

THE NEW NORMAL

RECOMMENDATIONS AND
GUIDELINES
FOR HOSPITAL STAFF AND
FUNERAL AGENCIES
IN THE CONTEXT OF
COVID-19

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Acknowledgements

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- Dr. Roshan Parasram, Chief Medical Officer;
- Dr. Saed Rahaman, Director, Veterinary Public Health Inspectorate;
- Mr. Lawrence Jaisingh, Director, Health Policy, Research and Planning; and
- Ms. Cindi Siewdass, Research Officer II, Directorate, Health Policy, Research and Planning.

1. Background

Pandemic outbreaks such as COVID-19 have the potential to destabilize and disrupt health systems and may have a profound effect on all aspects of a country's economy and the mental and physical health of the population.

On March 11th, 2020, the World Health Organisation (WHO) declared the COVID-19 to be a pandemic and as of September 11th, 2020, there were 27,973,127 confirmed cases with 905,426 deaths across 216 countries (WHO Situational Report)¹.

In Trinidad and Tobago, as at September 11th, 2020, there were two thousand, seven hundred and seventy-seven (2,777) positive cases and forty-five (45) deaths with over twenty-three thousand, one hundred and thirty-three (23,133) unique patient tests conducted.

Transmission of infectious diseases associated with management of dead bodies can occur and can be enhanced by non-compliance to standard and transmission-based precautions, especially in healthcare and other settings. Aerosol generating procedures have a role in the spread of the disease, as well as contaminated hands of healthcare providers, surfaces and fomites.

It is important to assess the risk during the mortuary care process and provide adequate explanation to the family, respecting the cultural context of the local community. If indicated, provide personal protective equipment (PPE) to the family, with instructions in its use. Manage each situation on a case-by-case basis, balancing the rights of the family with the risks of exposure to infection.

A limited number of funeral homes will be selected to conduct cremations or burials for persons who died of COVID-19 complications. Those funeral homes will be required to train their staff in

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¹ https://covid19.who.int/table

the proper use of PPE, including donning and duffing (putting on and removal) and the implementation of these Guidelines.

These Guidelines and recommendations were compiled after a review of international guidelines and considering them within our local healthcare environment whilst at the same time being culturally sensitive to the needs of the family and population.

This document is subject to revision as new information becomes available.

2. Objectives of the Protocols

To provide guidelines and recommendation for use by Funeral Homes, to minimize the risk and interrupt the transmission of COVID-19 to their members of staff and the public.

3. Legal and Policy Framework

On January 31st 2020, the proclamation of COVID-19 as a dangerous infectious disease under the Public Health Ordinance, Chap. 12 No. 4, in order to trigger the special provisions under the Ordinance and the Quarantine Act Chapter 28:05 that are pertinent to the curtailment and management of infectious diseases such as notification, special inspections and offences (Legal Notices Nos. 34 and 35 and excerpt from the Quarantine Act 7(1) appended). Also, the adherence to the 2004 Occupational Safety and Health Act, Chp. 88:88².

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² https://rgd.legalaffairs.gov.tt/laws2/alphabetical_list/lawspdfs/88.08.pdf

4. Preparing and Packing the Body for Transfer from Hospital Patient Room to Mortuary

- i. Ensure that personnel who interact with the body (health care or mortuary staff, or the burial team) apply standard precautions, including: -
 - hand hygiene before and after interaction with the body,
 and the environment; and
 - use appropriate PPE including a gown and gloves, facial protection, including the use of face shield or goggles and N95 mask
- ii. Prepare the body for transfer removing all lines, catheters and other tubes;
- iii. Ensure that any body fluids leaking from orifices are contained;
- iv. Keep both the movement and handling of the body to a minimum;
- v. Wrap body in underlying sheet in such a manner as to leave the face exposed and place wrapped body in a body bag and transfer it as soon as possible to the mortuary area; there is no need to disinfect the body before transfer to the mortuary area; and
- vi. Once body bag is sealed it should be disinfected with the prescribed disinfectants, tagged with the COVID alert notification (see appendix I) and transferred to mortuary immediately.

