

4 ALBERT EMBANKMENT
LONDON SE1 7SR
Telephone: +44 (0)20 7735 7611 Fax: +44 (0)20 7587 3210

Circular Letter No.4204/Add.26/Rev.1
19 May 2021

To: All IMO Member States
United Nations and specialized agencies
Intergovernmental organizations
Non-governmental organizations in consultative status with IMO

Subject: **Coronavirus (COVID-19) – Guidance on the gradual and safe
resumption of operations of cruise ships in the European Union in
relation to the COVID-19 pandemic**

The Secretary-General has received an updated version of the *Guidance on the gradual and safe resumption of operations of cruise ships in the European Union in relation to the COVID-19 pandemic*, jointly developed by the European Maritime Safety Agency (EMSA) and the European Centre for Disease Prevention and Control (ECDC), to facilitate the gradual restart of cruise ship operations, which are seriously affected by the pandemic.

The objective of the Guidance is to facilitate a safe restart of operations of cruise ships in the European Union by recommending minimum measures expected to be implemented by all those concerned, while maintaining general safety and security standards.

Member States and international organizations are invited to utilize the Guidance as they see fit and circulate it to all interested parties, as deemed appropriate.

ANNEX

European Maritime Safety Agency



COVID-19: EU Guidance

for Cruise Ship Operations

Guidance on the gradual and safe resumption of operations of cruise ships in the European Union in relation to the COVID-19 pandemic

Date: 12 May 2021 (Revision 1)



Table of Contents

Introduction	6
Part I: Guidance for the development of a COVID-19 Company and Ship Management Plan	8
1. Risk assessment	8
2. Responsibilities in relation to COVID-19 matters	8
3. Resources and personnel needed	8
4. Shipboard operations	9
4.1 Reference documents	9
4.2 Review of shipboard operations	10
4.2.1 Information and communication	11
4.2.2 Ensuring physical distance	11
4.2.3 Hand hygiene	11
4.2.4 Vaccination	11
4.2.5 Health screening	12
4.2.6 Testing capabilities on board	12
4.2.7 Use of personal protective equipment	12
4.2.8 Cleaning and disinfection	13
4.2.9 Persons going ashore and re-embarking	13
4.2.10 Spaces with special consideration	13
4.2.11 Safety, environment and security related emergency procedures	13
4.2.12 Waste management	13
4.2.13 Heating, Ventilation and Air Conditioning systems (HVAC)	13
4.2.14 Handling of visitors, pilot, etc.	14
5. Response to a COVID-19 outbreak	14
5.1 Reference documents	14
5.2 COVID-19 response elements to be considered	14
5.3 Training and drills for COVID-19 outbreak response	15
6. Reports and Analysis	15
7. Maintenance	16
8. Documentation	16
9. Company verification, review and evaluation	16
10. External verification	16
10.1 Reference documents	16
10.2 Verification	16
10.3 Certification and Qualifications	16
11. Protection of communities visited by the ship	17
Part II: Guidance for the development of a COVID-19 Port Management Plan	18
1. Member State multi-disciplinary teams and contact points	18
2. COVID-19 Port Management Plan	18

2.1	Reference documents	18
2.2	Development of the Port Management Plan	19
2.2.1	Duties and authorities	19
2.2.2	Minimum conditions to receive cruise ships.....	19
2.2.3	Passenger terminal arrangements.....	19
2.2.3.1	Embarkation.....	19
2.2.3.2	Disembarkation.....	20
2.2.4	Persons/entities authorised to visit the ship and protection measures.....	20
2.3	Contingency in case of COVID-19 outbreak	20
2.4	Port authorisation	21
2.5	Authorisation to receive a cruise ship	21
2.6	Other considerations	21
Part III: Guidance for coordination between cruise ships and ports in relation to COVID-19 matters		22
1. Voyage planning stage		22
2. Reporting requirements.....		23
2.1	Ship to shore	23
2.1.1	Arrival	23
2.1.2	Departure	24
2.2	Shore to ship	24
3. Disembarking persons with possible, probable or confirmed COVID-19 infections		24
3.1	Reference documents	24
3.2	Disembarking of possible, probable or confirmed cases of COVID-19.....	24
4. Repatriation.....		25
4.1	Reference documents	25
4.2	Repatriation of persons	25
4.3	Changes of crew	25
Annex 1 - Scientific evidence and additional considerations on COVID-19.....		27

Document revision history

Revision	Revision description	Publication date
0	- First publication.	27 July 2020
1	<ul style="list-style-type: none">- Introduction to the revision 1 added;- The health authority of the port visited as key stakeholder to refer to added in Part I 1;- Reference to training material resources provided by EU Healthy Gateways Joint Action added in Part I 3 and Part II 2.2.1;- High population density as a risk factor added in Part I 4.2;- Stricter recommendation regarding the use of mask added in Part I 4.2.2;- Recommendation on vaccination added in Part I 4.2.4;- Stricter health screening requirements added in Part I 4.2.5;- Reference to environmental and security procedures in Part I 4.2.11;- Procedure for going back to operation after an outbreak episode on board added in Part I 5.2;- Observation of drills and other elements included in verification in Part I 10.2;- Reference to Healthy Gateways Tool for contingency plan development and assessment for ports added in Part II 2.1 and 2.3;- Reference to recommended vaccination of persons visiting the ship included in Part II 2.2.4;- Guidance for COVID-19 quarantine and testing for travellers by ECDC referred in Part II 2.3 and in Table;- Proposal to carry out drills to test some key procedures introduced in Part II 2.3;- Possibility of common frameworks to develop Port Management Plans per cruise area introduced in Part II 2.6;- Additional elements and defining a single point of contact for coordination between cruise ship and Port added in Part III;- Provision for an Agreement with Port and Local Health Authorities added in Part III;- Annex 1 revised, now shown as a list of all relevant and most updated ECDC guidance documents;- References to external publications updated through the document;- Other minor changes and corrections introduced throughout the document.	12 May 2021

Glossary of terms, abbreviations and acronyms

CLIA Europe	European representation of the Cruise Lines International Association (CLIA)
Company	Owner of the ship or any other organisation or person, such as the Manager or the bareboat Charterer, who has assumed responsibility for the operation of the ship from the Shipowner and who, on assuming such responsibility, has also agreed to take over all the duties and responsibilities on health issues
COVID-19	Disease caused by a new coronavirus. This has also been referred as '2019 novel coronavirus' or '2019-nCoV'
Cruise ship	A passenger ship providing voyages for pleasure and normally visiting several ports or anchorages
DG MOVE	Commission's Directorate-General for Mobility and Transport
Directive 2002/59/EU	Directive 2002/59/EU of the European Parliament and of the Council of 27 June 2002 establishing a Community vessel traffic monitoring and information system
Directive 2009/45/EU	Directive 2009/45/EU of the European Parliament and of the Council of 6 May 2009 on safety rules and standards for passenger ships
Directive 2010/65/EU	Directive 2010/65/EU of the European Parliament and of the Council of 20 October 2010 on reporting formalities for ships arriving in and/or departing from ports of the Member States
ECDC	European Centre for Disease Prevention and Control
ECSA	The European Community of Shipowners' Associations
EEA	European Economic Area
EMSA	European Maritime Safety Agency
ESPO	The European Sea Ports Organisation
ETF	European Transport Workers' Federation
EU	European Union
EU Healthy Gateways Joint Action	EU Funded Joint Action Consortium for projects under the Health Programme.
IMO	International Maritime Organization (body of the United Nations)
Interferry	Ferry industry world-wide shipping association
MDH	Maritime Declaration of Health according to the International Health Regulations (IHR) (2005)
NSW	National Single Window as per Directive 2010/65/EU
OSHA	European Union information agency for occupational health and safety
Passenger ship	A ship carrying more than 12 passengers
PPE	Personal Protective Equipment. It refers to items used to protect the health and safety of workers. In this document it also applies for face masks worn by passengers
PSC	Port State Control
RO	Recognised Organisation
Ro-ro passenger ship	A passenger ship to transport passengers and vehicles on a regular basis following a pre-defined route
WHO	World Health Organization

Publication of revision 1

Following the first publication of the COVID-19: EU Guidance on Cruise Ship Operations in July 2020, this limited update takes into account the lessons learned so far from dealing with the COVID-19 pandemic. The update is based on the medical and scientific progress made in addressing the COVID-19 pandemic, mainly in the field of testing and vaccination. It takes into account new recommendations, guidance and relevant documents which have been published since July 2020, e.g. by the IMO and the EU Healthy Gateways Joint Action. This revision is also based on the feedback received from relevant stakeholders.

Annex 1 has been updated with a list of all relevant and most recent ECDC guidance documents.

EMSA and the ECDC would like to express their gratitude to the organisations who have participated actively during the revision of this guidance document.

Introduction¹

The coronavirus disease 2019 (COVID-19) pandemic has heavily affected cruise operations in the EU and globally. The restart of this important economic and employment activity will be gradual. Cruise operators need to ensure that cruises do not pose unacceptable health risks to passengers, staff and the general public, in particular when compared to other types of package holiday.

The objective of this Guidance is to facilitate a safe re-start of operations of cruise ships in the EU, by recommending minimum measures expected to be implemented by all those concerned, while maintaining general safety and security standards. This Guidance is meant for EU/EEA flagged ships engaged in international voyages and for ships calling at an EU/EEA port irrespective of flag.

