

LOOKING BACK ON THE COVID JOURNEY



PHOTO: TAN TOCK SENG HOSPITAL

Staff from Tan Tock Seng Hospital (TTSH) and the National Centre for Infectious Diseases at the TTSH Helipad while the Republic of Singapore Air Force performed the Roar of Unity as a tribute to frontline fighters and essential workers during the National Day Parade on Aug 9, 2020.

THE COVID-19 pandemic took a toll on everyone – daily routines were disrupted, jobs were displaced, and lives were lost. Never before has the world witnessed such a cataclysmic outbreak that forever changed how people live.

In Singapore, the situation was constantly changing along with the mutating virus, challenging the healthcare system to almost breaking point. If the public were feeling anxious and worried, the healthcare and medical fraternity were even more frazzled and distressed.

They confronted the same unknowns and uncertainties that everyone else was grappling with, harbouring the same fears for their own health and that of their loved ones. But they had to steady their nerves and hold the fort, as they shouldered the responsibility of caring for a country with hundreds of thousands infected with COVID-19. They were at the frontlines battling the virus, while also nursing the rest of the nation back to health.

As Singapore closed the chapter on the pandemic, members of the healthcare community reflected on the arduous journey that the Ministry of Health (MOH) and its partners have taken from January 2020 to May 2023. Many lacked sleep, some were burnt out, and others struggled with anxiety and stress. But somehow everyone pulled through and managed to cope, including the healthcare community – and not just survived, but overcame the crisis of a generation.

TOGETHER WE STAND



PHOTO: NATIONAL HEALTHCARE GROUP

Having all hands on deck across agencies was key to getting Singapore through even the toughest patches during the pandemic, such as the dormitory outbreaks.

MS Lim Siok Peng, Director of Corporate Communications at MOH, recalls meetings

where multiple viewpoints from various ministries and agencies were heard, and suggestions tabled. With everyone low on sleep and high on stress, the discussions sometimes got heated.

But even in the difficult moments, the team remained united, knitted together by a shared sense of purpose to help Singapore get through the pandemic. This was WOG in action.

WOG refers to a whole-of-government approach, with seamless inter-agency coordination and planning during an emergency. It was first developed after the Laju ferry hijacking incident in 1974 and continually refined over the years.

This approach provides government agencies with a model to resolve a crisis together.

It proved its prowess during the pandemic. Singapore was able to quickly mobilise the different facets of its public healthcare system to respond to the COVID-19 crisis. There was the Multi-Ministry Taskforce (MTF) that took the helm, with its co-chairs – one of them the Minister for Health – signing off on plans and communicating key decisions to the public.

Next was the high-level Homefront Crisis Executive Group (HCEG), with senior representatives from across all ministries coordinating inter-agency cooperation. The MTF and HCEG, together with MOH which refined policies and plans

as the pandemic unfolded, rolled out many plans and programmes.

On the ground, polymerase chain reaction (PCR) testing within hospitals was sped up, the genome code of the COVID-19 pathogen studied, contact tracing efforts for infected persons intensified, and quarantine facilities built up.

“You come together and you may not always agree, because every agency has its own stakeholders and agenda. But if the broader objective aligns – in this case, to keep people safe – you have to trust that other people are also working towards the same goal as you,” shared Ms Lim.

“The WOG approach is about relationships – the understanding that you are fighting a common enemy, that you are in this together.”

WHEN OVERREACTING IS ASTUTE

PHOTO: MINISTRY OF COMMUNICATIONS AND INFORMATION



The Multi-Ministry Taskforce held frequent press conferences to update the public on developments in the COVID-19 situation.

WHEN Professor Kenneth Mak, Director of Medical Services at MOH, first heard of an outbreak of atypical pneumonia spread from animals to humans in Wuhan, China in December 2019, the information was incomplete but alarming.

“It made us concerned that perhaps this outbreak was not like other outbreaks before, and could be something more significant,” said Prof Mak, who was just two weeks into his new role as Director of Medical Services Designate at MOH.

His colleague, Permanent Secretary for Health Development Mr Ng How Yue, had the same fears. “The new disease had all the preconditions of turning into a pandemic,” he shared. Its infection rate was high, and likewise, the death rate.

Even amid the uncertainty, MOH knew it had to act fast – to overreact rather than underreact. This position of not underestimating the enemy would preempt the virus’ arrival to Singapore, triggering early preparatory efforts to ring fence suspected cases and prevent community spread.

It was similar to the containment and elimination strategy adopted in 2003, when Singapore battled the Severe Acute Respiratory Syndrome (SARS).

In a meeting on January 2, 2020 that Prof Mak chaired, a decision was made to ramp up surveillance. Temperature screening stations were to be set up at Changi Airport to screen travellers from Wuhan, China. Doctors across the island were asked to watch out for patients

who had been to China, and presented symptoms of pneumonia.

