

INSTITUTION CONTACT TRACING

AIM

1. This section describes the actions that must be undertaken by the institution when it is triggered by MOH to institute contact tracing.

RESPONSIBILITIES

2. When the institution is activated by MOH on a confirmed case(s) of avian influenza, it is responsible to establish all contacts of the case within the institution from 2 days prior to onset of symptoms until isolation in the hospital and report them to MOH for deliberation by the Quarantine Board.
3. Each institution shall have a designated Point of Contact (POC). The POC shall report directly to the institution's senior management. There should be an alternate POC to cover the duties of the POC in his/her absence. The terms of reference of the POC is attached at **Appendix 1**.

CONSTITUENTS OF THE CONTACT TRACING TEAM

4. The recommended composition of the Institutions Contact Tracing Team (ICTT) is as follows: POC who shall be the Team Leader and 6 or more team members.

CONTACT TRACING PROCEDURES

5. Based on the activity map of the case provided by MOH, the institution POC as team leader of the institutional contact tracing team will initiate the following contact tracing procedures:
 - a. Determine the case's activities in the institution. All activities within the institution from 2 days prior to onset of symptoms until isolation at a hospital must be traced.
 - b. Identify all institution contacts. The ICTT is to identify all persons who came into close contact (within 2 metres of shared space) with the case starting from 2 days before symptoms develop to the time the case was isolated¹ in a hospital. The purpose is to ring fence the close contacts to prevent spread of infection. The key contacts in the institution premises should include staff and personnel under the management of the institution

¹ The ICTT should proactively develop processes and procedures to ensure that all the required information is readily available. This includes drawing up the necessary templates to ensure quick and accurate retrieval of information such as the work rosters and visitors records.

and visitors within the institution. Based on the activity map, MOH CTC and hospitals will concurrently conduct contact tracing of all persons who may have had close contact with the case outside the institution premises in the community and hospitals.

c. Interview all institution contacts. (Please refer to **Appendix 2** for sample script). Information gathered from the contacts and the case's activity map must be verified (i.e. the two accounts must coincide).

d. Record details of all contacts in the institution contact tracing template found on the MOH SARS Website at <http://www.moh.gov.sg/mohcorp/diseases.aspx?id=13090#template>. Please refer to the sample form attached in **Appendix 3**. In completing the template, the contact tracing team should assess the extent of physical contact and the level of personal protective equipment used, if any, and recommend who should be issued Home Quarantine Orders (HQO).

e. Submit the completed template via email to MOH_MCT@moh.gov.sg within **24 hours** of activation. For statutory boards, the institution POC should cc this information to the parent ministry's POC so as to keep them informed of the outcome of contact tracing. The ICTT's submission would be incorporated into a master list of contacts which includes community and hospital contacts. MOH will convene the Quarantine Board to deliberate on the follow up actions based on the different DORSCON Alert levels.

WORKFLOW

6. The workflow diagram of a typical ICTT response is shown at **Appendix 4**.

FREQUENTLY ASKED QUESTIONS

7. A list of frequently asked questions is available in **Appendix 5**.

TERMS OF REFERENCE OF THE INSTITUTION POINT OF CONTACT

1. Contact Tracing

- a. To ensure that the institution has adequately undertaken the tracing of all contacts of the case in the institution premises from 2 days prior to onset of symptoms to time of isolation
- b. To fill in and review the template of institution contacts to ensure that all institution contacts have been identified and reported to MOH for deliberation by the Quarantine Board
- c. To ensure that the template bearing the list of institution contacts is submitted to MOH within 24 hours of activation

SAMPLE SCRIPT FOR USE BY CONTACT TRACER

“Don’t alarm – allay their fears!”

Good morning/afternoon/evening contact’s name, this is your name calling from institution’s name. Through our contact tracing, you may have come into contact with a suspect influenza patient on date/time/place/ *(you may give a brief description on the case if necessary – however, please respect confidentiality of the suspect patient).*

There is no need to be alarmed. Whilst Ministry of Health is investigating, please try to stay at home and avoid going to crowded places as a precautionary measure.

If you start to feel unwell during the next few days, develop a fever or have any questions, feel free to call our **hotline at 1800-333-9999**. Please write this number down so that you can remember.

If there is a need for you to be placed on Home Quarantine after our investigation, our HQO Service Provider staff will contact you at your home or through your mobile phone directly to confirm. Thereafter, you will receive the Quarantine Order from them.

Thank you.

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**WARNING:** Tracers **SHALL NOT** inform contacts that HQOs will be served. They only recommend in the case file ‘yes’ or ‘no’ to quarantine.

