



MINISTRY OF HEALTH WELLNESS AND THE ENVIRONMENT

Surveillance for COVID-19 at Airports and Seaports in Antigua and Barbuda

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Overview

The current outbreak of coronavirus disease (COVID-19) disease has spread across several borders, which has prompted demands for the detection and management of suspected cases at points of entry (POE), including ports, airports and ground crossings. This document aims to provide advice on detecting and managing ill travellers with suspected COVID-19 infection who arrive at the V.C Bird International Airport and at seaports.

The management of ill travellers at the V.C. Bird International Airport or seaports in Antigua and Barbuda in the context of the current COVID-19 disease outbreak will include the following measures:

1. detection of ill travellers;
2. interview of ill travellers to determine the possibility of symptoms of and exposure to the virus responsible for COVID-19 disease;
3. reporting cases with suspected COVID-19 infection;
4. isolation, initial case management and referral of those with suspected COVID-19 infection.

The MOHWE will update these recommendations as new information becomes available.

Detecting ill travellers at the V.C. Bird International Airport and Seaports

The area designated for port health at the V.C. Bird International Airport or seaport will be operationalized with staff, equipment and supplies for surveillance for COVID-19 and other port health activities. An appropriate number of trained personnel will be assigned to these duties, depending on the volume of travellers and the complexity of public health situation.

Staff will be trained to protect themselves by maintaining more than 2m between themselves and travellers at all times, which is also known as physical/social distancing. Staff will be instructed to encourage travellers to maintain more than 1m distance between themselves while waiting to cross the POE, including when completing entry forms.

The MOHWE will have at least one healthcare worker on site who is designated to support staff in case they encounter ill travellers or cases of suspected COVID-19 disease that require urgent clinical care. These healthcare workers will have a supply of the recommended personal protective equipment (PPE) (that is, to allow them to use contact and droplet precautions, including goggles or other eye protection) and follow the guidance in Infection prevention and control during health care when coronavirus disease (COVID-19) infection is suspected in case there is an urgent or emergent need to provide direct care for an ill traveller or a suspected case.

These healthcare workers will have a supply of the recommended personal protective equipment (PPE) (that is, to allow them to use contact and droplet precautions, including goggles or other eye protection) and follow the World Health Organization's guidance on Infection Prevention and Control (IPC) during health care when coronavirus disease (COVID-19) infection is suspected in case there is an urgent or emergent need to provide direct care for an ill traveller or a suspected case.

Implementation

Ill travellers may be detected through self-reporting, visual observation, via temperature measurement or by exhibiting symptoms of COVID-19 (cough, sneezing and shortness of breath).

- Self-reporting: with increased knowledge among travellers of COVID-19 disease, including information communicated through active and targeted risk communications at POEs, individual travellers experiencing signs and symptoms of illness may approach POE authorities for assistance. Travellers who self-report their illness will be managed following the same procedures as used for those who are screened at the POE.
- Visual observation: Ill travellers exhibiting signs suggestive of COVID-19 disease may be identified by POE personnel as they pass through the entry point.
- Temperature screening/checks will be conducted on all arriving passengers at the airport.

When travellers displaying signs of illness are detected by POE health personnel or through temperature measurement, or when travellers experiencing symptoms come forward to seek help from POE health personnel, or if they exhibit respiratory symptoms, they and their travel companions will be advised to move away from other people, and they will be escorted to a dedicated space for port health for further assessment. POE personnel accompanying the ill traveller must keep a distance of at least 1 m from the traveller. A dedicated physical structure will be used for further assessment and interview.

Interviewing ill travellers suspected of having COVID-19 disease

Ill travelers will be referred to the port health office at the V.C Bird International Airport or seaport to wait for an interview. Measures will be taken to ensure that at least 1 m of spatial separation can be maintained among the ill travellers who are waiting.

Any identified suspected case of COVID-19 may will be tested and referred to the Mount St. John's Medical Center of the Infectious Disease Center (IDC) if necessary. Contacts, as well as suspected and confirmed cases will be accommodated at a quarantine facility designated as such by the Ministry of Health Wellness and the Environment.

Transfer from the V.C. Bird International Airport or seaport to the MSJMC or other designated facility will be via a specially designated emergency medical vehicle and crew.

Training

Staff will be trained:

- To conduct interviews
- To maintain security, and
- To provide transportation to medical facilities for travellers who are being referred for further evaluation or treatment
- On using adequate hand hygiene techniques
- On maintaining 1m of distance from travellers at all times during the interview process, and
- On educating patients, their family and travel companions and addressing their concerns
- About the importance of source control (that is, providing medical masks to travellers with respiratory symptoms before and during the interview process)
- On how to instruct ill travellers about the use of respiratory hygiene (that is, coughing or sneezing into tissues or a bent elbow) and the need for ill travellers to wear a mask and perform frequent hand hygiene, especially after coughing or sneezing, or touching or disposing of their mask.