As information gradually emerged about the disease, surveillance and control measures continued to be stepped up. On January 20, 2020, travellers who had been to China in the last 14 days, and who had fallen ill, were isolated.

Two days later, the MTF was formed, and following that, the HCEG. Such swift preparations preceded the first imported case of COVID-19 on Singapore’s shores on January 23, 2020.

As the days unfolded, it was clear the government had not overreacted – COVID-19 was unprecedented in the speed and scale of its spread.

DON'T FIGHT A NEW WAR WITH AN OLD PLAYBOOK

PHOTO: THE STRAITS TIMES © SPH MEDIA LIMITED



A man getting a swab test done at the Bukit Gombak Sports Hall on Jun 9, 2020, when mass testing and containment were still Singapore’s main strategy.

MUCH of Singapore’s initial response to COVID-19 was shaped by its fight against SARS in 2003.

The focus was on isolation to contain the virus and prevent community spread.

It was partly also because “we didn’t know any better”, said Permanent Secretary for Health Mr Chan Yeng Kit. “When COVID-19 first started, we had a lot of assumptions that we made from SARS – symptoms, temperature taking, incubation period. The SARS playbook had worked for the Middle East Respiratory Syndrome and H1N1,” he noted.

“But there’s also this line about how generals are always fighting the last war,” he added, referring to how people tend to prepare for old challenges rather than new ones. “But without the SARS playbook, we

would have been fumbling around. As we knew better, we adjusted.”

By March 2020, COVID-19 clusters had formed across migrant workers’ dormitories. As the healthcare workforce bore the onslaught of increasing cases, Singapore needed a new strategy to prevent a systemic collapse.

COVID-19 was clearly not like SARS, and containment was no longer sufficient. The key was to drive down Rt, or the effective reproduction number, to break the chains of transmission. The value represents the average number of people that a single infected person is expected to transmit the disease to at a particular point in time. Rt could be lowered with actions such as isolation and vaccination.

On April 7, 2020, the country entered

the circuit breaker – a decision that came at a great cost to the economy, yet necessary to break the chains of infection and save lives. The circuit breaker ended on June 1.

“We go into a crisis in good faith, fighting it to the best of our ability, based on our understanding of what is there. But we need to be nimble and agile,” said Mr Chan. “We must always remind ourselves that what worked in the last pandemic may or may not work for the next one.”

Every crisis is different, and requires fresh strategies. The key lies in planning ahead and knowing when to change tactics.

TAILORING RULES TO A FAST-CHANGING SITUATION



People order takeaway at a food center in the Ang Mo Kio area of Singapore on May 16, 2021.

PHOTO: BLOOMBERG VIA GETTY IMAGES/WET LENG TAY

AS Singapore sought to make sense of COVID-19, authorities had to quickly identify pressing threats, trial solutions based on assumptions derived from data it had at that time, and tweak the approaches as they went along. In short, risks had to be taken.

Following the end of the circuit breaker on June 1, 2020, Singapore took a gradual approach to reopening. Dining in, which was prohibited during the circuit breaker, was allowed with up to five people per table.

This rule remained till December 2020, when the government allowed up

to eight people per table as COVID-19 cases declined.

But rules quickly changed in May 2021. When the Delta strain brought on a new wave of cases and more clusters grew, the eight-person rule was reduced to five, and subsequently, down to two. By July that year, dine-in was banned again.

The swing between easing and tightening rules prompted several to question the rationale of the government's responses and its understanding of the situation. But this was how Singapore executed the hammer and dance strategy – enforcing strict measures to control the

virus while accelerating vaccination rollout, then gradually entering a refreshed phase where life could resume, guided by specific measures.

“In our minds, we felt that if we were going to relax our COVID-19 rules, it had to be paced, it had to be gradual,” said Prof Mak. “We needed the public to understand that they had to do their bit as well, because the responsibility for protecting each and every one of us cannot be held only by the government.”

“That sort of big-bang reopening that took place in some other countries, we always knew that that was not for us.”

SHORE UP SUPPLY LINES



Stockpiling resources like masks and other medical equipment was crucial to ensuring that Singapore would be prepared not just for a single drawn-out battle against COVID-19, but also for possible future pandemics.

IT is often said that battles are fought not so much at the frontlines, but at the supply lines. In every war, the critical factor determining how a fight turns out is often logistics.

The supplies needed by healthcare workers fighting this long-drawn COVID-19 battle included necessities like fresh medical gloves, medical gowns, surgical masks, goggles and hair nets. For patients receiving treatment, they need fresh syringes, testing kits, hospital beds, ventilators and isolation spaces.

With the healthcare infrastructure already strained under the cumulative

toll of every previous COVID-19 surge, a shortage in any single item would disrupt the entire chain of operations and services. Waiting times at hospitals would surge, tests for patients delayed.

This was not a table-top drill for worst-case scenario planning. This exact script played out time and again in real-time in countries around the world, as new COVID-19 variants drove surges.