5. Handling of Dead Body in Hospital Mortuary

- i. All bodies being sent to the mortuary where death has occurred in hospital should be clearly labelled if COVID-19 is suspected or confirmed. If suspected, the clinical team should test for COVID-19 before sending the body to the mortuary. The body can be sent to the mortuary while the result is pending;
- ii. Ensure that mortuary staff apply standard precautions at all times (i.e. perform hand hygiene, environmental cleaning) including appropriate use of PPE; long sleeved gown,

- gloves and facial protection if there is a risk of splashes from the patient's body fluids or secretions onto the body or face of the staff member;
- iii. Positive COVID-19 cases will **not** have an autopsy performed;
- iv. All community deaths should be delivered in a body bag; a body will not be accepted unless it is in a body bag;
- v. All COVID-19 positive or suspected cases will be housed in a separate refrigerator. If a negative test is obtained, a post mortem can then be performed and the body stored in another refrigerator;
- vi. On releasing COVID-19 positive bodies to a funeral home advice should be given with respect to handling of the body. The body should be kept in a body bag by the funeral home. Dead bodies should be stored in cold chambers maintained at approximately 4°C;
- vii. The mortuary must be kept clean. Environmental surfaces, instruments and transport trolleys should be properly disinfected with a disinfectant solution as prescribed below or 70% ethanol; and
- viii. After removing the body, the body tray, chamber door, handles and floor should be cleaned and disinfected using a disinfectant solution as prescribed below or 70% ethanol.

RECOMMENDATIONS

- Disinfectant recommended is a mixture of Five (5) tablespoons (75 mls) of bleach (containing not less than 5% - 6% hypochlorite) in one (1) US Gallon (3.8) Litres of water;
- Washing hands wash hands with soap and water for at least 20 seconds as per protocol;
- 3. The use of PPE put on and remove PPE in accordance with PPE protocols (donning and doffing so as not to come in contact with the virus);
- 4. Recommended Hand Sanitizer a Hand Sanitizer Gel containing at least 70% ethyl alcohol (ethanol); and

5. A Hand Sanitizing Station - a wash hand basin with running water, disposable paper towels and a pedal type bin.

6. Viewing the Decedent at the Hospital Mortuary

Relatives can be allowed to view the body of a suspected or confirmed case under the following conditions:

- The decedent's body should be moved to the viewing area using the recommended transfer and handling protocols. No more than two (2) staff members with PPE should be used for this purpose to limit exposure;
- ii. If family members need to be escorted to the viewing area, this should be done by a member of staff who has not and will not come into contact with the body. Members of staff who have transferred and positioned the body should avoid all contact with the public while still wearing contaminated PPE;
- iii. A sanitization station must be made available at points of entry/exit to the mortuary/viewing area. Use of these stations is mandatory;
- iv. Only a designated family member or caregiver, one (1) at a time and a police officer (if necessary), is allowed into the mortuary/viewing area and they must be provided with a surgical mask and must maintain a distance of at least three (3) feet from the decedent. This is with the consideration that this is the last time that the family will be allowed to view their loved one. Permission will be given to use electronic media to stream images to the bereaved for not more than one minute;
- v. The items of value belonging to the decedent shall be returned to the family after disinfection by staff. They should be handled with gloves and cleaned with a detergent followed by disinfection with the recommended disinfectants as prescribed earlier;
- vi. THE BODY CANNOT BE TOUCHED; and
- vii. The body bag should only be opened by an attendant while still wearing PPE. It should be opened so that only the face is exposed.

