**Meeting to discuss COVID19 Surveillance and Response in Displaced Person Shelters on Thai Border**

Tuesday, March 31, 2020 from 13:30 a.m. to 16:00 p.m. via video teleconference and Skype at Permanent Secretary Building 5 MOPH, Maesot Hospital, Tak Provincial Health Office and Somdej Phrachao Taksin Maharat Hospital, Tak province.

**Meeting purpose:** To discuss specific points for COVID-19 coordination between Province and NGOs for preparations of surveillance and outbreak response plans for the Displaced Person Shelters along the Thai-Myanmar Border.

**Meeting Agenda:**

* Prevention of COVID-19 introduction into the camps
* Surveillance
* Care Provision
* Laboratory Testing
* Case Investigation & Contact Tracing
* Self-quarantine

**Attendees:** United Nations High Commission for Refugees, International Rescue Committee, Thai Ministry of Public Health (Department of Disease Control’s Division Of Epidemiology and Office of Permanent Secretary’s Division of Health Administration), World Health Organization, US Department of State Bureau of Population, Refugees, and Migration, and US-Centers for Disease Control Division of Global Migration and Quarantine, Maesot General Hospital, Tak Provincial Health Office, Maesot District Health Office, International Organization for Migration, Maetao Clinic, COERR, Humanity & Inclusion, Shoklo Malaria Research Unit, The Border Consortium, Malteser International, CCSDPT’s HIS coordinator

**Summary**

**Prevention of COVID-19 introduction into the camps**

Enhanced entry screening has been implemented at all 9 temporary shelters. Camps have access of visitors restricted only to essential services. Temperature screening and handwashing has been initiated at official entry points of all 9 camps, overseen by Operation Center for Displaced Persons (OCDP) with supplies and equipment (including basic training) provided by NGO. For non-camp residents, if found to have fever or ill, that person will not be allowed to enter camp. For camp residents, if found to have fever or ill, that person will be isolated and brought to clinic in camp for further assessment. All NGO staff (IRC) are routinely screened at the office every morning prior to departure from office to camps and screened again at the camps’ gate. However, there may be a gap for access control and screening from unofficial entry points despite additional patrol. This is to be further discussed with Ministry of Interior. For Maela camp, there are now reduced to only 4 official entry points (from 15).

As for referral of severe patients (registered displaced persons), this can still be made to nearest hospital in the same district. These cases should be isolated and monitored at the clinic in shelter while waiting for referral. According to chief of district, referral cannot be done across district, unless necessary. As for undocumented migrants, no access can be granted in any areas.

PPE stockpile at the camps is low, available only for staff. Ministry of Interior issued a letter to Ministry of Public Health asking for support of surgical masks (15,000 pieces for 9 camps for 8 months), waiting for consideration.

**Camp pass request during emergency**

OCDP office advised that the request should be submitted to both OCDP Bangkok office and Provincial Communicable Disease Committee, as authorization has been decentralized to provincial level. Discussion about ways to expedite camp pass request was concluded that Division of Health Administration would facilitate with Ministry of Interior and Tak PHO would refer to Tak Governor (as Governor is secretariat for Provincial Communicable Disease Committee).

\*Of note: There was a comment from participant in Skype about the possibility of having camp pass that covers the period of emergency situation in addition to camp pass for each visit.

\* Maesot Hospital asked NGO to reduce number of referral (children cases) from camps due to high workload at the hospital. IRC has been trying to do so, by referring only emergency cases and refer to other hospitals (such as Maeramad Hospital).

**Surveillance**

Regarding the current case definitions for Patients Under Investigations (PUI) for COVID-19 guidelines from Department of Disease Control, all travelers (from Bangkok Metropolitan Region and Myanmar) arrive at Maesot area will need to be quarantined for 14 days. However, all points of entry (POE) in Maesot have been shut down, except airport. AOT Airports app is used as a mean to keep track of all travelers who arrive by plane. However, for health care workers, 14-day quarantine may not be required, but screening procedure is still needed (body temperature scan, asked for history of risk factors). As for camp residents who went back to Myanmar and wanted to return to camp, they will not be able to do so because all official POE have been shut down. If they try to return through unofficial gates, it will be considered illegal and penalized by Ministry of Interior.

The current guidelines for disease surveillance in camps (not including COVID-19) contains case definitions that are similar to COVID-19 which are ‘severe atypical pneumonia’ and ‘severe case/death of unknown etiology from any suspected infectious cause’. These can be adapted for use in camp setting and will be further discussed among relevant agencies.

**Reporting of PUI**

In case that clusters of patients (>3 for healthcare workers or >5 for non-health care workers) are detected at the same place in the camp with acute respiratory tract infections with negative rapid tests or PCR influenza results, this incidence should be reported as usual (through Weekly OAF). COVID-19 may be performed for some cases. This will be discussed further among relevant agencies.

Report of any confirmed COVID-19 cases and PUIs must be made by following existing CCSDPT system (Weekly Outbreak Alert Form, OAF) where cases of dangerous diseases are needed to be reported within 24 hours.

**Laboratory Testing**

All PUI (in Tak Province) will be tested by sending specimens to Regional Medical Science Center 2 Phitsanulok. Additionally, SMRU offers laboratory testing support for displaced person in camps but need to discuss in detail with health NGO. SMRU has been certified by MOPH’s Department of Medical Science for RT-PCR COVID-19 tests. IOM is upgrading its laboratory to be able to perform COVID-19 test (using GeneXpert), in progress to be certified and should be ready for services around September 2020.

Currently, unlike in Bangkok Metropolitan Region, asymptomatic close contacts with high risk are not needed to be tested in Tak. Only symptomatic PUIs are tested. For Maela camp, IRC should consult with Thasongyang Hospital whether the patients meet PUI criteria. Lab test may be performed at Office of Disease Prevention Control (ODPC) where sample ID number must be generated (for national database record) or at SMRU where ODPC is not involved.

**Care Provision**

PUIs & patients presenting with ILI symptoms will be immediately isolated in the camps. Severe cases will be referred to nearest government hospital. Asymptomatic close contacts will be also isolated for 14 days. Lab test can be considered for some cases. Specimen collection can be performed in camp in an appropriate area with good ventilation, without transportation of patients to hospital. NGO (Maela camp) should consult with Tha Song Yang hospital about staff to collect specimens. At this moment, Maesot hospital still has capacity (negative pressure rooms) to receive patients (both Thai and non-Thai) as there has not been many PUIs in the area. Treatment guidelines are also available. All needed data are uploaded to the same Department of Disease Control’s database platform.

**Payment of medical fee**

MOPH has issued a letter stating payment of medical fees and testing for patients with laboratory confirmed COVID-19 will be covered for non-Thai citizens, which includes displaced persons, however, it is unclear about cases whose lab result are negative. This issue is to be verified by Provincial Health Office as well as Maesot Hospital. The medical fee can be reimbursed through any health insurance package migrants has obtained. However, it is still uncertain for undocumented migrants (including displaced person). Division of Health Administration will also bring this issue to consult with MOPH’s Deputy Permanent Secretary and Division of Health Economics and Health Security.

Maetao clinic informs that isolation/quarantine areas have been prepared at the clinic but still lack of medicines for treatment. Maesot hospital acknowledges the request and will deliver this message to executives for support.

(The meeting was concluded at this point as the connection for video teleconference was terminated at MOPH at 4 PM. Members on Skype are asked to send questions and recommendations via emails to Barbara Knust or Nuttapong Wongjindanon.)