Throughout the COVID-19 fight, MOH had ensured a stockpile of resources and helped in setting up community treatment facilities and isolation facilities to alleviate the load on hospitals.

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HAVING THE COURAGE TO CHANGE

AFTER months of chasing a zero-COVID strategy, the MTF eventually began making preparations for the country to accept COVID-19 as endemic.

It was simply not sustainable for the country's borders and economy to swing repeatedly between closing and reopening. And it had also become clearer, as time passed, that wiping out COVID-19 completely from the country, even with vaccination, was mission impossible.

"If vaccination alone is not enough to get rid of the virus, then we need a strategy to live with it," noted Mr Chan.

The road to recovery was not eradicating the virus, but learning to live with it. But two key factors had to be in place to pivot successfully.

First, and the most crucial, the population had to be vaccinated. While getting vaccinated did not mean immunity to COVID-19, the jabs significantly reduced the severity of symptoms.

Second, systems had to be put in place

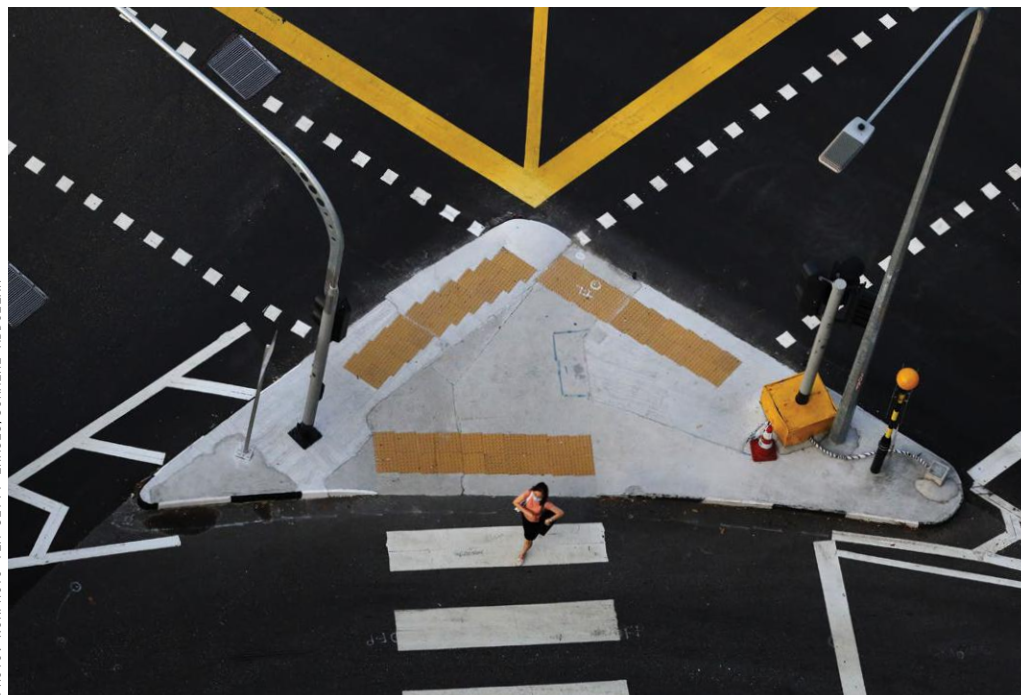


PHOTO: NURPHOTO VIA GETTY IMAGES/SUHAIMI ABDULLAH

Singapore had to adapt to living with COVID-19 and stay responsive to change.

to allow people with COVID-19 to isolate and recover at home, to free up hospital resources for severe cases, and to resume treatment of patients that had been delayed because of the pandemic. The protocols for home recovery, named simply as Protocols 1-2-3, were part of the answer.

For Prof Mak, the critical point is knowing how to embrace change. "We must be honest with ourselves, be mindful that we won't always get it right, but yet have the gumption and willingness to pivot, to change, and do the right thing subsequently," he said.

With COVID-19 evolving, leaders also had to be prepared to respond and move quickly, said Mr Gan Kim Yong, Minister for Health until May 2021, and co-chair of the MTF.

"These are things you must be prepared to do in a pandemic: be nimble, be prepared to change and respond quickly, and to also acknowledge the times when you have made a mistake and do something else," he said.

Associate Professor Dan Yock Young, Deputy Director of Medical Services (Health Services Group) at MOH, said the pandemic "opened our eyes to the fact that every time we planned something, things wouldn't go according to plan, but that is fine".

"In the initial days, some people asked 'Why do you keep flipping your directives?' But COVID-19 is a new disease. If you are not nimble enough to adapt, flip and move on the fly, you are doomed to failure," he said.

BUILDING TRUST WITH TRANSPARENCY

IN times of crisis, especially on a global scale, it is futile to hide the bad news. With the proliferation of social media sites and online news platforms, nothing can be kept under wraps – for long.

What was more important was to ensure that people had access to the right information backed by science and facts.

