



MARITIME AND PORT AUTHORITY OF SINGAPORE

PORT MARINE CIRCULAR NO. 06 OF 2020

26 Feb 2020

Harbour Craft Community
Pleasure Craft Community
Shipping Community

MARITIME DECLARATION OF HEALTH

This circular supersedes Port Marine Circular 03 of 2020 dated 01 Feb 2020, and brings to the attention of the National Environment Agency's (Port Health Office) requirements to submit the Maritime Declaration of Health to the Port Health Office. These requirements are applicable for:

- a) all arriving vessels that have called at ports in China in the past 14 days;
OR
- b) all arriving vessels with crew/passengers who have travelled to mainland China in the past 14 days;
OR
- c) all arriving passenger ships (with the exception of ferries operated by MPA-licensed regional ferry service operators).
OR
- d) all arriving vessels with crew/passengers who have travelled to Daegu city or Cheongdo county of Republic of Korea within the last 14 days

2 This declaration is part of the measures to prevent the spread of Coronavirus Disease 2019 (COVID-19) into Singapore and will come into effect from 26 February 2020, 2359h. It must be submitted to the National Environment Agency's (Port Health Office) 24 hours before arrival at Singapore Port.

3 These requirements are listed in National Environment Agency's (Port Health Office) circular as attached in **ANNEX A**. The Maritime Declaration of Health Form is attached in **ANNEX B**.

4 The master of the ship is recommended to implement the following additional precautionary measures:

- Educate crew/passengers of the symptoms of COVID-2019, which are:
 - Fever;
 - Runny nose;
 - Cough; and
 - Shortness of breath
- Carry out daily temperature checks for all crew/passengers at least twice a day;
- Isolate unwell crew/passengers when his/her temperature is above 38 degree Celsius. The unwell crew should also wear a mask; and
- Disinfect common areas and rooms in the vessel before arrival in Singapore. The disinfection may be conducted by the ship's crew en-route to Singapore. You can refer to the Interim Guidelines for Environmental Cleaning and Disinfection of Areas Exposed to Confirmed Case(s) of Coronavirus Disease 2019 (COVID-19) in Non-Healthcare Commercial Premises prepared by NEA for guidance on the disinfection protocols, if needed. See **ANNEX C**.

5 Any queries relating to this circular should be directed to the Port Health Office at Tel: (65) 6222-2585.

CAPT KEVIN WONG
PORT MASTER
MARITIME AND PORT AUTHORITY OF SINGAPORE

ANNEX A



Central Regional Office
4545 Jalan Bukit Merah
Singapore 159466
www.nea.gov.sg

26 February 2020

Shipping Community,

COMPULSORY MARITIME HEALTH DECLARATION BY VESSELS

1. In view of the COVID-19 situation, Port Health Unit/ NEA will be implementing additional measures to guard against the virus in Singapore.

2. As part of the measures to prevent the spread of the COVID-19 virus, all arriving vessels that had been to any ports in China in the past 14 days; or all arriving vessels with crew/passengers who have travelled to China in the past 14 days; or all arriving passenger ships (with the exception of ferries operated by MPA-licensed regional ferry service operators); or all arriving vessels with crew/passengers who have travelled to Daegu city or Cheongdo county of Republic of Korea in the past 14 days are required to submit the following documents to the Port Health Unit/ Central Regional Office 24 hours before arrival at Singapore Port:

- a) The Maritime Declaration of Health Form;
- b) Crew list / Passenger list;
- c) Current copy of Ship Sanitation Certificates; and
- d) Last 10 ports of call list

The stated documents must be submitted regardless whether there are any sick passengers or crew on board. This procedure is to be implemented with effect from 26 February 2020, 2359h.

3. The Maritime Declaration of Health Form and other documents should be submitted to the Port Health Unit/ Central Regional Office and Maritime and Port Authority of Singapore via :-

- a) Fax: 62228543
- b) Email: Port_Health_CRO@nea.gov.sg
- c) Email: isps@mpa.gov.sg

4. Should you have further queries, please contact Port Health Unit at Tel: (65) 6222 2585 or email at Port_Health_CRO@nea.gov.sg

Yours faithfully,

NASIR MAIDEEN
DY HEAD
CENTRAL REGIONAL OFFICE
NATIONAL ENVIRONMENT AGENCY

The MDH must be completed and submitted a maximum of 24 hours before arrival, with an update, if the health status of any one on board changes

MARITIME DECLARATION OF HEALTH

To be completed and submitted to the competent authorities by the masters of ships arriving from foreign ports.

Submitted at the port of Date

Name of ship or inland navigation vesselRegistration/IMO No

arriving from sailing to

(Nationality)(Flag of vessel) Master's name

Gross tonnage (ship)

Tonnage (inland navigation vessel)

Valid Sanitation Control Exemption/Control Certificate carried on board? Yes No Issued at date

Re-inspection required? Yes No

Has ship/vessel visited an affected area identified by the World Health Organization? Yes No

Port and date of visit

List ports of call from commencement of voyage with dates of departure, or within past thirty days, whichever is shorter:

.....