The safe operation of any cruise ship normally requires the involvement of several parties, namely the company managing the ship, the ship's master and crew, the ports and terminals where the ship will berth/anchor, the State of which flag the ship flies (Flag State) and the States that the ship visits (Port State), which could be a port or an anchorage. In general, the Flag State is responsible for determining what happens on board the ship and Port State is responsible for determining the requirements to be applied by a ship when it enters the territorial waters of that particular State. The cooperation of these main parties concerned is essential to restart (or continue) safe operations and to respond to the challenges posed by the COVID-19 pandemic.

This Guidance is divided in three parts and follows a goal-based approach, suggesting for each part the topics to be addressed by the parties involved. The first part of this Guidance addresses the ship side and recommends the development of a COVID-19 Company and Ship Management Plan, following a tailor-made risk assessment by the company. Such a plan should propose mitigation measures for implementation, together with the possibility of third-party verification.

The second part recommends the development of a COVID-19 Port Management Plan by each Member State/port/terminal receiving cruise ships, for which a minimum set of measures are also suggested.

The third part puts forward the recommended elements on which the company and the port/terminal receiving the ship should agree, with the purpose of having an agreement in place based on those elements before any voyage takes place. It is also expected that procedures and a cooperative framework are established at the same time in case a COVID-19 outbreak occurs on board.

This Guidance is not intended to provide prescriptive solutions, but rather to assist in addressing the risks identified related to the COVID-19 pandemic. However, it is very important to note the Annex "Scientific evidence and additional considerations on COVID-19" in which the European Centre for Disease Prevention and Control (ECDC) indicates specific measures that are recommended to be followed when developing the respective Plans. In this respect, reference is also made to the Interim advice for restarting cruise ship operations after lifting restrictive measures in response to the COVID-19 pandemic, prepared by the EU Healthy Gateways Joint Action².

This Guidance does not and should not impact any safety or security standard on board a ship.

This Guidance may also be of assistance for Flag States before allowing a cruise ship back into service and for Port States in assessing potential visits of cruise ships.

This Guidance is not intended to replace the verification of specific health measures, which may be required by health authorities. Considering the dynamic situation of the pandemic, it is acknowledged that some of the health advice included in the reference documents will likely be updated. Therefore, it is suggested that the websites of the relevant organisations should be checked regularly for the latest updates. In any case this Guidance is a "living document" and may be updated depending on the evolution of the COVID-19 pandemic, and the experience gained with the implementation of this guidance.

Besides cruise operations, other types of maritime passenger transport also pose a potential health risk on the one hand and have been impacted severely by COVID-19 on the other. There has been a very significant drop in

¹ This is the introduction of the first publication as published on 27 July 2020.

² Latest version at the time of publication of the first revision of this Guidance was 'Advice for restarting cruise ship operations after lifting restrictive measures in response to the COVID-19 pandemic' version 2 April 2021

maritime passenger services (without taking account of cruises) compared to the same period last year. Their restoration is vital for the economy and has also an important social dimension. Ro-ro passenger operations facilitate economic activities directly, by transporting goods and people and by connecting island communities domestically, between EU Member States and with neighbouring countries. Some islands and ferry connections across sea straits are the only "lifeline" and the only means of transportation available. This is the main reason why ferries, albeit at a much lower level of activity, have continued to operate where possible, whilst cruises, as a leisure activity, almost came to a full stop.

The ferry sector has been developing a comprehensive set of guidelines and recommendations, in particular the *COVID-19 Guidance on Reopening Passenger Ferry Services*³ published by Interferry and the *Interim advice for preparedness and response to cases of COVID-19 on board ferries after lifting restrictive measures in response to the COVID-19 pandemic*⁴ prepared by the EU Healthy Gateways Joint Action, which could be used as a reference when preparing a COVID-19 Company and Ship Management Plan for ro-ro passenger ships. The latter is a comprehensive document providing several specific options to be implemented on board, whereas the document from Interferry provides both an overview of all the relevant operational activities to be considered through a flowchart, with associated safeguards suggested for each activity, and a comprehensive list of possible measures to mitigate health risks in relation to passenger ferry services. The developments in this sector will be continuously monitored.

COVID-19 can be transmitted through close contact with infected persons or with surfaces or objects that have been contaminated by the secretions of infected persons. Any activity or situation that involves the gathering of people poses a risk for the transmission of infection. Thus, all forms of transport that bring people into close proximity to each other, particularly in closed/indoor spaces, poses an increased risk of transmission. Such forms of transport include busses, trains, planes and ships. Measures to maintain appropriate physical distancing and avoidance of contact with contaminated surfaces, together with hand and cough hygiene (see Table 1) will decrease the risk of transmission, but some risk will remain.

EMSA and the ECDC would like to express their gratitude to the following organisations who have participated actively during the preparations of this guidance and have contributed to this document:

- European Commission (DG MOVE);
- EU Healthy Gateways Joint Action;
- ETF (European Transport Workers' Federation);
- CLIA Europe (Cruise Lines International Association);
- ECSA (European Community Shipowners' Associations);
- ESPO (European Sea Ports Organisation);
- MEDCRUISE (Association of Mediterranean Cruise Ports).

³ https://interferry.com/wp-content/uploads/2020/05/INTERFERRY_GUIDANCE-ON_MITIGATING_SPREAD_OF_COVID-19.pdf

⁴ https://www.healthygateways.eu/Portals/0/plcdocs/Advice_Passenger_Ferry.pdf?ver=2020-06-25-091223-253

Part I: Guidance for the development of a COVID-19 Company and Ship Management Plan

1. Risk assessment

The first step is for cruise companies to assess all identified risks to their ships, crew, passengers and other persons in relation to COVID-19 and to establish appropriate safeguards. It is recommended that this is developed as a COVID-19 Company and Ship Management Plan.

The company should assess all health risks to passengers in relation to the COVID-19 pandemic, its ships, crews, passengers and the communities visited, and establish appropriate safeguards to reduce the risk to the utmost. This assessment should be properly documented.

In establishing safeguards or implementing mitigating measures in relation to the COVID-19 pandemic, available codes, guidelines and standards regarding COVID-19 should be taken into consideration. This includes in particular, relevant Flag State, International Maritime Organization (IMO), World Health Organization (WHO) and other EU COVID-19 related documents, in particular guidance from the European Centre for Disease Prevention and Control (ECDC)⁵ and EU Healthy Gateways⁶, as found relevant and applicable. However, it is important to note that the health authority responsible for the port visited is the interlocutor for any health-related issue⁷.

The measures taken should give special consideration to persons with special needs.

The following points provide guidance to be considered when developing a COVID-19 Company and Ship Management Plan, also referred to as the "Plan".

2. Responsibilities in relation to COVID-19 matters

Responsibilities of the company/ship and of relevant personnel for any duty in relation to COVID-19 matters should be defined in the Plan.

It is recommended that each company nominates overall coordinator(s) for this Plan and contact person(s) responsible for dealing with COVID-19 matters both on board and ashore. These persons should be responsible for the implementation of the Plan and act as a contact point for the relevant authorities.

3. Resources and personnel needed

The company should ensure that adequate resources are available to implement all aspects of the Plan, including appropriate and sufficient medical staff and facilities.

The company should define, implement and continuously monitor the training and training requirements for all personnel included in the Plan. EU Healthy Gateways Joint Action has a dedicated web page providing training resources for COVID-19⁸.

The company should establish procedures to ensure that new crew members and crew transferred to new assignments related to the Plan are given specific training to familiarise them with their duties prior to taking up functions.

The company should establish and maintain procedures for identifying any training needs which may be required in the implementation of the Plan and ensure that such training is provided for all crew concerned. This should include

⁵ <https://www.ecdc.europa.eu/en/covid-19/all-reports-covid-19>

⁶ <https://www.healthygateways.eu/>

⁷ The site [Re-open EU \(europa.eu\)](https://www.europa.eu) and its associated mobile apps provide an overview of the health situation in European countries, based on data from the European Centre for Disease Prevention and Control (ECDC).

⁸ <https://www.healthygateways.eu/Novel-coronavirus#Training>

training of all crew members on the use of personal protective equipment (PPE) and the hygiene measures in place. Crew who are required, due to the nature of their work, to have a high level of interaction with others (e.g. for cleaning, security checks, etc) should receive specific guidance and training. The company should ensure that crew undertaking additional responsibilities as a result of the Plan are given adequate time in which to perform their additional tasks without detriment to their regular tasks or rest periods since this may impact on the general safety of the ship.

The company should establish procedures to ensure that the relevant information on the Plan is provided to the crew in their own language and/or the working language of the ship.

The company should ensure that the crew is able to communicate effectively in the execution of their duties related to the Plan.