"We tried, from Day One, to be as open and transparent as possible," said Mr Chan. "We tried to push out as much information as we could, and maintain public trust.

Whatever information we have, we try to share and show Singaporeans that we have your back, we are doing what we can to keep you safe."

Presented with science-backed data, Singaporeans would then be better able to protect themselves and guard against the virus.

It was why the first tranche of press releases issued by MOH in the initial period contained specific details about positive cases – where these people had



PHOTO: NURPHOTO VIA GETTY IMAGES/FOO CHUAN WEI

Safe distancing measures were clearly communicated to the public, alongside other policies, to avoid confusion and build trust and transparency.

been to, whom they had met, and the activities they had taken part in.

The MOH website was also revamped to push out COVID-19 related news upfront, including updated statistics of cases, and information about the many measures Singapore was adopting to keep people safe.

"COVID-19 was not just a Singapore phenomenon, you have reports in the international media too. Rather than letting people hear about COVID-19 from somewhere else, it is better for the government to come out and say something," said Ms Lim, MOH's Corporate Communications Director.

Under her watch, a team of clinicians, scientists and infectious diseases experts took turns to give media interviews to help people make sense of the complex new disease. Over time, these experts built up

the public's knowledge of the virus, while becoming familiar and trusted faces of scientific authority.

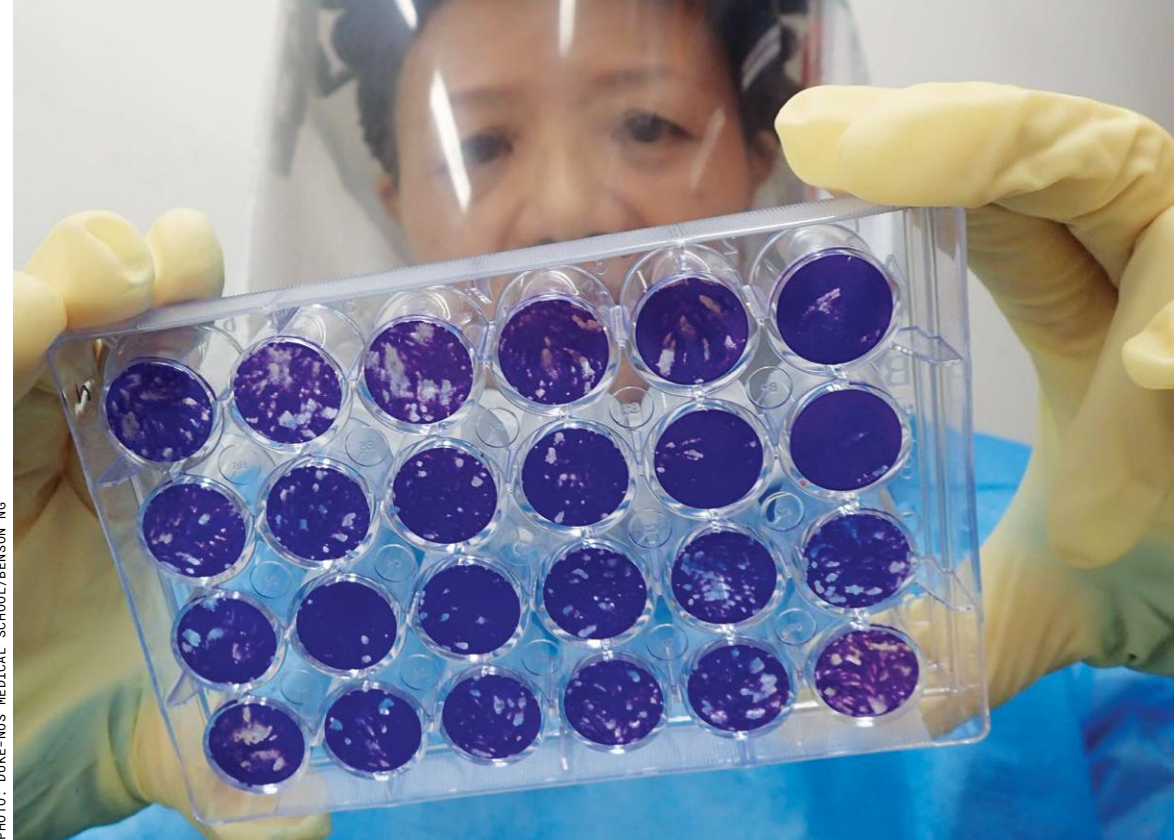
The communications team at MOH also began to issue daily, and even twice-daily, press releases to provide timely and detailed updates. Within the Ministry, there were jokes that Ms Lim held the record for being the communications director to issue the most number of press releases in the last 50 years.

"The trust we have built over the years is precious. You have to maintain it. And you do so by being upfront and presenting the facts as they are," said Ms Lim.

Added Prof Mak: "People trusted the government, and trusted that the taskforce would do the right thing for them. But we were not under any pretense that we could depend on this ad infinitum. We needed to have a clear and consistent plan."