Equipment

The areas at the airport and seaports will be equipped and stocked with the following:

- Adequate supplies of an alcohol-based hand rub or soap and water.
- Adequate supplies of medical masks that can be used by ill travellers with respiratory symptoms and paper tissues for respiratory hygiene

- Waste bins with liners and lids are available for disposing of medical masks and tissues; these will be disposed of in accordance with infectious waste regulations¹.
- Chairs or beds, or both, in the isolation areas.

Conducting interviews

Interviews with travellers will include the following:

- taking the traveller's temperature using no-touch thermometer technology;
- assessing the traveller for signs and symptoms suggestive of COVID-19 disease only by interviewing and observing. POE personnel should not conduct a physical examination;
- taking a travel and contact history through the traveller's completion of the Public Health Declaration Form, and evaluating the answers provided on the form; and
- making any additional observations noted by the interviewer.

Assessing travellers for COVID-19 disease

The following signs, symptoms and history should be assessed.

- Signs or symptoms of illness suggesting respiratory infection should be evaluated, including
 - Fever >38° C or the traveller mentioning feeling feverish;
 - Cough;
 - Breathing difficulties.
- A history of possible exposure to the COVID-19 virus should be evaluated, including:
 - Travel to a country with ongoing transmission of the COVID-19 virus 14 days prior to the onset of symptoms;
 - A visit to any healthcare facility in a country with ongoing transmission in the 14 days prior to symptom onset;
 - Close physical contact⁴ during the past 14 days with a traveller suspected or confirmed to have COVID-19 infection;
 - A visit to any live animal markets in a country with ongoing COVID-19 virus transmission in the 14 days prior to symptom onset.

Travellers suspected of COVID-19 infection after interview and who exhibit clinical symptoms consistent with respiratory infection or who have a history of possible exposure to the COVID-

¹ The waste will be disposed of at the Cook's Sanitary Landfill.

19 virus, or both, will be immediately isolated at the POE and may be referred to the MSJMC of IDC for additional medical evaluation and treatment. Relevant public health authorities in the MOHWE will also be notified.

Reporting ill travellers with suspected COVID-19 infection

A mechanism for communicating about suspected COVID-19 cases between POE health authorities and transport sector officials (for example, representatives of the national civil aviation and maritime authorities, conveyance operators and POE operators) and between POE health authorities and national health surveillance systems will be established as follows.

Immigration and/or airport officials will alert the officer in the Port Health office at the V.C. Bird International Airport or seaport of any ill travellers of suspected COVID-19 infection or of any passenger arriving from a country with travel restrictions related to COVID-19. The Port Health officer will then communicate this information to the Senior Medical Officer, Epidemiology and Surveillance, Ministry of Health Wellness and the Environment. Appendix I contains a list of relevant persons and their contact information

POE health authorities should receive health information, documents, and reports from conveyance operators regarding ill travellers on board, conduct preliminary assessments of the health risk and provide advice on measures to contain and control the risk accordingly

Isolation, initial case management and referral of ill travellers with suspected COVID- 19 infection

Ill travellers with signs and symptoms indicative of fever or respiratory infection, or both, who have a history of exposure to the COVID-19 virus will be isolated at the Port Health office until they are able to be safely transferred to a healthcare facility for further assessment, diagnosis and treatment. The following steps will be taken during the isolation period.

- Place the traveller in a well-ventilated room (for example, with doors and windows open, weather permitting) that has been designated for patients suspected to have COVID-19 disease
 - If more than one traveller with suspected COVID-19 disease must wait in the same room, ensure there is at least 1 meter of space between individual travellers
 - Ideally, there should be a dedicated bathroom for use only by people with suspected COVID-19 infection
 - Information to patients and their family about the need for isolation will be provided
 - Patients' and families' concerns will be addressed.