4. Shipboard operations

4.1 Reference documents

The following documents should be consulted as they are of particular relevance:

- IMO Circular Letter No.4204/Add.27 (26 August 2020) - Coronavirus (COVID 19) – Protocols to mitigate the risks of cases on board ships⁹;
- IMO Circular Letter No.4204/Add.16 (6 May 2020) - Coronavirus (COVID 19) – COVID-19 related guidelines for ensuring a safe shipboard interface between ship and shore-based personnel⁹;
- IMO Circular Letter No.4204/Add.15 (6 May 2020) - Coronavirus (COVID 19) - Personal protective equipment⁹;
- IMO Circular Letter No.4204/Add.14/Rev.1 (5 October 2020) - Coronavirus (COVID-19) – Recommended framework of protocols for ensuring safe ship crew changes and travel during the coronavirus (COVID-19) pandemic⁹;
- IMO Circular Letter No.4204/Add.4/Rev.2 (9 October 2020) contains ICS Coronavirus (COVID-19) Guidance for ship operators for the protection of the health of seafarers⁹;
- IMO Circular Letter No.4204/Add.3 (2 March 2020) - Operational considerations for managing COVID-19 cases/outbreak on board ships⁹;
- Communication from the Commission, COVID-19: Guidelines on the progressive restoration of transport services and connectivity (13 May 2020, C(2020) 3139 final)¹⁰;
- Communication from the Commission, Guidelines on protection of health, repatriation and travel arrangements for seafarers, passengers and other persons on board ships. (8 April 2020, C(2020) 3100 final)¹¹;
- Interim advice for preparedness and response to cases of COVID-19 at points of entry in the European Union (EU)/EEA Member States (MS) , Healthy Gateways Joint Action¹²;
- Commission Recommendation (EU) 2020/1595 of 28 October 2020 on COVID-19 testing strategies, including the use of rapid antigen tests (C/2020/7502);
- Communication from the Commission to the European Parliament, the European Council and the Council: A common path to safe and sustained re-opening (17.3.2021 COM(2021) 129 final);
- EU-OSHA: Healthy Workplaces Stop the Pandemic¹³;
- EU-OSHA-WIKI¹⁴;
- Advice for restarting cruise ship operations after lifting restrictive measures in response to the COVID-19 pandemic¹⁵;
- Who, Where, How/ Overview of Personal Protective Equipment (PPE) recommended for staff at points of entry and Crew on board conveyances in the context of COVID-19, Healthy Gateways Joint Action, 7 March 2020¹⁶;

⁹ These IMO circulars are available in <https://www.imo.org/en/MediaCentre/HotTopics/Pages/Coronavirus.aspx> under the heading 'Advice for IMO Member States, seafarers and shipping'

¹⁰ https://ec.europa.eu/info/sites/info/files/communication_transportservices.pdf

¹¹ <https://ec.europa.eu/transport/sites/transport/files/legislation/c20203100.pdf>

¹² <https://www.healthygateways.eu/Novel-coronavirus>

¹³ https://osha.europa.eu/en/themes/covid-19-resources-workplace#pk_campaign=ban_homecv

¹⁴ http://oshwiki.eu/wiki/Main_Page

¹⁵ [https://www.healthygateways.eu/Portals/0/plcdocs/EU_HEALTHY_GATEWAYS_COVID-](https://www.healthygateways.eu/Portals/0/plcdocs/EU_HEALTHY_GATEWAYS_COVID-19_RESTARTING_CRUISES_2021_30_4_2021.pdf?ver=2021-04-30-102640-827)

19_RESTARTING_CRUISES_2021_30_4_2021.pdf?ver=2021-04-30-102640-827

¹⁶ https://www.healthygateways.eu/Portals/0/plcdocs/EUHG_PPE_Overview_07_03_2020.pdf?ver=2020-03-10-161517-680

- Interim advice for preparedness and response to cases of COVID-19 at points of entry in the European Union (EU)/European Economic Area Member States (MS) Suggested procedures for cleaning and disinfection of ships during the COVID-19 pandemic, Healthy Gateways Joint Action, Version 2, 20 April 2020¹⁷;
- ECDC webpage for COVID-19¹⁸;
- ECDC main Rapid Risk Assessment webpage (COVID-19 pandemic page)¹⁹;
- ECDC 'Contact tracing: public health management of persons, including healthcare workers, who have had contact with COVID-19 cases in the European Union – third update'²⁰;
- ECDC 'Disinfection of environments in healthcare and non-healthcare settings potentially contaminated with SARS-CoV-2'²¹;
- ECDC 'Heating, ventilation and air-conditioning systems in the context of COVID-19: first update'²²;
- ECDC 'Guidance for wearing and removing personal protective equipment in healthcare settings for the care of patients with suspected or confirmed COVID-19'²³;
- ECDC 'Considerations related to the safe handling of bodies of deceased persons with suspected or confirmed COVID-19'²⁴;
- WHO 'Operational considerations for managing COVID-19 cases or outbreaks on board ships: interim guidance'²⁵.

4.2 Review of shipboard operations

The specific shipboard operations related to COVID-19 should be included in the Plan. Accordingly, the company should review its procedures, plans and instructions, including checklists as appropriate, for all shipboard operations that may bear a risk of or be impacted by a COVID-19 infection, with a view to reducing risk as reasonably practical. It is advised to use as a reference the documents listed in section 4.1 above (reference documents). It is important that passengers and crew comply with the measures in place and that there is an enforcement protocol on board the ship.

The density of the cruise ship populations together with the duration of time spent on board by passengers and crew are both contributing risk factors to the transmission of COVID-19²⁶. The company should assess the maximum number of passengers and crew that can be carried on board to be able to fully and effectively implement all the required health-related safety measures (e.g. safe use of common spaces, etc.). That number should be reviewed regularly to ensure continued compliance with the latest relevant measures. Specific procedures should be implemented to effectively control the level of occupancy, specially in large public areas/spaces.

Crew members often live and work in close proximity with others, including working in confined spaces and sharing their accommodations. This factor should be specifically considered and addressed by the company when developing its protocols. As a matter of principle, the same level of protection should be provided to all persons on board, regardless of whether they are passengers, crew members or visitors.

The following points are a non-exhaustive list of subjects that should be considered when including the shipboard operations in the Plan.

¹⁷ https://www.healthygateways.eu/Portals/0/plcdocs/EU_HEALTHY_GATEWAYS_COVID-19_Cleaning_Disinfection_ships_09_4_2020_F.pdf?ver=2020-04-09-124859-237

¹⁸ <https://www.ecdc.europa.eu/en/covid-19/latest-evidence>

¹⁹ <https://www.ecdc.europa.eu/en/covid-19-pandemic>

²⁰ <https://www.ecdc.europa.eu/en/covid-19-contact-tracing-public-health-management>

²¹ <https://www.ecdc.europa.eu/en/publications-data/disinfection-environments-covid-19>

²² <https://www.ecdc.europa.eu/en/publications-data/heating-ventilation-air-conditioning-systems-covid-19>

²³ <https://www.ecdc.europa.eu/sites/default/files/documents/COVID-19-guidance-wearing-and-removing-personal-protective-equipment-healthcare-settings-updated.pdf>

²⁴ <https://www.ecdc.europa.eu/sites/default/files/documents/COVID-19-safe-handling-of-bodies-or-persons-dying-from-COVID19.pdf>

²⁵ <https://www.who.int/publications/item/operational-considerations-for-managing-covid-19-cases-or-outbreaks-on-board-ships-interim-guidance>

²⁶ *Journal of Travel Medicine*, Volume 27, Issue 3, April 2020, article by J Rocklöv, PhD (available in <https://academic.oup.com/itm/article/27/3/taaa030/5766334>)

4.2.1 Information and communication

It is recommended that companies review the occasions and places where relevant information should be provided, from pre-boarding to disembarkation. The way in which the information is communicated should also be reviewed and preferably be in a digital format.

It is recommended that the information should cover aspects related to the prevention measures adopted, the health screening processes in place and protocols related to repatriation and disembarkation in case of an outbreak.

Each space on board should be considered in terms of the information to be displayed, including for example, details on physical distancing, maximum capacity and the PPE required.

The information provided should also include the measures to be applied when communities are being visited.

4.2.2 Ensuring physical distance

It is recommended that companies establish a minimum physical distance to be respected considering the advice and instructions from ECDC, flag and port administrations. In doing so, a precautionary approach should be taken. The Plan should consider all expected situations/events where queues or contact amongst persons could occur and should also contain appropriate measures that will be implemented to ensure that the physical distance is maintained, and overcrowding is prevented or at least reduced. In this regard, it is important to maintain consistency of the physical distance recommendations in the different areas of the ship. The use of floor markings indicating the recommended physical distance could help passengers and to maintain physical distance. Wherever staff members interact with passengers at fixed locations, protective barriers could be considered to facilitate safe interaction. If possible, removing or relocating furniture items can decrease over-crowding.

Companies should consider, for each space or category of spaces, as well as for the whole ship, whether the maximum capacity of persons should be reviewed to ensure that the applicable physical distance can be maintained.

In case different standards are used by the port of call and the ship (based on Flag State requirements) it is recommended that a single distance is agreed in the arrangement between the port and the ship (flag).

When physical distance cannot be guaranteed and in any indoor area, regardless of physical distancing measures, the use of a face mask is recommended as a means of source control to reduce droplet spreading.

4.2.3 Hand hygiene

The frequent and meticulous hand hygiene by washing with water and soap or by using an alcohol-based hand-rub solution can contribute to mitigate the risk of COVID-19 transmission.

Easy access to hand washing facilities or alcohol-based hand rub solutions, and health promotion material (e.g. posters, videos, etc.) that promote the importance of hand hygiene and explain how to perform effective hand hygiene should be available in different areas of the ship. The plan should include the availability of alcohol-based hand disinfectant dispensers, or similar, in the spaces where persons are expected to be present, e.g., entrances in general, security screening areas, restaurants, lifts, corridors, cabins, sanitary spaces, working spaces, changing rooms etc. and to promote their use.

4.2.4 Vaccination

Vaccination of crew members²⁷ and of passengers joining the ship is recommended as soon as this is feasible²⁸.

²⁷ See IMO Circular Letter No.4204/Add.38 (Joint Statement calling on all Governments to prioritize COVID-19 vaccination for seafarers and aircrew)

²⁸ See also: COM(2020) 245 final (EU Strategy for COVID-19 vaccines) and COM(2021) 129 final (A common path to safe and sustained re-opening)

In relation to vaccination, on 17 March 2021 the European Commission proposed to create a 'Digital Green Certificate' to facilitate safe free movement inside the EU during the COVID-19 pandemic²⁹. The 'Digital Green Certificate' is designed as a proof that a person has been vaccinated against COVID-19, received a negative test result or recovered from COVID-19.