Upon request of the competent authority at the port of arrival, list crew members, passengers or other persons who have joined ship/vessel since international voyage began or within past thirty days, whichever is shorter, including all ports/countries visited in this period (add additional names to the attached schedule)

(1) Namejoined from: (1)(2)(3)

(2) Namejoined from: (1)(2)(3)

(3) Namejoined from: (1)(2)(3)

Number of crew members on board

Number of passengers on board

Health questions

(1) Has any person died on board during the voyage otherwise than as a result of accident? Yes No
 If yes, state particulars in attached schedule. Total no. of deaths

(2) Is there on board or has there been during the international voyage any case of disease which you suspect to be of an infectious nature?
 Yes..... No.....
 If yes, state particulars in attached schedule.

(3) Has the total number of ill passengers during the voyage been greater than normal/expected? Yes No How many ill persons?

(4) Is there any ill person on board now? Yes No If yes, state particulars in attached schedule.

(5) Was a medical practitioner consulted? Yes No If yes, state particulars of medical treatment or advice provided in attached schedule.

(6) Are you aware of any condition on board which may lead to infection or spread of disease? Yes No
 If yes, state particulars in attached schedule.

(7) Has any sanitary measure (e.g. quarantine, isolation, disinfection or decontamination) been applied on board? Yes No
 If yes, specify type, place and date

(8) Have any stowaways been found on board? Yes No If yes, where did they join the ship (if known)?

(9) Is there a sick animal or pet on board? Yes No

Note: In the absence of a surgeon, the master should regard the following symptoms as grounds for suspecting the existence of a disease of an infectious nature:

(a) fever, persisting for several days or accompanied by (i) prostration; (ii) decreased consciousness; (iii) glandular swelling; (iv) jaundice; (v) cough or shortness of breath; (vi) unusual bleeding; or (vii) paralysis.

(b) with or without fever: (i) any acute skin rash or eruption; (ii) severe vomiting (other than sea sickness); (iii) severe 1abelled; or (iv) recurrent convulsions.

I hereby declare that the particulars and answers to the questions given in this Declaration of Health (including the schedule) are true and correct to the best of my knowledge and belief.

Date

Signed

Master

Countersigned

Ship's Surgeon (if carried)

ATTACHMENT TO MODEL OF MARITIME DECLARATION OF HEALTH

Name	Class or rating	Age	Sex	Nationality	Port and date joined ship/vessel	Nature of illness	Date of onset of symptoms	Reported to a port medical officer?	Disposal of case*	Drugs medicines or other treatment	Comments

State:

1) Whether the person recovered, is still ill or died; and

2) Whether the person is still on board, was evacuated (including the name of the port or airport), or was buried at sea..

Interim Guidelines for Environmental Cleaning and Disinfection of Areas Exposed to Suspected/Confirmed Case(s) of Coronavirus Disease 2019 (COVID-19) in Non-Healthcare Commercial Premises

This document provides guidance by the Ministry of Health and the National Environment Agency to assist owners or operators of non-healthcare premises to carry out environmental cleaning for areas exposed to suspected/ confirmed case(s) of COVID-19 in non-healthcare premises.

This is an interim guidance as transmission dynamics for the COVID-19 are yet to be fully determined. This document has been adapted from guidance documents from the Ministry of Health (MOH), Singapore¹ and the World Health Organization².

A. Cleaning agents and disinfectants

- i. Clean all surfaces, frequently touched surfaces and floors with bleach. Bleach can be used as a disinfectant for cleaning and disinfection (dilute 1 part bleach in 50 parts water, or 1000 ppm). Bleach solutions should be prepared fresh. Leaving the bleach solution for a contact time of at least 10 minutes is recommended.
- ii. Alcohol (e.g. isopropyl 70%, ethyl alcohol 60%) can be used to wipe down surfaces where use of bleach is not suitable e.g. metal.
- iii. If other disinfectants are considered, check with the manufacturer that they are active against coronaviruses. Disinfectants should be prepared and applied in accordance with the manufacturer's guidelines. Ensure that appropriate contact time is given before removing any disinfected materials.

B. Protective Personal Equipment (PPE) to wear while carrying out cleaning and disinfection works

- i. Wear disposable gloves, disposable long-sleeved gowns, eye goggles or face shield and an N95 mask.
- ii. Avoid touching the nose and mouth (goggles may help as it will prevent hands from touching eyes).
- iii. Gloves should be removed and discarded if they become soiled or damaged and a new pair worn.
- iv. All other disposable PPE should also be removed and discarded after cleaning activities are completed. Eye goggles, if used, should be disinfected according to manufacturer's instructions after each use.
- v. When in doubt, refer to guidance documents for the proper donning and doffing of PPE³.
- vi. Hands should be washed with soap and water immediately after each piece of PPE is removed following completion of cleaning.