- POE personnel should instruct suspected cases:
 - To wear a medical mask while they are waiting for transport to the healthcare facility
 - Not to touch the front of their mask. If they do touch the front of the mask, they must perform hand hygiene with an alcohol-based hand rub or soap and water. If the mask gets wet or dirty with secretions, it must be changed immediately
 - Practice respiratory hygiene at all times; this includes covering the mouth and nose during coughing or sneezing with tissues or a bent elbow if not wearing a mask, followed by performing hand hygiene with an alcohol-based hand rub or soap and water
 - Not to share spaces with people who are not suspected to have covid-19 infection (for example, travellers with other illnesses waiting for interview)

- POE personnel should avoid entering the isolation area where suspected cases are waiting for transport. If they must enter, they should adhere to the following guidance:
 - Wear a tightly fitted medical mask that covers the nose and mouth when entering the room. The front of the mask should not be touched during use. If the mask gets wet or dirty with secretions, it must be changed immediately. After use, discard the mask in a waste bin, close the lid, and then perform hand hygiene with an alcohol- based hand rub or soap and water
 - POE personnel should clean their hands with an alcohol-based hand rub or soap and water before entering and after exiting the isolation room

- Tissues, masks and other waste generated in the isolation area and by travellers with suspected COVID-19 infection should be placed in a container with a lid in the isolation room and disposed of according to national regulations for infectious waste
- Frequently touched surfaces in the isolation area, such as furniture, light switches, sinks and bathrooms used by travellers with suspected COVID-19 infection need to be cleaned three times a day (morning, afternoon, night) by personnel wearing appropriate PPE
 - Cleaning should be done with regular household soap or detergent first and then, after rinsing with water, regular household disinfectant containing 0.5% sodium hypochlorite (that is, equivalent to 5000 ppm or 1 part to 9 parts water) should be used

- Travellers suspected to have COVID-19 infection should remain in an area that has a comfortable temperature and good ventilation, that has chairs or other places to sit, and they should be given blankets, as needed. They should also be given food and water as needed and according to their ability to eat and drink; they must be kept in the most comfortable conditions possible

Transporting Ill Travellers with Suspected COVID-19 Infection

Transportation of ill travellers suspected of having COVID-19 infection to healthcare facilities for evaluation, diagnosis and medical care will be carried out rapidly to ensure early clinical care is provided and to avoid crowding suspected cases at the POE. Preparations will include:

- Transportation to the Mount St. John Medical Centre (MSJMC) or the Infectious Disease Control (IDC) that can provide evaluation for, diagnosis of and medical care for people with COVID-19 infection
- Transportation to either facility ensuring in a specially assigned emergency medical services vehicle
- The availability of infection prevention and control precautions including hand hygiene resources and PPE and ensuring that the staff at the healthcare facility and those providing transport are trained in the correct use of PPE
- Ensuring that the receiving healthcare facility is adequately informed about suspected cases prior to their transfer
- Addressing any security issues that may arise during the transfer
- Ensuring systematic recording of all personnel involved in screening and transporting travellers with suspected COVID-19 infection

Infection Prevention and Control Considerations for Ambulances and Transport Staff

- Transport staff will routinely perform hand hygiene and wear a medical mask and gloves when loading patients into the ambulance
 - If the traveller with suspected COVID-19 infection requires direct care (for example, physical assistance to get into ambulance) then transport staff should add eye protection (for example, goggles) and a long-sleeved gown to their PPE
 - PPE should be changed after loading each patient and disposed of appropriately in containers with a lid and in accordance with national regulations for disposal of infectious waste
- The driver of the ambulance must remain separate from the cases (keeping more than 1 meter distance). No PPE is required for the driver if distance can be maintained. If drivers must also help load cases into the ambulance, they should follow the PPE recommendations in the previous point
- Transport staff should frequently clean their hands with an alcohol-based hand rub or soap and water and should ensure that they clean their hands before putting on PPE and after removing it
- Ambulances and transport vehicles should be cleaned and disinfected, with particular attention paid to the areas in contact with the suspected case. Cleaning should be done with regular household soap or detergent first and then, after rinsing, regular household disinfectant containing 0.5% sodium hypochlorite (that is, equivalent 5000 ppm or 1 part

to 9 parts water) should be applied

Yachts in Quarantine

In addition to the above guidelines, all yachts arriving in Antigua and Barbuda shall:

- be quarantined on the south side in an area designated by the Antigua and Barbuda Port Authority, for a period of fourteen (14) days. Special consideration will be given to waive the quarantine period for yachts and vessels that were at sea for at least 14 days or that were quarantined for at least 14 days in other territories;
- continue to fly their 'Q' flag until released from quarantine;
- shall report any illness during the 14 day period to the Port Health Authorities.

Yachts in quarantine may leave the state at any time.

Bunkering services will be provided at Deep Water Harbour. Provisioning will be provided by individual agencies or local ship handlers. All provisions and stores will be collected by dinghies at the floating dock.

All vessels will be notified on the day prior to the end of the quarantine period. Health examinations will be carried out for all passengers who would have ended the quarantine period.