As per current recommendation from ECDC³⁰, vaccinated individuals still need to follow the public health measures that apply to everyone else.

4.2.5 Health screening

Health screening protocols should be established based on the reference documents, such as the pre-embarkation COVID-19 questionnaire included in Annex 1 of the Annex in IMO Circular Letter No.4204/Add.3 (2 March 2020)- *Operational considerations for managing COVID-19 cases/outbreak on board ships*. The company should closely monitor the latest information on effective health screening methods provided by institutions, such as the European Commission, the Flag State, the national authorities in the countries to be visited, the ECDC, IMO and WHO. Health screening protocols should be non-discriminatory.

Accordingly, it is recommended that companies review the occasions and places where health screening should be carried out, from the pre-boarding area to disembarkation, including re-embarkation following an excursion, tour, visit, etc.

Any person first joining the ship (crew member starting a new contract or passengers starting a cruise) should be subject to the protocols established by the company policy and the requirements of the relevant Health, Port and Flag authorities. The possibility to regularly carry out sample health screening of crew and passengers during the time they are on board may also be considered.

Special consideration should be given to the early identification of persons falling within a risk group and the associated measures to be taken in such cases.

Finally, it is recommended that a health monitoring system is established on board and the associated reporting and logging of health-related issues and measures is implemented.

4.2.6 Testing capabilities on board

Testing capabilities and a testing policy on board should be defined and implemented in agreement with the Flag and local Health authorities of the ports visited.

The limitations in testing capabilities on board should be adequately compensated with agreements with testing laboratories onshore providing an acceptable time frame for obtaining the results.

The type and frequency of the tests should be established in accordance with the latest recommendations by the national health authorities and with due consideration of the actual status of the pandemic and infection rates at the moment of the cruise. It is important that the companies ensure that their protocols are based on the latest reliable and available testing methods.

4.2.7 Use of personal protective equipment

The type of and the occasions when PPE should be used has to be considered in the Plan based on the reference documents. Accordingly, it is recommended that the companies review the occasions and places where the use of PPE is needed, for the protection of both crew and passengers, and define the appropriate type and certification where relevant.

The PPE to be used in the passenger terminal should be coordinated with the relevant Port State authority/entity.

²⁹ <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX:52021PC0130>

³⁰ 'Questions and answers on COVID-19: Vaccines' on ECDC's website.

It is recommended that companies define what is a sufficient stock of PPE and ensure that it is carried on board, based on their risk assessment, the Plan (including the contingency part), the duration of the voyage and the number of persons on board.

4.2.8 Cleaning and disinfection

Companies should review their policy about cleaning and disinfection based on the reference documents. It is recommended that the plan defines for each space of the ship, or space category, the frequency of cleaning and disinfection and the appropriate products and techniques to be used based on its intended use, occupation rate, surface material, furniture, etc.

Special consideration should be given to those spaces, objects and furniture, etc. that can be used/touched by several persons, e.g., public sanitary spaces.

The number of persons dedicated to cleaning and disinfection should be carefully considered based on these factors, as well as their resting times and the increased frequency of cleaning and disinfection. The protection of these crew members should be given special attention, e.g. by specific training and by using the correct PPE.

It is recommended that companies consider the stock of cleaning and disinfection products needed to be carried on board based on the review made.

4.2.9 Persons going ashore and re-embarking

It is recommended that the Plan gives special consideration to the strategy and measures to be implemented for persons going ashore and intending to re-embark. Both crew and passengers should be considered. The cruise company should be in contact with the local public health authorities in the relevant ports to obtain up-to-date information on the level of transmission risk and on what local measures are in place and to communicate this to all persons (passengers and crew) disembarking.

4.2.10 Spaces with special consideration

It is recommended that the Plan considers spaces where some of the measures could be more difficult to implement, such as physical distance, or which require special attention, such as the galley. For those spaces, the Plan should establish, where relevant, tailor-made or alternative measures, e.g., additional PPE, to ensure that the risk of transmission is minimised. These considerations may include the (temporary) closing of spaces if the preventive measures in place are found to be either not feasible or insufficient.

4.2.11 Safety, environment and security related emergency procedures

It is recommended that the company reviews the existing safety, environment and security-related emergency procedures and drills in view of the Plan. For example, the procedure to carry out a passenger evacuation drill could be subject to review to ensure that the physical distance is kept. Where relevant, safe manning levels should be reevaluated for carrying out the reviewed emergency procedures.

4.2.12 Waste management

Waste from persons with COVID-19 can be treated as regular waste.

Further guidance is contained in ECDC guidance 'Disinfection of environments in healthcare and non-healthcare settings potentially contaminated with SARS-CoV-2' included in the reference documents.

4.2.13 Heating, Ventilation and Air Conditioning systems (HVAC)

The Plan should consider special measures related to the potential infection through heating, ventilation and air conditioning (HVAC) systems³¹. Regarding the Heating, Ventilation and Air conditioning (HVAC) system, it is recommended that the cruise ship company consults with the manufacturers of the HVAC systems on board

³¹ 'Heating, ventilation and air-conditioning systems in the context of COVID-19: first update', ECDC, at: <https://www.ecdc.europa.eu/en/publications-data/heating-ventilation-air-conditioning-systems-covid-19>

regarding proper maintenance and applying COVID-19 related revisions if needed. These elements may include the frequency of cleaning of HVAC system parts and changing or replacing filters where appropriate to minimise the potential risk of contributing to the spread of small droplets SARS-CoV-2 and increasing the number of air exchanges per hour reducing the risk of transmission in closed spaces. This may be achieved by natural or mechanical ventilation, depending on the setting. Direct air flow should best be diverted away from cruise ship passengers or staff to avoid potential pathogen dispersion from asymptomatic persons. There is currently no scientific evidence that airborne SARS-CoV-2 would be effectively inactivated by means of electrostatic air purifiers. The application of the above guidance could be achieved based on information provided by the manufacturer or, if not available, to seek advice from the manufacturer. All COVID-19 related revisions should be performed in accordance with national and local regulations (e.g. health and safety regulations, technical recommendations of respective national or supranational associations) and be appropriate to local conditions.

4.2.14 Handling of visitors, pilot, etc.

The Plan should consider the occasions where visitors, such as inspectors, pilots or supply contractors, are embarking or having contact with the crew and/or passengers, which should be reduced to a minimum. The reference document IMO Circular Letter No.4204/Add.16 on ensuring good communications for a safe shipboard interface between ship and shore-based personnel includes recommendations on this point.

5. Response to a COVID-19 outbreak

5.1 Reference documents

The following documents are of particular relevance:

- IMO Circular Letter No.4204/Add.4/Rev.2 (9 October 2020) contains ICS Coronavirus (COVID-19) Guidance for ship operators for the protection of the health of seafarers³²;
- IMO Circular Letter No.4204/Add.3 (2 March 2020) - Operational considerations for managing COVID-19 cases/outbreak on board ships³²;
- Healthy Gateways Advice for cruise ship operators for preparedness and response to an outbreak of COVID-19/ Version 4 (April 2021)³³.

5.2 COVID-19 response elements to be considered

Before starting a voyage, cruise ship operators should ensure, with the ports of call along the route, that, if needed, they can make arrangements for passengers and crew members to receive medical treatment and that repatriations and crew changes can be organised.³⁴

In the event that a possible, probable or confirmed case of COVID-19 is identified on board (see ECDC annex for case definitions), the ship should be diverted to the nearest port where testing for SARS-CoV-2 can take place and where local public health authorities can be consulted to further manage the situation including the provision of specialist care, and where necessary, carrying out contact tracing.

The Company should establish procedures to respond to a potential COVID-19 outbreak³⁵ and establish programmes for drills and exercises to prepare for such an outbreak.

It is recommended that the response measures³⁶ should include at least a description of the following:

- Definition of roles, duties and tasks of the crew in case of an outbreak (including medical services, room service, laundry, housekeeping, etc.);

³² These circulars are available in <https://www.imo.org/en/MediaCentre/HotTopics/Pages/Coronavirus.aspx> under the heading 'Advice for IMO Member States, seafarers and shipping'

³³ [Healthy Gateways Advice for ship operators for preparedness and response to the outbreak of COVID-19](#)

³⁴ See COVID-19: Guidelines on the progressive restoration of transport services and connectivity (13 May 2020, C(2020) 3139 final).

³⁵ An outbreak of COVID-19 in a cruise ship setting can be defined as a situation where there is at least one confirmed case COVID-19.

³⁶ For further reference, it is recommended to review the flow chart developed within the framework of the joint action EU Healthy Gateways: https://www.healthygateways.eu/Portals/0/plcdocs/Flow_chart_Ships_3_2_2020.pdf

- An isolation plan including the identification of designated spaces for isolation of possible, probable or confirmed passengers or crew with COVID-19 until disembarkation and transfer to a health care facility, including communicating to the crew their entitlement to paid sick leave in case of infection or quarantine;
- Managing communications between departments (for example, medical, housekeeping, laundry, room service) about persons in isolation or quarantine;
- The public health and clinical management of possible and probable infections while these persons remain on board;
- Relevant information on spaces suitable for isolation, including their identification, the persons authorised to enter, disinfection areas, the designation of persons to be accommodated in this area in case of an outbreak, medical facilities, ventilation and capacity;
- Procedures to collect Passenger/ Crew Locator Forms³⁷;
- Definition of high-risk (close by) exposure and low-risk exposure contacts and how to contact persons with possible infection and how persons with possible infection should be treated (see also Annex 1);
- The measures taken with regard to infected persons on board (including isolation, food service and utensils, laundry and waste management);
- Medical resources³⁸ needed, such as personnel (including qualifications), equipment (including certification), analytical equipment, medicines³⁹ and supplies;
- Testing capabilities;
- Cleaning and disinfecting procedures for potentially contaminated areas including isolation cabins or areas;
- Management of waste that is contaminated or suspected of being contaminated;
- Communication with relevant public health and port authorities regarding possible or probable cases of infection;
- Procedures for disembarking infected persons (medical evacuations);
- Procedures for safe-handling of bodies of deceased persons with suspected or confirmed COVID-19⁴⁰;
- Procedure, in a worst-case scenario, for putting the ship in quarantine and termination of the voyage;
- Procedure for re-starting operations following an outbreak episode on board.