7. Required Supplies and PPE for Funeral Home Removal Staff

Ensure that each person is issued with personal protective equipment and supplies as follows:

- i. Goggles
- ii. N95 or equivalent mask
- iii. Long sleeve gowns
- iv. Non-sterile nitrile gloves
- v. Soap and water
- vi. Standard body bag 7mil or higher depending on body weight
- vii. Disinfectant soaked absorbent cotton
- viii. Safety boots
- ix. Spray bottle containing disinfectant
- x. Biohazard bag
- xi. Impervious plastic bag.
- xii. Any other PPE as may be required

NOTE: Disinfectant recommended is a mixture of Five (5) tablespoons (75 mls) of bleach (containing not less than 5% - 6% hypochlorite) in one (1) US Gallon (3.8) Litres of water.

8. The Removal Process from a Private Residence, Public Mortuary or Other Place of Pick Up

 At the point of removal, staff must be outfitted in the issued PPE prior to entering the residence, public mortuary or place of pick up;



- ii. When removing the deceased, avoid placing yourself or the family at further risk by handling linens in a manner that makes microorganisms airborne i.e. do not excessively manipulate the linen;
- iii. Place the disinfectant soaked cotton, a towel or three (3) layers of fabric across the face of the deceased to prevent any escape of air from the lungs during lifting and to circumvent any nasal or buccal purge;
- iv. Carefully wrap the deceased in the underlying linen;
- v. Place the wrapped body in the body bag, remove face covering leaving it within the bag and close it immediately and completely;
- vi. Affix tag with the COVID alert notification (see appendix);
- vii. Apply Disinfectant to outer side of body bag;
- viii. Remove nitrile gloves and immediately wash hands with soap and water or disinfect with 70% alcohol based hand sanitizer. Re-glove using new pair of nitrile gloves;
- ix. Place the deceased into cot and transfer to the vehicle and close the door;
- x. Remove gloves, wash your hands with soap and water or disinfect with 70% alcohol based hand sanitizer. All used gloves should be placed in a biohazard bag
- xi. Remove your goggles and mask. Place goggles in an impervious plastic bag for reuse and discard mask in biohazard bag;
- xii. Wash or sanitize hands as prescribed before;
- xiii. Return to the funeral home wearing the gown and mask;
- xiv. At the funeral home, wash your hands and put on a new pair of gloves and mask and place the deceased into the cooler or onto the preparation table as required.

 DO NOT OPEN THE BODY BAG;
- xv. While wearing the gown, gloves and mask, disinfect the cot, the removal bay of the vehicle and the passengers' compartment with the prescribed disinfectant;
- xvi. Remove gown, gloves and mask in this order and discard in a biohazard bag; and
- xvii. Wash hands thoroughly for at least twenty (20) seconds with soap and water.

RECOMMENDATIONS

- 1. Equip each vehicle with disinfected saturated cotton, soap and water or hand sanitizers and spray bottle containing the prescribed disinfectant;
- 2. Wash your hands with soap and water for at least 20 seconds routinely during the day;
- 3. Keep hands from touching your face. This is difficult but, it is the most important advice; and
- 4. Disinfect goggles and other reusable PPE with the prescribed disinfectants.

9. Preparation Process

- i. No embalming will be permitted;
- ii. DO NOT OPEN THE BODY BAG;
- iii. The pre-disinfected (as prescribed above) body bag can be washed as needed (in regards to religious rituals) by the funeral home staff wearing appropriate PPE;
- iv. The body bag is to be placed directly into coffin for cremation or burial as requested by family; and
- v. The coffin, including hardware such as handles, must be thoroughly disinfected using the prescribed disinfectants before the funeral service.

PREPARATION ROOM STAFF PPE:

- 1. Standard PPEs; plus, splash proof face mask;
- 2. N95 or equivalent masks;
- 3. Good quality surgical gloves and outer heavier rubber gloves;
- 4. Long sleeve impermeable gowns;
- 5. Availability of adequate soap and water; and
- 6. A working ventilation system in accordance with the manufacturer's specifications.