SAYING NO TO COMPLACENCY

PHOTO: DUKE-NUS MEDICAL SCHOOL/BENSON NG



A researcher analysing the result of a plaque assay, used to measure infectious virus particles.

BY the end of February 2023, life had generally returned to normal for most countries, and for Singapore.

The MTF announced earlier in the month that Singapore would lower its Disease Outbreak Response System Condition (DORSCON) from yellow to green – the lowest alert status in the framework – indicating that COVID-19 was now a mild disease posing minimal disruptions to daily life. Masking-up was no longer mandatory on public transport. The MTF would also stand down, and the Protocols 1-2-3 phased out.

The announcement marked a milestone in Singapore’s living-with-COVID journey. It was easy to think that COVID-19 was over, but doing so would

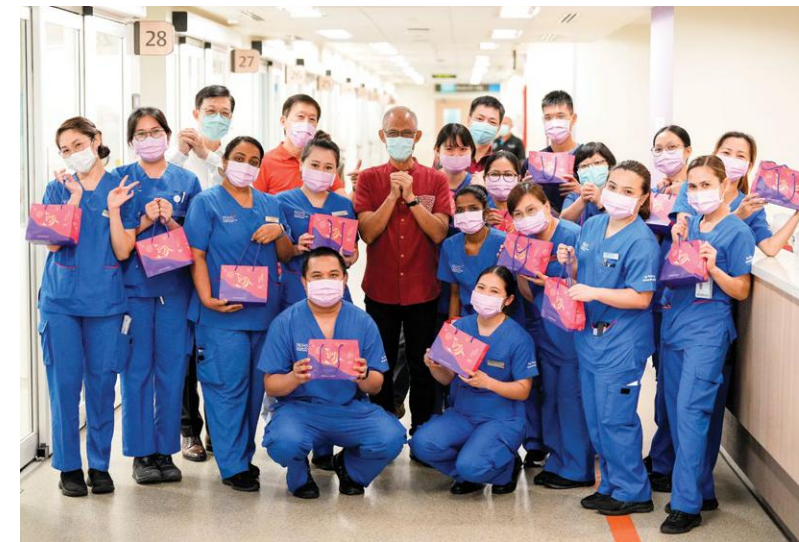
mean falling into the trap of complacency, and risk forgetting the lessons learnt over the last three years.

The COVID-19 experience has put Singapore in a better place to deal with the next crisis. The country has emerged from the pandemic more prepared and resilient, and with its people more united. Now is the time for reflection – to review the experience of the last three years, to take stock of gains and losses, to learn and to look ahead.

In a Facebook post on February 9, 2023, Minister for Health Ong Ye Kung wrote: “We are at ease now, but always stand ready. *Senang diri* (drill command in Malay for stand at ease), but not *keluar baris* (drill command in Malay meaning to fall out).”

Personal and social responsibility remain critical, as vaccinations continue to be Singapore’s first line of defence; and people should be aware that some COVID-19 measures such as mandatory mask-wearing may have to be reinstated when the situation calls for it. MOH will also keep its eye on the global COVID-19 situation, paying attention to new variants. Singapore will continue to build up its defence to the disease, both physically and psychologically.

COVID-19 will not be the last pandemic known to mankind. Preparations for the next pandemic, or what the World Health Organization has named Disease X, have already begun – and the world remains vigilant. Singapore too.



PHOTOS: NATIONAL UNIVERSITY HEALTH SYSTEM, NATIONAL HEALTHCARE GROUP, SINGAPORE HEALTH SERVICES



**“ WE WRITE THE STORY TO RECORD
SUFFERING AND SACRIFICE, BUT ALSO THE
STRENGTHS AND REMARKABLE COMMITMENT
ON THE PART OF SO MANY TO SUCCESSFULLY
OVERCOME THE CRISIS.**

**WE WRITE IT TO REMEMBER BUT ALSO TO LEARN.
IF WE DO, THEN IN THE NEXT CHAPTER,
OUR HOSPITALS AND HEALTHCARE SYSTEMS
WILL BE BETTER, OUR LAWS MORE COMPLETE,
OUR VACCINES AND MEDICAL SUPPLIES MORE SECURE.**

**AND SO, WE WRITE OUR NEXT CHAPTER,
NOT KNOWING WHETHER THE WORLD WILL DAWN
BRIGHT OR DARK, HOSTILE OR FRIENDLY, BUT
CONFIDENT IN OURSELVES THAT SINGAPORE HAS
BECOME STRONGER THROUGH THIS CRISIS, AND
CAN STAND TALLER TO MEET THE NEXT ONE.”**

— MR ONG YE KUNG, MINISTER FOR HEALTH
PARLIAMENTARY DEBATE ON SINGAPORE’S RESPONSE TO COVID-19
MARCH 21, 2023

EPILOGUE

It is hard to quantify the impact of the pandemic. Officially, Singapore recorded 1,711 deaths as of December 2022 due to COVID-19 infections. But the Ministry of Health estimates that another 2,000 deaths were due to undiagnosed infections, or complications arising from COVID-19 infections.