5.3 Training and drills for COVID-19 outbreak response

The crew should be provided with the necessary training to perform their response duties. This should include guidance on how to recognise COVID-19 symptoms and the procedures to be followed in case of an outbreak. The crew should acquaint themselves with their specific roles and responsibilities prior to taking up their duties. In particular, all persons responsible for entering the areas where the possible, probable or confirmed cases are kept in isolation should be trained in terms of following all preventive measures.

Drills should be organised on board of the ship on a regular basis and recorded in the relevant logbook.

6. Reports and Analysis

Procedures should be adopted for reporting non-conformities, accidents, and hazardous situations concerning COVID-19 related matters.

This reporting should include possible, probable or confirmed COVID-19 cases, failures/shortcomings in implementing the Plan and any other hazardous situation in relation to COVID-19 risks.

All non-conformities, accidents, and hazardous situations in COVID-19 related matters should be reported to the company, investigated and analysed with the objective of improving the efficiency of the Plan and to ensure the implementation of any corrective action, which should be no later than the start of the next cruise by the ship and across the company's cruise ship fleet.

³⁷ The EU HEALTHY GATEWAYS joint action prepared a Passenger/Crew Locator Form (for ships) which can be downloaded from their website. An EU application for digital Passenger Locator Forms (dPLF) - air, maritime and ground-crossings sector was under development at the time of publishing this revision.

³⁸ Council Directive 92/29/EEC of 31 March 1992 on the minimum safety and health requirements for improved medical treatment on board vessels; OJ L 113, 30.4.1992, p. 19–36.

³⁹ Communication from the Commission *Guidelines on protection of health, repatriation and travel arrangements for seafarers, passengers and other persons on board ships* C(2020) 3100 of 8 April 2020.

⁴⁰ <https://www.ecdc.europa.eu/sites/default/files/documents/COVID-19-safe-handling-of-bodies-or-persons-dying-from-COVID19.pdf>.

7. Maintenance

The Plan should include a maintenance programme with appropriate actions to ensure a regular review of the relevant COVID-19 related equipment and its proper functioning. The maintenance programme should also consider critical equipment that may require regular testing and consider the availability of stand-by (medical) equipment. Checks and maintenance of the equipment should be recorded.

8. Documentation

All relevant activities related to the execution of the Plan should be appropriately recorded or documented as evidence of implementation. Records should be made available for external verification as required.

9. Company verification, review and evaluation

The Plan should be subject to regular review and internal company auditing based on a risk assessment analysis.

10. External verification

10.1 Reference documents

The following documents are of particular relevance:

- IMO Circular Letter No.4204/Add.16 (6 May 2020) - Coronavirus (COVID 19) – COVID-19 related guidelines for ensuring a safe shipboard interface between ship and shore-based personnel⁴¹;
- IMO Circular Letter No.4204/Add.14/Rev.1 (5 October 2020) - Coronavirus (COVID-19) – Recommended framework of protocols for ensuring safe ship crew changes and travel during the coronavirus (COVID-19) pandemic⁴¹.

10.2 Verification

It is recommended that the COVID-19 Company and Ship Management Plan, with as a minimum the elements contained as indicated above, is independently verified by a third party, in such a way that it offers reassurances to both the Flag State and the Port States. This could be done by using existing safety management standards in shipping⁴². There are other possibilities as well, such as audit/certification by classification societies of company standards implemented on board cruise ships. It should be noted that requesting third party verification is a prerogative of the Flag State.

Any external verification should preferably be done after the cruise company has internally verified that the implementation of all the agreed protocols and measures has been carried out. The external verifier should have access to the relevant records of this internal verification completed by the cruise company, including any non-conformities identified and the associated corrective actions taken. Both internal and external verification should include the observation of drills.

10.3 Certification and Qualifications

Due to the specific nature of COVID-19 related issues, special consideration should be given to the specific qualifications required to perform a verification to confirm that appropriate safeguards in relation to COVID-19 risks have been implemented.

⁴¹ These circulars are available in <https://www.imo.org/en/MediaCentre/HotTopics/Pages/Coronavirus.aspx> under the heading 'Advice for IMO Member States, seafarers and shipping'.

⁴² IMO Circular Letter No.4204/Add.16, Annex, paragraph 11.

It is recommended that the verification team consists of external and independent qualified and certified maritime auditors, familiar with cruise ship management, and health care professional(s) who are able to assist in the professional judgement of the measures adopted.

Additionally, all verifiers should have been specifically trained on COVID-19 related matters.

11. Protection of communities visited by the ship

Crew, passengers, and residents of the visited ports should be protected during their interactions. To this end, information should be provided to the disembarking passengers about the local measures required at the visiting ports. Cruise operators should communicate with the Port State to ensure that the appropriate measures are implemented to avoid overcrowding and maintain appropriate physical distancing while passengers or crew disembark and re-board the ship.

Cruise operators should also ensure that any excursion provider, tour operator, and external service providers offer at least the same level of protection as on board the ship, related to physical distancing measures, the use of PPE, and cleaning and disinfection protocols, while also following local health regulations. Any external provider who interacts with passengers such as tour guides should follow relevant cruise line protocols. If tenders or other means of transport are used to move passengers, physical distancing measures and protocols for their frequent cleaning and disinfection should be implemented in line with the procedures performed on board. If tendering services are offered by local companies, local health regulations need to be applied. In those cases, it should be checked whether these measures are equivalent of those taken on board the cruise ship. Cleaning and disinfection of any means of transport used, including tenders should be conducted between each use.

Crew and passengers should be informed before the ship's arrival in each port of call about the measures mentioned above.

Part II: Guidance for the development of a COVID-19 Port Management Plan

It is highly recommended that ports and terminals have their own COVID-19 Port Management Plan⁴³, detailing the key processes and key personnel dealing with the implementation of COVID-19 mitigation measures. The contents of such a plan should be similar to the cruise ship's COVID-19 Company and Ship Management Plan regarding those issues which are also applicable onshore.

In developing this Plan, it is essential that different authorities cooperate to ensure that all the perspectives are covered.

1. Member State multi-disciplinary teams and contact points

To restart operations of cruise ships it is recommended that different authorities within a Member State work together in close cooperation, namely:

- (a) Health authorities, in charge of public health and including occupational health and safety authorities;
- (b) Port State authorities, dealing mainly with the implementation of international legislation on the ships berthing in its ports, from the safety, security and environmental point of view and, in some instances, with other duties, like port reception facilities;
- (c) Port authorities/terminals, dealing with all the logistics related to port operations, both for cargo and passengers;
- (d) For contingency planning purposes: (if applicable) transport/airport, civil protection, home affairs and immigration authorities.

The way in which a COVID-19 Port Management Plan is implemented will differ widely in each Member State. For example, in some States, all the tasks might be concentrated in one authority while for others they can be distributed amongst different authorities.

Irrespective of this, Member States are recommended to create multi-disciplinary teams covering all elements of this port plan to facilitate the coordination and communication with the cruise companies intending to visit their ports. For ease of reference, in this Guidance, the Member States authorities will be denominated "Port State", but this term should be understood as the conjunction of the different authorities: Health, Port State and Port Authorities, including terminal operators where applicable.

It is recommended that each Port State, if not already the case, establishes and publishes contact points which can be used by cruise companies for direct communication with regard to the re-starting of operations in that State. Ideally, there should be a single contact point per Port State who could internally coordinate all the national procedures. Where this is not possible, the contacts should be provided with a brief description of the responsibilities that each contact has.

2. COVID-19 Port Management Plan

2.1 Reference documents

The following documents are of particular relevance:

- IMO Circular Letter No.4204/Add.23 (1 July 2020) - Coronavirus (COVID-19) – Recommendations for port and coastal States on the prompt disembarkation of seafarers for medical care ashore during the COVID-19 pandemic ⁴⁴;

⁴³ Refer to IHR Regulations Annex 1 Part B Core Capacity Requirements for Designated Airports, Ports and Ground Crossings.

⁴⁴ These IMO circulars are available in <https://www.imo.org/en/MediaCentre/HotTopics/Pages/Coronavirus.aspx> under the heading 'Advice for IMO Member States, seafarers and shipping'

- IMO Circular Letter No.4204/Add.35/Rev.6 (21 April 2021)- Coronavirus (COVID-19) – Designation of seafarers as key workers⁴⁵;
- IMO Circular Letter No.4204/Add.32 (25 September 2020) - Coronavirus (COVID-19) – ICAO Harmonized guidance on facilitating passenger flights, including repatriation flights, using public health corridors during the COVID-19 pandemic⁴⁵;
- IMO Circular Letter No.4204/Add.17 (21 May 2020) - Coronavirus (COVID 19) – Preparing for post COVID-19 operations: considerations and practicalities for port community systems, single window and other electronic exchange platforms⁴⁵;
- Healthy Gateways 'Tool for contingency plan development and assessment for ports'⁴⁶.