^{**}The pick up from private residence is in the event that the situation escalates in a manner similar to countries like Italy and Spain.

10. Planning Funerals

Where death was as a result of the COVID-19 virus, the primary caregivers or other persons in close proximity to where the person died may have been infected or are carrying the organisms on their clothing, the following are recommendations that should be adhered to:

- i. You may invite the family to plan the funeral via telephone, email or other method that does not require face to face contact;
- ii. Where funeral planning is face to face for a person known to have died of COVID19, we advise the use of any N95, or equivalent mask and nitrile gloves to be worn by both staff and visitors. (If required, masks and gloves should be provided for visitors);
- iii. Social Distancing, six (6) feet apart from each other should be practiced during the planning stages (as advised by WHO);
- iv. DO NOT touch your face;
- v. Your masks may hold pathogens and as such should be disposed of properly;
- vi. Cleaning staff outfitted with appropriate PPE, should disinfect the arrangement room/display room and all other areas visitors have come in contact with;
- vii. Hand Sanitizing Stations (and Hand Sanitizers) should be conveniently located for visitors (especially at the entrance). The use of these stations is mandatory; and
- viii. After the departure of the client, carefully removing gloves, wash your hands with soap and water for at least 20 seconds.

11. Recommendations for Funeral Services

A. FUNERAL HOME CREMATORIUM

- i. All funerals are limited to the maximum number allowed in the current Public Health guidelines. This number includes the religious officiant;
- ii. A hand sanitization station must be installed at points of entry/exit to the mortuary/viewing area. Use of these stations are mandatory;
- iii. People who feel sick or who are above 60 years, immunocompromised, or with certain underlying medical conditions (uncontrolled diabetes or hypertension, COPD, heart failure and cancer patients) should be advised not to attend the service;
- iv. Funeral home staff and persons attending the visitation must practice social distancing of 6 ft. (as guided by WHO). Also seating arrangements should be in alignment with this guideline to facilitate the 6 ft. distancing requirement;
- v. Funeral homes should not allow families to distribute food and drinks;



- vi. Funeral directors could offer live streaming as an option for persons who could not attend;
- vii. Family members should avoid direct contact like handshakes, hugging, and kissing at the service or funeral;
- viii. The ash does not pose any risk and can be collected to perform the last rites;
- ix. All funeral homes should be outfitted with proper preparation room facilities, as this will reduce considerable risk to self and the public. Funeral homes should supply tissues and alcohol-based hand sanitizers for the families to use and should stock adequate supply of soap and paper towels in the rest rooms; and

- x. Each funeral home should develop a plan to manage challenges presented with the current situation. The funeral home management should stay informed regarding current recommendations to protect their staff and families of the deceased.
- **Note:** 1. Open-Air Pyre Cremations **will not be** allowed for persons who are **COVID-19 positive** at the time of death as indicated in the death certificate.
 - 2. For those who are **COVID-19 Negative**, crematoriums and Open-Air Pyre can be continued as per the usual process.

B. FUNERAL SERVICES AT THE BURIAL GROUND

- The staff will practice standard precautions of hand hygiene, use of masks and gloves;
- ii. Gathering at the burial ground is limited to the maximum number allowed in the current Public Health guidelines. This number includes the religious personnel;
- iii. In accordance with **Chapter 12 No 4**, there should be speedy burial/cremation of the deceased. The burial/cremation should occur within *24-48 hrs*. of the body arriving at the funeral home;
- iv. Religious leaders should be encouraged to limit the rites and ceremony to a maximum of 30 minutes. Religious rituals such as reading from religious scripts, sprinkling holy water and any other last rites that does not require touching of the body can be allowed;
- v. Social distancing of six (6) feet apart (as guided by WHO) should be adhered to;
- vi. Kissing, hugging or any other form of touching of the dead body is prohibited;
- vii. Family members should avoid direct contact with each other as much as possible e.g. handshakes, hugging, and kissing at the service or funeral; and
- viii. Burial staff and family members should perform hand hygiene after burial. Wash hands with soap and water for at least 20 seconds.