Beyond the death toll, there were other losses: children who missed out on in-person interactions with their peers and teachers in schools; businesses that shuttered; employees who were furloughed. Across the board, mental health took a major dip.

But amid the losses, there were gains too. There is greater resilience and resolve to do better the next round – because there will be a next round. The preparation work has already begun.

It started with a national programme in November 2022 to support and strengthen Singapore’s key research capabilities to detect and contain future infectious disease outbreaks. Called the Programme for Research in Epidemic Preparedness and Response, or PREPARE, it is led by Professors Wang Linfa from the Duke-NUS Medical School and David Lye from the National Centre for Infectious Diseases (NCID).

Through PREPARE, Singapore will be

able to tap on pandemic researchers around the world to expand on the knowledge on emerging pathogens.

Other initiatives are also starting. More facilities to ease the load on the public hospitals will be built, with these Transitional Care Facilities receiving medically stable patients who are waiting for care arrangements such as nursing home care.

The Crisis Strategy and Operations Group which was established during the pandemic and undertook much of the pandemic-related operations such as contact tracing, quarantine, testing, vaccinations and home recovery, is now a permanent feature in MOH. A new Communicable Diseases Agency to oversee disease preparedness, prevention, control, surveillance, risk assessment and outbreak response has also been established.

But the most important shift is the introduction of Healthier SG, a substantial long-term reform of Singapore’s healthcare landscape that focuses on preventive care. This was helped by the close partnerships forged between private and public healthcare providers during the pandemic, and the increasing awareness of the importance of preventive healthcare.

The Healthier SG strategy was “born out of crisis and will profoundly change the landscape for healthcare in Singapore,” Minister for Health Mr Ong Ye Kung said in a parliamentary debate on Singapore’s response to COVID-19 on March 21, 2023.

This strategy seeks to improve the health of the population by urging Singaporeans to take charge of their health. Residents enrolled into the programme will have a regular doctor who will work with them on a personalised health plan to help them stay on track in meeting their health goals. They can also access a wide range of community programmes to stay active, socially connected and physically fit and healthy.

As people become more diligent about staying healthy, and ailments are identified and managed early, the overall strength and resilience of the country’s healthcare system will improve.

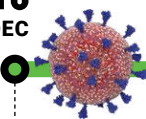
It has been said that what does not kill you will only make you stronger. Singapore has survived the pandemic to live and fight another day, with battle scars reminding us what not to do in future. There is hope that the city-state has not only emerged healthier and stronger after the pandemic, but also more prepared to meet new crises and challenges ahead.

3 YEARS OF PANDEMIC

SINGAPORE'S COVID-19 TIMELINE

2019

DEC



DEC 19
Local health authorities in Wuhan, China detect cases of an unknown, severe pneumonia in hospitals.

2020

JAN

21 JAN 20
Singapore raises its Disease Outbreak Response System Condition (DORSCON) from green to yellow.

11 JAN 20
Chinese scientists publish the genome sequence of the virus on an open-access site, allowing the National Centre for Infectious Diseases' (NCID) National Public Health Laboratory (NPHL) to develop a polymerase chain reaction (PCR) test to detect the new coronavirus.

22 JAN 20
The Multi-Ministry Taskforce (MTF) is set up and chaired by then-Minister for Health, Mr Gan Kim Yong.

FEB

4 FEB 20
MOH announces the first transmission, four women with no travel history to Wuhan.

The MTF says that all households in Singapore will receive four surgical masks each.

30 JAN 20
The World Health Organization declares the pandemic a "Public Health Emergency of International Concern".

28 JAN 20
MOH's first contact tracing centre, with about 40 to 50 contact tracers, begins operations.

23 JAN 20
Singapore diagnoses its first COVID-19 case, a 66-year-old tourist from China.

17 FEB 20
Stay-home notice (SHN) is introduced. MOH reactivates its network of more than 900 general practitioner (GP) clinics to provide subsidised treatment, investigations and medications for patients with respiratory symptoms.

11 FEB 20
WHO names the virus SARS-CoV-2 (Severe Acute Respiratory Syndrome Coronavirus 2).

9 FEB 20
The second evacuation flight out of Wuhan lands at Changi Airport. More flights are chartered in the following weeks to evacuate Singaporeans from other countries, including the United States and parts of Europe.

7 FEB 20
Mr Gan announces at a press conference that the DORSCON level will be raised from yellow to orange, spurring panic buying at supermarkets.



MAR

11 MAR 20
WHO officially declares COVID-19 a pandemic.

21 MAR 20
Singapore reports its first two deaths, both being patients at NCID.



31 MAR 20
Lee Ah Mooi Old Age Home becomes the first nursing home to have confirmed COVID-19 cases.

Bars and entertainment outlets are ordered to close. Religious services are suspended. F&B outlets must limit dine-in group sizes to 10.

