVMY

<http://vaksinovid.gov.my>
<http://covid-19.moh.gov.my>