12. General

- All infectious waste from Funeral Homes should be collected and disposed of in an approved manner and NOT disposed in normal garbage waste to be carried to the landfill sites. The RHA should be contacted in regards to disposal;
- ii. The presence of all visitors to all funeral homes must be recorded; ensuring contact information is taken. This record must be maintained for 90 days after the end of the pandemic;
- iii. All funeral homes <u>must</u> provide hand sanitizers or facilities where visitors will be able to wash their hands with soap and water upon arrival and departure;
- iv. All door handles and other hard surfaces within the facilities should be sanitized as often as necessary throughout the working day and after each service;
- v. It is also recommended that Funeral Homes qualified to handle COVID-19 deceased and conduct funerals (see appendix II), meet the following criteria:
 - Must have a stock of required PPE
 - Removal vehicle should have a closed space for the deceased and outfitted with non-fabric seats
 - The Funeral Home should have a preparation room with adequate ventilation
 - The Funeral Home should have a working cooler
- vi. Absolute prohibitions (don't)
 - No touching, kissing, hugging or direct contact with body
 - No opening of body bag
 - No washing of body
 - No embalming
 - No pallbearers unless attired in PPE
 - No Open-Air Pyre Cremations for COVID-19 Positive persons (COVID-19
 Negative persons can be cremated as per usual process)



13. Implementation of the Protocols

The County Medical Officers of Health (CMOsH) will officially communicate the recommendations and guidelines for hospital staff and funeral agencies, and ensure compliance as it relates to the documentation and the treatment and care for returning nationals. Thereafter, continuous assessment and reporting on the adherence of these protocols should be implemented to ensure full compliance.

14. Monitoring and Evaluation

The CMOsH will provide continuous assessment and reporting to the Chief Medical Officer on the implementation of these protocols through continuous site visits and inspection of the Ports of Entry. This is to ensure the strict adherence to the protocols for the entry of returning nationals as they may pose a higher risk of spread of COVID-19.

15. Reference

- i. CDC COVID-19 and Funerals (https://www.cdc.gov/coronavirus/2019-ncov/faq.html#funerals).
- ii. CDC Resources for Businesses and Employers
 (https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/businesses-employers.html).
- iii. CDC Interim Guidance for Collection and Submission of Post-mortem Specimens from Deceased Persons Under Investigation for COVID-19, February 2020 (https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidancepostmortem-specimens.html).
- iv. Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed Coronavirus Disease 2019 (COVID-19) in Healthcare Settings (https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html).
- WHO Infection Prevention and Control for the safe management of a dead body in the context of COVID-19, March 2020.
 (https://apps.who.int/iris/bitstream/handle/10665/331538/WHO-COVID-19-IPC_DBMgmt-2020.1-eng.pdf)
- vi. Pathology Society of Trinidad and Tobago: Revised Recommendations and Guidelines for Anatomical Pathology Services in response to COVID-19 Pandemic.
- vii. Statement by President Keith Belgrove CFSP on Funeral Service and the Novel Coronavirus (COVID-19)