26 MAR 20
Stricter measures to limit group sizes to 10 are introduced.

30 MAR 20
Four confirmed cases have emerged at S11 Dormitory @ Punggol, forming the first dormitory cluster.

3 APR 20
Prime Minister Lee Hsien Loong appears on national television to announce that a one-month "circuit breaker" will be imposed.

The Joint Task Force (Assurance) is formed to manage the dorm outbreaks.

5 APR 20
Two migrant worker dormitories are gazetted as isolation areas.

7 APR 20
Circuit breaker measures officially kick in.

Most workplace premises are closed, home-based learning is introduced for students and all social gatherings are banned.

13 APR 20
The Therapeutics and Vaccines Expert Panel (TxVax) is set up to source for and assess promising vaccines to procure for Singapore.



2020
APR



14 APR 20
A mask mandate is implemented to curb the spread of the virus, with the exception of those doing strenuous exercise and children under two. Previously, masks were only mandatory for healthcare and frontline workers.

21 APR 20
PM Lee announces that the circuit breaker will be extended for another four weeks to 1 June.

Further closure of workplaces are implemented, including service providers like hairdressers, confectionery and beverage outlets.

28 APR 20
Swab isolation facilities comprising over 4,000 beds have been set up to house patients awaiting the results of their swab test, easing the strain on medical facilities.

19 MAY 20
The MTF confirms that the circuit breaker will end on 1 June, and that Singapore will gradually reopen in three phases. Phase 1 will begin on 2 June.

20 APR 20
Singapore reports 1,397 new cases in the dorms.

12 MAY 20
SafeEntry is made mandatory for all operating businesses.

MOH also makes the decision to test all migrant workers through a combination of PCR and serological tests to weed the virus out of the dorms, regardless of whether they are symptomatic. More than 3,000 migrant workers are tested daily over the next two months.



JUN



2 JUN 20
The circuit breaker is lifted, and Phase 1 begins.

Households can receive two visitors per day, who must be children or grandchildren from the same household.

Work from home remains the default. Dining in is still disallowed.

JUL



19 JUN 20
Phase 2 begins. People are allowed to gather in groups of five, malls can reopen and dining in is permitted again.

1 JUL 20
All individuals aged 13 and above are required to be tested for COVID-19 if they display signs of respiratory infection.

AUG



19 AUG 20
The Ministry of Manpower declares all dormitories cleared of COVID-19, including the standalone blocks in purpose-built dormitories serving as isolation or quarantine facilities.

22 AUG 20
The Joint Task Force (Assurance) stands down from dormitory operations.

SEP

17 SEP 20
The number of daily cases fall to 18, the lowest figure recorded since March 2020.

OCT

30 SEP 20
In September 2020, Singapore conducts an average of 27,200 PCR tests a day.

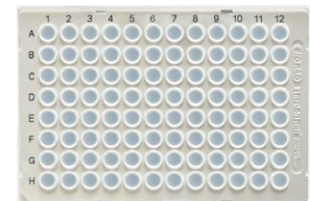


PHOTO: NATIONAL LIBRARY BOARD, SINGAPORE, COVID-19 COLLECTION/ NURULHUDA SALIM

5 OCT 20
The Expert Committee on COVID-19 Vaccination (EC19V) is formed to advise the government on how to best deploy vaccines safely across the population.

NOV

13 OCT 20
Singapore sees zero local cases for the first time since March.

2020
DEC

14 DEC 20
PM Lee announces that Singapore is ready for Phase 3 of its reopening, which will begin on 28 December. He also promises that Singapore will have enough vaccines for everyone by the third quarter of 2021.

21 DEC 20
The first batch of Pfizer-BioNTech vaccines arrives at Changi Airport.

28 DEC 20
Singapore enters Phase 3. Group sizes are increased from five to eight, the capacity of premises and worship services are increased and large-scale live performances can now be piloted.

30 DEC 20
Then-senior staff nurse at NCID's Clinic J, Ms Sarah Lim, becomes the first person in Singapore to be vaccinated.

2021
JAN

8 JAN 21
PM Lee becomes the first member of Singapore's Cabinet to take the Pfizer-BioNTech vaccine, along with Prof Mak.

17 FEB 21
The first batch of Moderna vaccines arrive.

FEB

16 MAR 21
24 vaccination centres are in operation.

MAR

28 APR 21
Senior staff nurse Ms Jennilyn Angeles tests positive for COVID-19, becoming the first case of Singapore's first hospital cluster at Tan Tock Seng Hospital (TTSH).

APR

16 MAY 21
Singapore reverts to tightened restrictions under Phase 2 (Heightened Alert). People are only allowed to gather in groups of two, dining in is ceased and work from home becomes the default once more.