N.B.: Masks are effective if worn according to instructions and properly fitted. Masks should be discarded and changed if it becomes physically damaged.

¹ Ministry of Health, Singapore. (2014). MOH Pandemic Readiness and Response Plan for Influenza and other Acute Respiratory Diseases

² World Health Organization. (2019). Infection Prevention and Control during Health Care when Novel Coronavirus (nCoV) Infection is Suspected. WHO/2019-nCoV/IPC/v2020.1

³ World Health Organization. (2008). How to Put On and Take Off Personal Protective Equipment. Retrieved from World Health Organization website:https://www.who.int/csr/resources/publications/PPE_EN_A1sl.pdf

C. Cleaning guidelines for areas exposed to suspected/ confirmed case(s) of COVID-19 in non-healthcare commercial premises

- i. Where possible, seal off the areas where the suspected/confirmed case has visited before carrying out cleaning and disinfection of the contaminated environmental surfaces. This is to prevent unsuspecting persons from being exposed to those surfaces.
- ii. When cleaning areas where a suspected/confirmed case has been, cleaning crews should be attired in suitable PPE (see Section B above). Gloves should be removed and discarded if they become soiled or damaged and a new pair worn. All other disposable PPE should also be removed and discarded after cleaning activities are completed. Goggles, if used, should be disinfected according to manufacturer's instructions after each use. Hands should be washed with soap and water immediately after the PPE are removed.
- iii. Keep cleaning equipment to the minimum.
- iv. Keep the windows open for ventilation where the workers are using disinfectants.
- v. Mop floor with bleach (dilute 1 part bleach in 50 parts water, or 1000 ppm).
- vi. Wipe all frequently touched areas (e.g. lift buttons, handrails, doorknobs, armrests, seatbacks, tables, air/light controls, keyboards, switches etc.) and lavatory surfaces with chemical disinfectants (use according to manufacturer's instructions) and allowed to air dry. Bleach solution (dilute 1 part bleach in 50 parts water, or 1000 ppm) can be used. Alcohol (e.g. isopropyl 70% or ethyl alcohol 70%) can be used for surfaces where use of bleach is not suitable.
- vii. Wipe down walls up to 3m in height as well as blinds with bleach (dilute 1 part bleach in 50 parts water, or 1000 ppm).
- viii. Remove curtains / fabrics / quilts for washing with preferably hot water cycle. For hot-water laundry cycles, wash with detergent or disinfectant in water at 70°C for at least 25 minutes. If low-temperature (i.e. < 70°C) laundry cycles are used, choose a chemical that is suitable for low-temperature washing when used at the proper concentration.
- ix. Discard cleaning equipment made of cloths and absorbent materials e.g. mop head and wiping cloths into biohazard bags after cleaning and disinfecting each area as these materials are not easily disinfected. Wear a new pair of gloves and fasten the double-bagged biohazard bag with a cable tie.
- x. Disinfect non-porous cleaning equipment used in one room before using for other rooms. If possible, keep the disinfecting equipment separated from other routine equipment.
- xi. Disinfect buckets by soaking in bleach (dilute 1 part bleach in 50 parts water, or 1000 ppm, at least 10 minutes), disinfectant solution or rinse in hot water before filling.
- xii. Discard equipment made of cloths/ absorbent materials (e.g. mop head and wiping cloths) after cleaning each area to prevent cross contamination.
- xiii. Disinfectants should be applied to surfaces using a damp cloth. They should not be applied to surfaces using a spray pack, as coverage is uncertain and spraying may promote the production of aerosols. The creation of aerosols caused by splashing liquid during cleaning should be avoided. A steady sweeping motion should be used when cleaning either floors or horizontal surfaces to prevent the creation of aerosols or splashing. Cleaning methods that might aerosolize infectious material, such as the use of compressed air, must not be used.
- xiv. Leave the disinfected area and avoid using the area the next day.

xv. Biohazard bags should be properly disposed⁴ upon the completion of the disinfection work.

D. Precautions to take after completing the clean-up and disinfection of the affected area

- i. Cleaning crews should wash their hands with soap and water immediately after removing the PPE and when cleaning and disinfection work is completed.
- ii. Discard all used PPEs in a double-bagged biohazard bag securely sealed and 3labelled.
- iii. The crew should be aware of the symptoms and should report to their occupational health service if they develop symptoms.

E. List of cleaning companies that can carry out disinfection works

If you are not able to adhere to the suggested disinfection methods above, you may wish to consider engaging the following cleaning company to carry out disinfection works:

Chye Thiam Maintenance Pte Ltd	Hotline: 6281 8866
COSEM Safety and Security Services Pte Ltd	Email: khairul@cosem.org.sg Website: http://www.cosem.org.sg/ Mobile: 8298 8242

Released on 25 January 2020

⁴ Refer to the list of licensed biohazard waste collectors: <https://www.nea.gov.sg/our-services/pollution-control/hazardous-waste/toxic-waste-control>