16. Appendices

1.0 Biohazard

Covid-19



1.1 List of Funeral Homes

No.	Name	Title	First Name	Last Name	Address #1	Phone No.	Fax No.	E-Mail Address
1	Belgroves Funeral Home Co. Ltd.	Mr. Ms.	Keith Mercedes	Belgrove Belgrove	107-109 Coffee Street, San Fernando	223-2178		ceo@belgroves.com; services@belgroves.com
2	Belgroves Funeral Home Co. Ltd.	Mr. Ms.	Keith Mercedes	Belgrove Belgrove	#10 Orange Grove Road, Trincity	223-2178		ceo@belgroves.com; services@belgroves.com
3	Belgroves Funeral Home Co. Ltd.	Mr. Ms.	Keith Mercedes	Belgrove Belgrove	#1 Richardson Street, Point Fortin	223-2178		ceo@belgroves.com; services@belgroves.com
4	Belgroves Funeral Home Co. Ltd.	Mr. Ms.	Keith Mercedes	Belgrove Belgrove	Edinburgh Village, Chaguanas	223-2178		ceo@belgroves.com; services@belgroves.com
5	Belgroves Funeral Home Co. Ltd.	Mr. Ms.	Keith Mercedes	Belgrove Belgrove	#4 Auchenskeoch, Buccoo Bay Road, Lambeau, Tobago	223-2178, 639- 2350		ceo@belgroves.com; services@belgroves.com
6	Boodoo's Funeral Home	Mr.	Boysie	Boodoo	#1273 Siparia Erin Road, Penal	647-7527		boodoosfuneralhome@hotmail.com
7	Clark & Battoo Funeral Home Ltd.	Mr.	Luigi	Jodhan	40 Southern Main Road, Chaguanas	665-5266		info@clarkandbattoo.com
8	Clark & Battoo Funeral Home Ltd.	Mr.	Luigi	Jodhan	11 Tragarete Road, Port-of-Spain	625- 1170/2624/4183	623- 4304	info@clarkandbattoo.com
9	Clark & Battoo Funeral Home Ltd.	Mr. -	Luigi Ann-Marie	Jodhan Samaroo	31-33 Royal Road, San Fernando	652-2682/3488	652- 2682 / 3488	info@clarkandbattoo.com
10	Dass Funeral Home	Mr.	Randy	Dass	Lot 19 Endeavour Industrial Est. Chaguanas	665-6955, 360- 6955	671- 7137	dfschaguanas@gmail.com randydass@gmail.com
11	Dass Funeral Home	Mr.	Carlyle	Mulchan	143B Maraj Ave., Marabella	652-4527		dassfuneralhome@gmail.com
12	David Guide Funeral Services	Mr.	David	Guide	Southern Main Road, Couva	636-2435 741-0410		dgfuneralservices@gmail.com
13	Elite Funeral Home Ltd.	Mr.	Choy	Lee	22-24 Main Road, Point Fortin	648-3462		elitefhl1@gmail.com
14	L. Armstrong's Funeral Home Ltd.	Mr.	Christopher	Armstrong	Observatory & Oxford Streets, Port- of-Spain	623-8582 625-0715		larmstrongsfuneralhomeltd@yahoo.com
15	Muslim Funeral Services	Mr.	Azran	Ali	Lot No. 3 Greenidge Street, Ameer Ali Drive, Felicity	293-4092, 774- 9990 384-5466		azranali@rocketmail.com
16	R.M De Souza Memorial Chapel Ltd.	Ms.	Sharon	de Souza	#5 New Yalta, Diego Martin Main Road	223-2007/8		rmdesouzamemorialchapel@gmail.com
17	Shalom Funeral Chapels Ltd.	Ms.	Candice	Simpson	19 Southern Main Road, Mc Bean, Couva	636-2450, 686- 0319		shalomfuneralstt@gmail.com
18	Shalom Funeral Chapels Ltd.	Ms.	Candice	Simpson	105 Edward Street, Port of Spain	636-2450, 686- 0319		shalomfuneralstt@gmail.com
19	Shaym Memorial Ltd	Mr.	Shaym	Mohammed	90 Southern Main Road,Warrenville, Cunupia	665-3476		shaymislamicfuneralservices@gmail.com

No.	Name	Title	First Name	Last Name	Address #1	Phone No.	Fax No.	E-Mail Address
20	Simpsons Memorial Ltd.	Mr.	David	Simpson (Jr.)	63 Eastern Main Road, Laventille	623-8688		simpsonsmemorialltd@hotmail.com
21	Union Funeral Home	Ms.	Emalia	Williams	Government House Road, Scarborough	639-6577		
22	Wight's Funeral Home Ltd.	Mr. Mr.	Vernon Ray	Wight Wight	15-17 Toco Road, Sangre Grande	668-2453/3510	668- 2453	raywig@gmail.com