MAY

5 MAY 21
A cleaner at Changi Airport 3 tests positive for COVID-19, and the Changi cluster grows to 26 cases in a week.

17 MAY 21
TraceTogether is made mandatory for checking into malls and schools.

JUN

6 JUN 21
The TTSH cluster is officially closed, with no new cases linked to it after 28 days.

21 JUN 21
Dining-in resumes in groups of two.

24 JUN 21
The three MTF co-chairs publish an op-ed piece in The Straits Times titled, "Living normally, with COVID-19", on how Singapore is drawing a road map to transit to this new normal.

JUL

11 JUN 21
Singaporeans between the ages of 12 to 39 can now book vaccination appointments.

14 JUN 21
Singapore moves back to Phase 3 (Heightened Alert), where groups of five are allowed to gather. Dining in is not yet allowed.

12 JUL 21
A new Delta cluster at KTV lounges is announced by MOH.

16 JUL 21
Another cluster at Jurong Fishery Port forms. It is discovered to be linked to the KTV cluster, and quickly becomes the largest active cluster, with 1,155 cases linked to it at its peak.

22 JUL 21
Singapore returns to Phase 2 (Heightened Alert) due to the growing number of cases.

8 AUG 21
National vaccination rate hits 70%. Fully-vaccinated individuals can now dine out in groups of five.

AUG

30 AUG 21
The pilot for the Home Recovery Programme (HRP) begins.

15 SEP 21
HRP becomes the default care model for fully vaccinated COVID-19 patients aged 12 to 50. Protocols 1-2-3 come into effect.

17 SEP 21
Health Minister Mr Ong cautions in a press conference that with the Delta wave, Singapore's daily cases could hit 1,000 soon, as numbers doubled every week.

18 SEP 21
1,009 new cases are reported.

HRP is further expanded to fully vaccinated patients aged 51 to 69.

SEP

2021

2022

27 SEP 21
Singapore enters the Stabilisation Phase to slow the rate of transmission due to the deadly Delta variant.

Social gatherings are restricted to two and work-from-home becomes the default again.

24 SEP 21
Health Minister Mr Ong announces plans to prepare for 5,000 new daily cases, following consecutive days of record-high new cases of 1,457 and 1,504.

9 OCT 21
PM Lee explains the shift from zero-COVID to endemic living in a nationwide address, citing HRP as central to Singapore's "path forward to a new normal."

11 OCT 21
Streamlined protocols for HRP are introduced amid complaints of public confusion.



27 OCT 21
Singapore's daily new cases top 5,000 for the first time, with 10 dying from virus complications, bringing the total death toll to 349.

A total of 20,895 patients, or 74.3 per cent of COVID-19 community cases, are in home recovery.

31 OCT 21
Singapore has set up a total of nine COVID-19 Treatment Facilities (CTFs) with a combined capacity of 3,700 beds by end-October. Community Care Facilities (CCFs) also hit a combined capacity of 4,300 beds.



29 MAR 22
Mask-wearing is now optional in outdoor settings, though it remains the default in indoor settings.

Homes can now have up to 10 visitors at any one time, up from five.



Live performances and busking are allowed to resume too.

1 APR 22
Fully vaccinated travellers are allowed quarantine-free entry into Singapore under the Vaccinated Travel Framework, without having to complete any COVID-19 tests.



4 APR 22
MOH resumes in-person visits to all hospital wards and residential care homes.

22 APR 22
Singapore announces that it will adjust its Disease Outbreak Response System Condition (DORSCON) from orange to yellow.

MOH also removes the group size limit for mask-off activities, as well as the cap on number of visitors to a household. All workers are now allowed to return to their workplaces, and safe distancing is no longer needed between individuals and groups.

15 MAY 22
MOH detects two local COVID-19 cases infected with the BA.4 variant, and one case infected with the BA.5 variant.

21 JUN 22
MOH reports a rise in COVID-19 community infections owing to the Omicron subvariants BA.4 and BA.5.

29 AUG 22
Mask-wearing is no longer required in indoor settings, except on public transport, healthcare facilities and residential care homes.



25 OCT 22
Singapore starts offering COVID-19 vaccinations for children aged between six months and four years.



10 OCT 22
All vaccination-differentiated measures are fully lifted. Individuals who are not vaccinated no longer face restrictions when dining in, entering nightlife establishments and participating in large-scale events.

21 SEP 22
MOH releases its Healthier SG white paper, a healthcare reform plan that emphasises preventive care instead of curative care in response to Singapore's ageing population.

14 OCT 22
Singapore begins offering the bivalent vaccine, which offers protection against the original wildtype virus as well as the newer subvariants.

The Omicron XBB is now the predominant subvariant circulating in the community.

2023

FEB

13 FEB 23

Singapore exits the acute phase of the pandemic and lowers DORSCON to green from yellow.

Masks are no longer mandatory on public transport. Protocols 1-2-3, as well as the MTF, are stood down.

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