2.2 Development of the Port Management Plan

Port States have in most cases already developed plans on how to deal with maritime traffic during the COVID-19 pandemic. For those States that already have such a plan, it is recommended, however, to review it to ensure that it covers all the elements necessary to safely restart cruise ship operations in their ports.

It is also recommended that this Plan is agreed and shared amongst the different authorities involved (health, Port State and port authority/terminal operator) so that all perspectives are covered. It is also advised to share it with the individual port authorities which could potentially receive cruise ships, so that it could be adapted to local circumstances.

Such plans should also be made available in advance to visiting cruise ships, as suggested in Part III.

This COVID-19 Port Management Plan, when dealing with cruise ships, is recommended to include at least the following elements:

2.2.1 Duties and authorities

The authorities involved in the implementation of the plan should be identified as well as the duties and responsibilities of each of them. Any need of training for the assigned duties should be considered. EU Healthy Gateways Joint Action has a dedicated web page providing training resources for COVID-19.⁴⁷

As indicated above, it is recommended that a single contact point is defined to communicate with the cruise company and the ship for COVID-19 matters. This contact point could then coordinate with the other authorities.

It would be useful to have a 24/7 contact point available for emergencies.

2.2.2 Minimum conditions to receive cruise ships

Measures taken on board the cruise ship are likely part of the conditions to receive a cruise ship. These conditions may include, e.g., the implementation of this Guidance on board the ship, the number of passengers allowed on board or any other relevant consideration. In addition, the conditions under which a cruise ship call could be cancelled, e.g., a COVID-19 outbreak in the port. If the cancellation concerns the actual conditions on board the ship, then the Port State should where possible propose alternative arrangements or mitigating measures before cancelling the call.

2.2.3 Passenger terminal arrangements

2.2.3.1 Embarkation

This part should include all the embarkation arrangements both for crew and passengers. Different aspects should be covered, such as (advance) information and communication, physical distancing, PPE, cleaning and disinfections, health screening, security screening, etc.

⁴⁵ These IMO circulars are available in <https://www.imo.org/en/MediaCentre/HotTopics/Pages/Coronavirus.aspx> under the heading 'Advice for IMO Member States, seafarers and shipping'

⁴⁶ Publication available in <https://www.healthygateways.eu/>

⁴⁷ <https://www.healthygateways.eu/Novel-coronavirus#Training>

The organisation and measures for re-embarkation of persons on board should also be covered.

Measures should cover both people and the handling of luggage.

2.2.3.2 Disembarkation

This part should include all the disembarkation arrangements both for crew and passengers. Different aspects should be tackled, such as information and communication, physical distancing, PPE, cleaning and disinfection, health screening, security screening, etc. In addition, the conditions to allow disembarkation of persons who will return on board should be considered. Special consideration should be given to persons identified as having been exposed to a possible, probable or confirmed COVID-19 case.

2.2.4 Persons/entities authorised to visit the ship and protection measures

The persons/entities authorised to visit the ship, or expected to interact with crew and passengers, e.g., pilots, Port State Control (PSC) inspectors, health inspectors and suppliers should be defined as well as the protection measures for them to go on board the ship. Vaccination of these persons is recommended as soon as this is feasible⁴⁸.

2.3 Contingency in case of COVID-19 outbreak⁴⁹

This part of the Plan should include the measures to be taken in case an outbreak of COVID-19 takes place on board a ship using the port/terminal facilities⁵⁰. On this subject, the publication from Healthy Gateways 'Tool for contingency plan development and assessment for ports' Annex 4 provides a template adapted for COVID-19-specific port emergency contingency plan⁵¹. The following points are suggested to be addressed:

- (a) Testing arrangements for possible and probable cases;
- (b) Capacity of hospitals in the vicinity, including regional or national resources if needed, to accept persons infected with COVID-19;
- (c) Procedures for disembarking possible, probable, confirmed cases of COVID-19 and contact persons for these cases;
- (d) Health assurance communication as part of clearance;
- (e) Protection of local communities;
- (f) Procedures for repatriation;
- (g) Where appropriate, alternative port(s) should be used with more adequate capacities to deal with an outbreak;
- (h) Contact tracing.

If a cruise ship is found to have many confirmed cases of COVID-19 on board and it would be advisable to put the ship in quarantine, a suitable location should be identified where the ship can receive medical and other supplies.

The Guidance for COVID-19 quarantine and testing for travellers by ECDC provides options to EU/EEA countries on quarantine and testing of travellers in the context of the COVID-19 pandemic and the emergence of SARS-CoV-2 variants of concern (VOCs), regardless of the mode of conveyance. The document has been developed to support decision-makers in EU/EEA countries, including public health authorities and transportation authorities, in adopting strategies for quarantining and testing of travellers⁵².

It is advised to perform drills covering different scenarios such as identification of cases in embarkation areas and handling of disembarkation of infected persons to familiarise all parties with established procedures and to assess properly any needs in terms of facilities, personnel, equipment and timing.

⁴⁸ See also: COM(2020) 245 final (EU Strategy for COVID-19 vaccines) and COM(2021) 129 final (A common path to safe and sustained re-opening)

⁴⁹ A confirmed outbreak of COVID-19 is defined as: two or more people with symptoms compatible with COVID-19 infection within 72 hours and at least one confirmed case COVID-19.

⁵⁰ Refer to Annex and IHR Guide for public health emergency contingency planning at designated points of entry

<https://www.who.int/ihr/publications/9789290615668/en/>

⁵¹ Publication available in <https://www.healthygateways.eu/>

⁵² <https://www.ecdc.europa.eu/en/publications-data/guidance-covid-19-quarantine-and-testing-travellers>

2.4 Port authorisation

Based on the points above, it is likely that each port would have to implement different measures adapted to its local circumstances. This part of the plan should establish the procedures to approve such local plans where appropriate.

2.5 Authorisation to receive a cruise ship

The procedure to authorise the visit of a cruise ship should be described. This part should consider how cruise companies should apply to call at a certain port, if necessary, the documentation required, the preliminary verification of the COVID-19 Company and Ship Management Plan and the type of authorisation granted, including possible conditions.

2.6 Other considerations

The COVID-19 Port Plan should also include the health and sanitary measures to be applied when stores are being supplied to cruise ships and when they make use of any port service (e.g. port towage, bunkering).

In addition, the waste reception and handling plan should consider the potential reception and treatment of COVID-19 related waste from visiting ships.

An additional way to achieve a common approach in the ports visited by the cruise ships is for stakeholders to develop voluntary regional frameworks for specific cruise areas (e.g., the Mediterranean or Baltic Sea). In this way, the regional ports could harmonise the COVID-19 Port Management Plans regarding some key points and, ideally, introduce an agreed self-verification scheme for its implementation. The overall objective must still be to harmonize various health protocols rather than developing new regional specific requirements.

Part III: Guidance for coordination between cruise ships and ports in relation to COVID-19 matters

One of the key elements to restart operations of cruise ships is to ensure a safe ship/port interface, inherent to cruise operations, where roles and tasks are well defined, agreed and understood by both parties as well as the associated responsibilities. It is recommended that both the cruise ship and the port designate a single point of contact to facilitate the coordination.

In order to deliver this objective, a number of issues have to be settled in relation to the exchange of information between the Port State authorities and the cruise ship before arrival, including vaccination requirements, health screening and testing requirements for embarking and disembarking, passengers and crew embarking and disembarking arrangements to avoid congregation, local health contacts and reporting requirements while at port, plans to disembark persons with COVID-19 compatible symptoms, quarantine arrangements for contacts, shoreside housing facilities for isolation and quarantine, repatriation arrangements and establishment of protocols for those visiting the ship (port workers, pilots, surveyors, auditors, suppliers, etc.).

It is recommended that both parties share their respective COVID-19 plans well in advance of the ship call, to ensure its interoperability and take, where necessary, additional measures to ensure compatibility.

In addition, Port States should ensure that any special requirements or pre-arrival information required from ships, due to measures introduced in response to COVID-19, are effectively shared and communicated as quickly as possible to cruise ships and all relevant stakeholders such as ships' agents, operators, etc.

The company should have an agreement with the port authorities of the ship's itinerary, subject to the availability of the essential health infrastructure at the destination and with consideration to isolation and quarantine arrangements on board the cruise vessel. It is advised that the agreement is in a written format describing all the detailed arrangements agreed as the need to evacuate individuals to hospital and provision of shore facilities for isolation and quarantine of COVID-19 cases and close contacts.