1.2 Legal Notice No. 34 (Corrigendum)

 $Legal\ Supplement\ Part\ B-Vol.\ 59,\ No.\ 53-22nd\ April,\ 2020$

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Legal Notice No. 79

REPUBLIC OF TRINIDAD AND TOBAGO

THE PUBLIC HEALTH ORDINANCE, CH. 12 No. 4

CORRIGENDUM

(In respect of Legal Notice No. 34 of 2020)

PROCLAMATION DECLARING THE 2019 NOVEL CORONAVIRUS (2019-nCoV) TO BE A DANGEROUS INFECTIOUS DISEASE

In Legal Notice No. 34 of 2020 published on 31st January, 2020, delete the word "100" and substitute the word "103".

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LEGAL NOTICE No. 34

REPUBLIC OF TRINIDAD AND TOBAGO

No. 17 of 2020.

By Her Excellency PAULA-MAE WEEKES, O.R.T.T., President of the Republic of Trinidad and Tobago and Commander-in-Chief of the Armed Forces.

[L.S.]

 $\begin{array}{c} {\rm PAULA\text{-}MAE} \ \ {\rm WEEKES} \\ {\rm \textit{President}} \end{array}$

A PROCLAMATION

WHEREAS it is provided by section 100 of the Public Health Ordinance, Ch. 12 No. 4, that the Governor may, by proclamation, declare any disease to be an infectious disease or a dangerous infectious disease:

And whereas it is provided by section 3(1) of the Existing Laws (Amendment) Order, No. 8 of 1962, that any reference in any existing law to the Governor shall be read and construed as a reference to the Governor-General:

And whereas it is also provided by section 5(5)(b) of the Constitution of the Republic of Trinidad and Tobago Act, Chap. 1:01, that any reference to the Governor-General shall be read and construed as if it were a reference to the President:

And whereas Trinidad and Tobago has been advised recently by the World Health Organization of the existence of the 2019 Novel Coronavirus (2019-nCoV), a highly infectious and dangerous disease which is currently occurring in various locations around the world:

And whereas the Minister of Health believes that due to the speed and ease of international travel, Trinidad and Tobago can ultimately expect the arrival of the 2019 Novel Coronavirus (2019-nCoV) and the devastating effect on its public health:

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Now, therefore, I, PAULA-MAE WEEKES, President as aforesaid, do hereby declare the 2019 Novel Coronavirus (2019-nCoV) to be a dangerous infectious disease.

Given under my Hand and the Seal of the President of the Republic of Trinidad and Tobago, at the Office of the President, St. Ann's, this 31st day of January, 2020.

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LEGAL NOTICE No. 35

REPUBLIC OF TRINIDAD AND TOBAGO

QUARANTINE ACT, CHAP. 28:05

ORDER

Made by the Chief Medical Officer under section 6(1) of the Quarantine Act

THE QUARANTINE [2019 NOVEL CORONAVIRUS (2019-nCoV) DISEASE] ORDER, 2020

- 1. This Order may be cited as the Quarantine [2019 Novel Citation Coronavirus (2019-nCoV) Disease] Order, 2020.
- 2. In this Order, "Health Officer" has the same meaning assigned $_{\rm Interpretation}$ to it in regulation 2 of the Quarantine (Maritime) Regulations. $_{\rm No.~19~of~1944}$
- 3. For the purpose of the prevention of the spread of the 2019 Novel Special Coronavirus (2019-nCoV) Disease ("NCV"), the Health Officer may take measure the following special measures:
 - (a) where an infection, which may be NCV, has occurred on board a ship during a period of six weeks immediately preceding its arrival at a port of Trinidad and Tobago, the surveillance of the crew and passengers who have been exposed to the infection, for a period of fourteen days from the last day of possible exposure to the infection; or
 - (b) where an infection, which may be NCV, has occurred on board an aircraft at any time immediately preceding its arrival at an aerodrome in Trinidad and Tobago, the surveillance of the crew and passengers who have been exposed to the infection, for a period of fourteen days from the last day of possible exposure to the infection.