**Note**

***If the contact sounded very concerned and alarmed over the phone, please do your best to allay their fear by telling them:***

***a. We are conducting contact tracing only, he is not on home quarantine yet. Until they hear from the HQO Service Provider, our above-mentioned advice is served as a precautionary measure only.***

Appendix 3 to  
Annex C

**TEMPLATE FOR SUBMISSION OF INSTITUTION CONTACTS**

|            |                                 |                  |                            |             |
|------------|---------------------------------|------------------|----------------------------|-------------|
|            | <b>Need not enter info.</b>     |                  |                            |             |
| <b>S/N</b> | <b>Record Source / Hospital</b> | <b>Case NRIC</b> | <b>NRIC / Passport No.</b> | <b>Name</b> |

| <b>Residential Address</b> |              |                 |                      |               |                    |
|----------------------------|--------------|-----------------|----------------------|---------------|--------------------|
| <b>Blk No.</b>             | <b>Floor</b> | <b>Unit No.</b> | <b>Building Name</b> | <b>Street</b> | <b>Postal Code</b> |

|                     |                          |                       |                   |
|---------------------|--------------------------|-----------------------|-------------------|
|                     |                          |                       |                   |
| <b>Home Tel No.</b> | <b>Alternate Tel No.</b> | <b>Hand Phone No.</b> | <b>Occupation</b> |

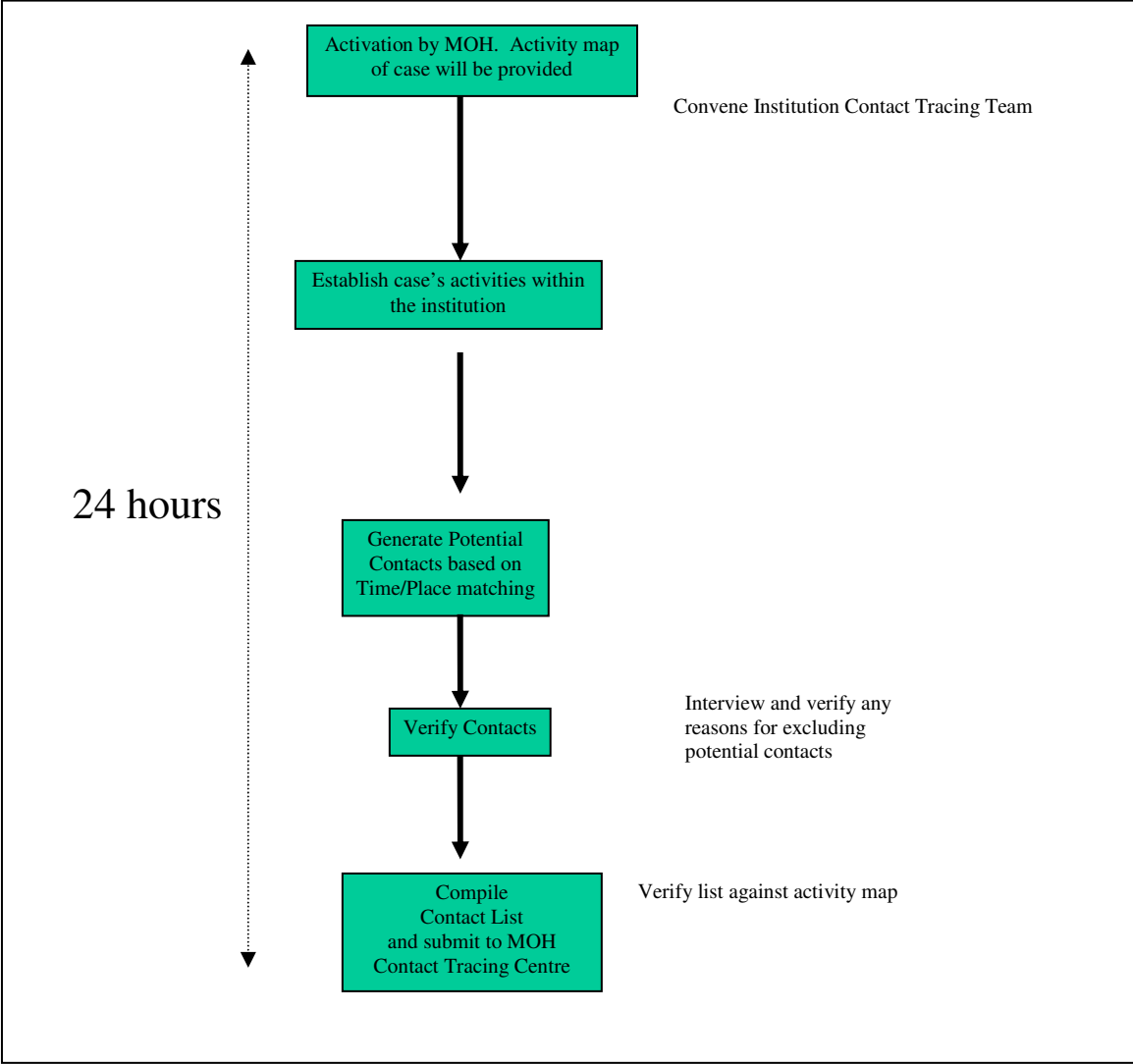
| <b>Office Address</b> |              |                 |                      |               |                    |
|-----------------------|--------------|-----------------|----------------------|---------------|--------------------|
| <b>Blk No.</b>        | <b>Floor</b> | <b>Unit No.</b> | <b>Building Name</b> | <b>Street</b> | <b>Postal Code</b> |