1. Voyage planning stage

During the voyage planning stage, it is recommended that in good time before the cruise ship arrives at a port of call:

- The company updates the COVID-19 Company and Ship Management Plan, as indicated in Part I;
- The company identifies the contact point(s) in the relevant Port State;
- The company contacts the Port State and informs it of the name and IMO number of the ship, the port(s) it intends to visit, the arrival and departure dates and the company and ship contact points;
- The company shares the COVID-19 Company and Ship Management Plan with the Port State/port authority/terminal;
- The Port State/port authority/terminal shares the COVID-19 Port Management Plan for the relevant port and informs the company about the applicable national/local measures with regard to COVID-19;
- Both parties ensure the interoperability between the two Plans, especially those elements where both parties need to cooperate, such as embarkation, disembarkation, the use of the passenger terminal, re-embarkation after off-ship visits, crew change, repatriation, implementation of the outbreak management plan, testing arrangements, disembarkation of possible, probable or confirmed cases of COVID-19, management of contacts including arrangements for quarantine, reception of COVID-19 infected waste, and any other relevant element;
- Both parties clarify any doubt which may occur, and which may have a negative impact on the interoperability between the two Plans. In such cases it may be necessary to involve the Flag State if deviations are proposed from Flag State requirements;
- Both parties agree on the respective responsibilities and the specific protocols (information, communication, cleaning and disinfection, physical distancing, PPE, etc) to be applied for the elements identified above;
- The Port State confirms whether the specific port has the capacity to provide an appropriate public health emergency response by establishing and maintaining a public health emergency contingency plan

(International Health Regulations 2005, Annex I). This public health emergency contingency plan should also be made available to the visiting cruise ship in advance;

- The Port State confirms whether, in case of a COVID-19 outbreak on board, arrangements are in place to provide medical assistance, for passengers and/or crew, including evacuation to medical facilities ashore, contact tracing by local public health authorities and the management of contacts. These arrangements may include regional or national resources, if appropriate;
- The Port State indicates whether the visit is accepted and, if relevant, indicate the conditions for such acceptance;
- Define and agree with the relevant authority which conditions should be monitored that could lead to a cancellation of the ship call and/or restrictions for disembarkation, including excursions, etc. If a pre-agreed ship call is cancelled, an alternative should be foreseen, where possible;
- The company could indicate whether the purchasing of, e.g., PPE and/or cleaning equipment will be necessary during the visit and, if so, the Port State is recommended to facilitate, where possible and appropriate, such a purchase.

2. Reporting requirements

The following points describe the recommended exchange of information prior to the ship's arrival and upon its departure, between the ship, the agent or ship operator and the Port State within the framework of this Guidance.

2.1 Ship to shore

2.1.1 Arrival

Ship calls at EU ports is a well-established process. Member States have National Single Windows for reporting formalities, including the Maritime Declaration of Health (MDH) ("free pratique").

The notification of ship calls at EU Ports is defined in Directive 2002/59/EU, as amended. In general, the pre-notification period is 24 hours before arrival. However, cruise ship companies are recommended to extend the pre-notification period due to the current circumstances to allow for a better coordination with the port authorities.

Similarly, the MDH is also required to be reported through the National Single Window prior to arriving in a port situated in an EU Member State as specified above in accordance with EU law (Directive 2010/65/EU). It must be reported by the master or any other person duly authorised by the operator of the ship to the competent authority designated by that Member State. Any possible, probable or confirmed case of COVID-19 on board should be communicated without delay. It is recommended that Member States request the ship's master to keep the MDH updated and communicate the following information to the relevant authority four hours before the estimated arrival in each port of call:

- (a) Total number of persons on board (both crew and passengers);
- (b) Number of persons infected with COVID-19 (confirmed cases);
- (c) Number of persons considered as possible or probable cases of COVID-19.

This information can be communicated through the updated MDH via radio/telephone in case of imminent arrival. Providing information between any party should always comply with the data protection rules (GDPR).

The company should facilitate the application of health measures and provide all relevant public health information requested by the competent authority at the port. If it is considered that symptomatic possible or probable case/cases should not remain on board the ship, disembarkation should be conducted as quickly as possible.

Member States receiving information on a possible, probable or confirmed COVID-19 case may share it on a voluntary basis with the Member States along the planned route of the ship and the ship's flag (if an EU Member State) via the SafeSeaNet system. For this, an addendum to the SafeSeaNet Incident Report Guidelines has been agreed in order to provide guidance to Member State Authorities on the best way to exchange information relating to possible, probable, or confirmed cases of COVID-19 infection on board ships, and on the measures taken by the competent authorities in Member States located along the routes taken by the ships concerned. Member States can share this information with other Member States on a voluntary basis using the Incident Report type "Others."

2.1.2 Departure

While the reporting requirements normally include the provision of the crew and passengers lists on departure, it is recommended that Member States request the ship's master or any other person duly authorised by the ship's operator to provide to the competent authority designated by that Member State the list of crew and passengers disembarked in that port. The Passenger and Crew Locator Forms of the crew/passengers disembarked⁵³ should be made available to the Port State at any time, upon request.

2.2 Shore to ship

The Port State should convey to both the ship's operator and the cruise ship information on the applicable safety/hygiene/health measures applicable in the destination port/area as well as the COVID-19 Port Management Plan. The information provided should be updated as soon as the relevant national, regional or local regulations and rules change.

In addition, during the voyage planning stage, the Port State should confirm that the cruise ship call is accepted on that particular date and that the necessary conditions have been established.

At the pre-arrival stage, once the required documentation provided prior to the ship call is verified, the Port State should confirm access to the port, either electronically (e.g., via the NSW) or by other means.

3. Disembarking persons with possible, probable or confirmed COVID-19 infections

3.1 Reference documents

In addition to the Annex 1, the following documents are particularly relevant:

- Communication from the Commission, Guidelines on protection of health, repatriation and travel arrangements for seafarers, passengers and other persons on board ships⁵⁴ (8 April 2020, C(2020) 3100 final);
- Communication from the Commission, COVID-19: Guidelines on the progressive restoration of transport services and connectivity⁵⁵ (13 May 2020, C(2020) 3139 final);
- Operational considerations for managing COVID-19 cases or outbreaks on board ships, Interim Guidance⁵⁶, World Health Organisation, 2 March 2020.

3.2 Disembarking of possible, probable or confirmed cases of COVID-19

In accordance with the International Health Regulations (2005), it is recommended that the officer in charge of the ship immediately informs the competent authority at the next port of call about any possible COVID-19 infections on board. Port States which receive calls by cruise ships in their ports should have the capacity in the port of call itself or a nearby port to provide an appropriate public health emergency response, which is recorded in a continuously maintained public health emergency contingency plan. This plan should be made available to the cruise ship and should include information on contact tracing and management, and the quarantine of contact persons. Port States should develop procedures for disembarking infected passengers or crew who are to be transferred to hospital facilities.

During the disembarkation of persons with possible, probable or confirmed infections, every effort should be made to minimise their exposure to other persons and to avoid environmental contamination. The contacts of these persons should be managed in accordance with the guidance in the Annex 1 (Contact tracing: public health

⁵³ ECDC suggests collecting the data required in the passenger and crew locator form in an electronic way (e.g. via an app) for an easy access and consultation by public health authorities if needed. Paper forms should be avoided. Further references:

<https://www.ecdc.europa.eu/en/publications-data/passenger-locator-data-entry-exit-screening-health-declaration>.

⁵⁴ [https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52020XC0414\(01\)&from=EN](https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52020XC0414(01)&from=EN)

⁵⁵ [https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52020XC0515\(04\)&from=EN](https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52020XC0515(04)&from=EN)

⁵⁶ <https://www.who.int/publications/item/operational-considerations-for-managing-covid-19-cases-or-outbreaks-on-board-ships-interim-guidance>

management of persons, including healthcare workers, who have had contact with COVID-19 cases in the European Union).

Any available medical record, Passenger or Crew Locator Forms or any other relevant information should be provided to the relevant health care personnel onshore.

4. Repatriation

4.1 Reference documents

The following documents are of relevance:

- Communication from the Commission, Guidelines on protection of health, repatriation and travel arrangements for seafarers, passengers and other persons on board ships⁵⁷ (8 April 2020, C(2020)3100 final);
- IMO Circular Letter No.4204/Add.14/Rev.1 (5 October 2020) - Coronavirus (COVID-19) – Recommended framework of protocols for ensuring safe ship crew changes and travel during the coronavirus (COVID-19) pandemic⁵⁸;
- IMO Circular Letter No.4204/Add.32 (25 September 2020) - Coronavirus (COVID-19) – ICAO Harmonized guidance on facilitating passenger flights, including repatriation flights, using public health corridors during the COVID-19 pandemic⁵⁸.

4.2 Repatriation of persons

The primary responsibility for arranging the return of passengers and crew members rests with the cruise ship operator⁵⁹. If a need to repatriate passengers arises, the ship's operator must make the necessary arrangements to this effect. The Flag and Port States should support the cruise ship operator in making the necessary arrangements for repatriation in line with the Guidelines on protection of health, repatriation and travel arrangements for seafarers, passengers and other persons on board ships referred to above. The level of support possible should be specified in the agreed arrangements.

Repatriation should be undertaken as quickly as possible while ensuring good medical infrastructure and transport connections for those persons being repatriated. The arrangements may include facilitating the docking of the ship, the disembarking of passengers, health screening and treatment. Specific attention should be paid to persons with special needs.

For high-exposure contacts, the quarantine arrangements should follow the recommendations made in Annex 1 (Contact tracing: public health management of persons, including healthcare workers, who have had contact with COVID-19 cases in the European Union).

4.3 Changes of crew

In relation to ship crews, it is recommended that Port States and their relevant national authorities should do everything possible to facilitate ship crew changes and the repatriation of seafarers, notwithstanding any restrictions that may continue to apply in response to the COVID-19 pandemic. Access to medical care onshore for crew members in need should also be granted under any circumstance.

⁵⁷ <https://ec.europa.eu/transport/sites/transport/files/legislation/c20203100.pdf>

⁵⁸ These IMO circulars are available in <https://www.imo.org/en/MediaCentre/HotTopics/Pages/Coronavirus.aspx> under the heading 'Advice for IMO Member States, seafarers and shipping'

⁵⁹ A cruise usually fulfils the definition of a 'package' and therefore falls within the scope of Directive (EU) 2015/2302 of the European Parliament and of the Council of 25 November 2015 on package travel and linked travel arrangements. That Directive lays down the obligations of the organiser, including to provide assistance to travellers in difficulty. A cruise organiser shall carry travellers to the port of disembarkation that is provided in the package travel contract. If the carriage (e.g. flight) of the traveller to and from the cruise's port of embarkation/disembarkation is also included in the package, the organiser shall repatriate the traveller to his or her point of origin. Package organisers are required to take out insolvency protection that shall cover repatriation of travellers, if carriage of passengers is included in the package travel contract.