Dated this 31st day of January, 2020.

R. PARASRAM Chief Medical Officer

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1.5 Quarantine Act Chap. 28:05 7 (1) to (3)

LAWS OF TRINIDAD AND TOBAGO

MINISTRY OF THE ATTORNEY GENERAL AND LEGAL AFFAIRS

www.legalaffairs.gov.tt

Quarantine

Chap. 28:05

Minister. In approving any rules, the Minister may make any amendments thereto which he thinks desirable.

6. (1) When in the opinion of the Quarantine Authority an Power to make emergency exists, the Quarantine Authority may by Order direct emergency. special measures to be taken during the continuance of that emergency for any of the purposes specified in sections 4 and 5, and any such Order shall have effect notwithstanding anything to the contrary in any regulations or rules in force by virtue of those sections.

- (2) An Order made under subsection (1) may be varied or rescinded by Order of the Minister.
 - 7. (1) Any person who-

Offences and

- (a) refuses to answer or knowingly gives an untrue answer to any inquiry made under the authority of this Act, or intentionally withholds any information reasonably required of him by an officer or other person acting under the authority of this Act, or knowingly furnishes to any such officer or other person any information which is false;
- (b) refuses or wilfully omits to do any act which he is required to do by this Act, or refuses or wilfully omits to carry out any lawful order, instruction or condition made, given or imposed by any officer or other person acting under the authority of this Act; or
- (c) assaults, resists, wilfully obstructs or intimidates any officer or other person acting under the authority of this Act, or offers or gives a bribe to any officer or person in connection with his powers or duties under this Act, or being such officer or person, demands, solicits or takes a bribe in connection with his powers or duties under this Act, or otherwise obstructs the execution of this Act,

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L.R.O.

UPDATED TO 31ST DECEMBER 2016

LAWS OF TRINIDAD AND TOBAGO

MINISTRY OF THE ATTORNEY GENERAL AND LEGAL AFFAIRS

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Chap. 28:05

Quarantine

is liable on conviction to a fine of six thousand dollars and to imprisonment for six months.

- (2) Any person who is guilty of any other offence against this Act is liable on conviction to a fine of six thousand dollars and to imprisonment for six months.
- (3) All offences against this Act may be prosecuted summarily under the Summary Courts Act.

Rewards to informers.

Ch. 4:20.

8. The Minister may direct that any part of any fine recovered in respect of any offence against this Act shall be paid to any person who has given information leading to the conviction of the offender.

Recovery of expenses and charges.

- **9.** (1) All expenses and charges payable to the Quarantine Authority under this Act may be sued for and recovered by him before any Court of competent jurisdiction, and a certificate purporting to be under the hand of the Quarantine Authority to the effect that the expenses or charges sued for are due and payable shall be received in evidence and shall be sufficient evidence of the facts therein stated unless the contrary be shown.
- (2) Any sum received or recovered by the Quarantine Authority in payment of expenses or charges payable to him under this Act shall be paid into public funds.

Duty and power of the Police.

- 10. (1) Every member of the Police Service shall enforce (using force if necessary) compliance with this Act and with any order, instruction or condition lawfully made, given or imposed by any officer or other person under the authority of this Act; and for such purpose any member of the Police Service may board any ship or aircraft and may enter any premises without a warrant.
- (2) Any member of the Police Service may arrest without a warrant any person whom he has reasonable cause to believe to have committed any offence against this Act.
- (3) In this section the expression "member of the Police Service" includes a member of any police organisation constituted by law who has the general powers of a member of the Police Service.

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