|                       |                                      |                    |            |                      |            |             |
|-----------------------|--------------------------------------|--------------------|------------|----------------------|------------|-------------|
|                       |                                      |                    |            |                      |            |             |
| <b>Office Tel No.</b> | <b>Health Status (Well / Unwell)</b> | <b>Nationality</b> | <b>Sex</b> | <b>Date of Birth</b> | <b>Age</b> | <b>Race</b> |

|                              |                             |                             |                              |
|------------------------------|-----------------------------|-----------------------------|------------------------------|
|                              |                             |                             |                              |
| <b>Main Contact Category</b> | <b>Relationship to Case</b> | <b>Location of Exposure</b> | <b>Date of Last Exposure</b> |

| <b>Need not enter information</b> |                   |                 |                   |                                                                     |
|-----------------------------------|-------------------|-----------------|-------------------|---------------------------------------------------------------------|
| <b>To Quarantine?</b>             | <b>Start Date</b> | <b>End Date</b> | <b>HQO Number</b> | <b>Remarks* e.g. Wearing N95 mask?, overseas?, referred to CDC?</b> |

**WORK FLOW FOR INSTITUTION CONTACT TRACING TEAM**



**FREQUENTLY ASKED QUESTIONS (FAQs) ON  
INSTITUTION CONTACT TRACING**

**1. What is the scope of responsibility of ICTT?**

*Ans: The various ICTT are responsible for the staff, visitors and any personnel under their management in the institution. This will include contracted staff like cleaners, canteen operators and students in school.*

**2. Is there a recommended size for ICTT?**

*Ans: There is no fixed size for an ICTT. The actual size from each institution will be dependent on the size of the institution and the various scenario that the institution will face. The average size may vary from 6-10 persons per team but may be smaller or larger depending on the no. of people in the institution. The institution must bear in mind that they would need to work out their likely scenario, and to tailor the size of their individual ICTT accordingly.*

**3. Are we responsible for members of public who have come into the institution building (i.e. police station, library)?**

*Ans: All institutions are encouraged to provide a name list of all visitors to MOH Contact Tracing Centre (CTC) for follow up actions.*

**4. What is the format to be used for submission of the list of contacts?**

*Ans: The template can be found on the MOH SARS Website at <http://www.moh.gov.sg/mohcorp/diseases.aspx?id=13090#template>. It should be completed and e-mailed to [MOH\\_MCT@moh.gov.sg](mailto:MOH_MCT@moh.gov.sg)*

**5. What kind of personal protective equipment is required for on site ICTT?**

*Ans: No personal protective equipment is required for on-site institution CT if the contacts are only to be interviewed by phone. However for face-to-face interview of contacts, the institution contact tracers may need standard protective equipment such as N95 mask, disposable gowns and gloves if the contact is symptomatic.*

**7. Is there a need to look out for influenza symptoms in the potential contacts?**

*Ans: Yes, all contacts with symptoms suggestive of influenza (please refer to case definition) should be referred for medical assessment via the 993 ambulance service. The 993 ambulance service will be available to the public from Alert YELLOW onwards. (If the 993 ambulance is not available to the public, MOH will provide the telephone number for the dedicated ambulance service to the organisation upon activation of institution contact tracing)*

**8. What is the definition of a “contact”?**

*Ans: “Contact” refers to a person that has been in close proximity (within 2m of shared space) with a confirmed case(s) of avian influenza from 48 hours before the onset of symptoms until isolation in a hospital.*

**9. How do we in the ICTT make a recommendation on who to quarantine?**

*Ans: This recommendation should be based on the extent of physical contact and usage of personal protective equipment, if any. Contacts with history of unprotected close physical contact should be recommended to be served the HQO. Protected and remote contacts need not be served. The final decision as to who will be served the HQO will be made by MOH.*

**10. What are the trigger points for initiation of contact tracing?**

*Ans: MOH will activate the institution based on epidemiological evidence of significant risk. Given the low risk of transmission of avian influenza, contact tracing will commence only when cases are confirmed.*

**11. Does the ICTT need to compile a name list for contacts of contacts?**

*Ans: No. Contacts who have no symptoms are treated as healthy individuals who only need to be monitored closely. Contacts of these contacts are not significant in terms of disease transmission and there is no requirement to compile a name list and to monitor this group.*

**12. Can the ICTT initiate contact tracing on employees referred and admitted to Hospital, even though MOH has not activated the relevant ICTT yet.**

*Ans: Yes. The organisation can choose to activate their ICTT to start contact tracing in a situation whereby the case concerned does not meet the MOH's trigger criteria for contact tracing. But the MOH Contact Tracing Centre should be informed of this.*