Table 1. Proposed measures to reduce the risk of COVID-19 transmission in the maritime sector per main group of stakeholders. ✓, yes; n/a, not applicable

Measures	Cruise ship operators	Staff	Passengers (incl. visitors)	Port authorities
	During embarking, on board and disembarking			During embarking and disembarking
Provision of standard health promotion information	✓ [†]	n/a	n/a	✓
Specific local risk communication ^{††}	✓	✓	✓ [†]	✓
Implement strategies to avoid overcrowding	✓	✓	n/a	✓
Health screening (incl. thermal screening)*	✓ (if adopted)	✓ (if adopted)	✓ [†]	✓ (if adopted)
Keep physical distancing (at least 1.5 meters and ideally 2 meters)	✓	✓	✓	✓
Respiratory etiquette	✓	✓	✓	✓
Use of face masks (if physical distancing cannot be maintained)	✓	✓	✓	✓
Hand hygiene	✓	✓	✓	✓
Enhanced cleaning	✓	✓	n/a	✓
Waste management	✓	✓	n/a	✓
HVAC ^{**} systems: apply proper maintenance and COVID-19 related revisions if needed	✓	n/a	n/a	✓

[†] prominent display in various formats
^{††} maintain awareness of current specific local risks communicated by health authorities
[‡] pay attention and comply with instructions
^{*} not recommended for implementation, due to the limited evidence for their effectiveness at prevention and control of COVID-19.
^{**} Heating, Ventilation and Air Conditioning
 Note: For consideration on testing and quarantine measures refer to the Guidance for COVID-19 quarantine and testing for travellers prepared by ECDC (<https://www.ecdc.europa.eu/en/publications-data/guidance-covid-19-quarantine-and-testing-travellers>)

Annex 1 - Scientific evidence and additional considerations on COVID-19

For more information and latest evidence on coronaviruses, epidemiology, transmission, clinical characteristics, diagnostic testing and screening, immune response, immunity, vaccine and treatment and transmission in different settings, please visit the page on COVID-19 disease background on [ECDC's website](#).

Detailed epidemiological information based on the laboratory-confirmed cases reported to The European Surveillance System (TESSy) is published in [ECDC's weekly COVID-19 surveillance report](#). [Overview of the epidemiological situation globally and in the EU/EEA countries and the UK](#) is updated weekly at the ECDC website.

It will be important to also consider the emergence of new variants of concern and their impact on transmission, disease severity and need for adapted non-pharmaceutical interventions, included that for travel. More information can be found in the mentioned references here above.

List of relevant ECDC guidance documents where scientific evidence and considerations on COVID-19 are presented below.

Limiting physical inter-personal interactions

Guidelines for the implementation of non-pharmaceutical interventions against COVID-19. Available from: [Guidelines for the implementation of non-pharmaceutical interventions against COVID-19 \(europa.eu\)](#).

Using face masks in the community — Reducing COVID-19 transmission from potentially asymptomatic or pre-symptomatic people through the use of face masks. Available from: [Using face masks in the community - Reducing COVID-19 transmission from potentially asymptomatic or pre-symptomatic people through the use of face masks \(europa.eu\)](#)

Infection prevention and control in the household management of people with suspected or confirmed coronavirus disease (COVID-19). Available from: [Infection prevention and control in the household management of people with suspected or confirmed coronavirus disease \(COVID-19\) \(europa.eu\)](#)

Guidance for discharge and ending of isolation of people with COVID-19. Available from: [Guidance for discharge and ending of isolation of people with COVID-19 \(europa.eu\)](#)

Technical report: Guidance for discharge and ending isolation in the context of widespread community transmission of COVID19 – first update. 8 April 2020. Available from: [Guidance for discharge and ending isolation in the context of widespread community transmission of COVID-19, first update \(europa.eu\)](#)

Technical report: Use of gloves in healthcare and non-healthcare settings in the context of the COVID 19 pandemic. 2 July 2020. Available from: [Use of gloves in healthcare and non-healthcare settings in the context of the COVID 19 pandemic \(europa.eu\)](#)

Communication support

Available from: [All resources on COVID-19 \(europa.eu\)](#)

Video on COVID-19: Do you know how to wear a face mask properly? (long version) 28 August 2020. Available from: [Video on COVID-19: Do you know how to wear a face mask properly? \(long version\) \(europa.eu\)](#)

Video on COVID-19: How to wear your single-use face mask? (short version) 28 August 2020. Available from: [Video on COVID-19: How to wear your single use face mask? \(short version\) \(europa.eu\)](#)

Video on COVID-19: How to wear your re-usable/textile face mask? (short version) 25 August 2020. Available from: [Video on COVID-19: How to wear your re-usable/textile face mask? \(short version\) \(europa.eu\)](#)

Infographic: COVID-19 and cruise ship operations. Available from: [Infographic: COVID-19 and cruise ship operations \(europa.eu\)](#)

Infographic: Non-pharmaceutical measures. 24 Sep 2020. Available from: [Infographic: Non-pharmaceutical measures \(europa.eu\)](#)

Infographic: Using face masks in the community. 14 April 2020.

Poster: Effective hand-washing. 12 March 2020.

Environmental cleaning

Disinfection of environments in healthcare and nonhealthcare settings potentially contaminated with SARS-CoV-2. Available from: [Disinfection of environments in healthcare and non-healthcare settings potentially contaminated with SARS-CoV-2 \(europa.eu\)](#)

Ventilation

Heating, ventilation and air-conditioning systems in the context of COVID-19: first update [Heating, ventilation and air-conditioning systems in the context of COVID-19: first update \(europa.eu\)](#)

Shielding of medically- and sociably-vulnerable populations

Technical report: Guidance on the provision of support for medically- and socially-vulnerable populations in EU/EEA countries and the United Kingdom during the COVID-19 pandemic. 3 July 2020. Available from: [Guidance on the provision of support for medically and socially vulnerable populations in EU/EEA countries and the United Kingdom during the COVID-19 pandemic \(europa.eu\)](#)

Travel-related restrictions

Guidelines for COVID-19 testing and quarantine of air travellers - Addendum to the Aviation Health Safety Protocol. [Guidelines for COVID-19 testing and quarantine of air travellers - Addendum to the Aviation Health Safety Protocol \(europa.eu\)](#)

Technical report: Considerations for travel-related measures to reduce spread of COVID-19 in the EU/EEA. 26 May 2020. Available from: [Considerations for travel-related measures to reduce spread of COVID-19 in the EU/EEA \(europa.eu\)](#)

Considerations relating to passenger locator data, entry and exit screening and health declarations in the context of COVID-19 in the EU/EEA and the UK. Available at: [Considerations relating to passenger locator data, entry and exit screening and health declarations in the context of COVID-19 in the EU/EEA and the UK \(europa.eu\)](#)

ECDC, Infection prevention and control measures for Ebola virus disease: Entry and exit body temperature screening measures. Available from: [Infection prevention and control measures for Ebola virus disease: Entry and exit screening measures \(europa.eu\)](#)

Control transmission and monitor incidence and trends, and assess severity over time

COVID-19 testing strategies and objectives. Available from: [COVID-19 testing strategies and objectives \(europa.eu\)](#)

Contact tracing: public health management of persons, including healthcare workers, who have had contact with COVID-19 cases in the European Union – third update. Available from: [Contact tracing: public health management of persons, including healthcare workers, who have had contact with COVID-19 cases in the European Union – third update \(europa.eu\)](#)

Updated projections of COVID-19 in the EU/EEA and the UK. Available from: [Updated projections of COVID-19 in the EU/EEA and the UK \(europa.eu\)](#)

Strategies for the surveillance of COVID-19. ECDC; [updated 9 April 2020]. Available from: [Strategies for the surveillance of COVID-19 \(europa.eu\)](#)

Methodology for estimating point prevalence of SARS-CoV-2 infection by pooled RT-PCR testing [updated 28 May 2020]. Available from: [Methodology for estimating point prevalence of SARS-CoV-2 infection by pooled RT-PCR testing \(europa.eu\)](#)

Population-wide testing of SARS-CoV-2: country experiences and potential approaches in the EU/EEA and the United Kingdom [updated 19 August 2020]. Available from: [Population-wide testing of SARS-CoV-2: country experiences and potential approaches in the EU/EEA and the United Kingdom \(europa.eu\)](#)

Identify outbreaks in specific settings

European Centre for Disease Prevention and Control (ECDC). COVID-19 clusters and outbreaks in occupational settings in the EU/EEA and the UK [Internet]. ECDC [updated 11 Aug 2020]. Available from: [COVID-19 clusters and outbreaks in occupational settings in the EU/EEA and the UK \(europa.eu\)](#)



European Centre for Disease Prevention and Control (ECDC)

Gustav III:s boulevard 40, 169 73 Solna, Sweden

Phone +46 (0)8 58 60 10 00 / Fax +46 (0)8 58 60 10 01

www.ecdc.europa.eu



European Maritime Safety Agency

Praça Europa 4

1249-206 Lisbon, Portugal

Tel +351 21 1209 200

Fax +351 21 1209 210

emsa.europa.eu

