
DPPA, DPO AND DOS INTERIM GUIDELINES

ON

INFECTIOUS DISEASE OUTBREAK RESPONSE AND ANALYTIC SYSTEM

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ANNEXURES

1. **The Outbreak Reporting Form** (which can also be found here: https://www.un.org/sites/un2.un.org/files/coronavirus_outbreakreportingform.docx)
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A. PURPOSE AND RATIONALE

1. These Interim Guidelines establish procedures and mechanisms for the Outbreak Response and Analytic System. The system responds to outbreaks in field missions.
2. Management of disease outbreaks requires a system that, in a timely manner, identifies the outbreak, identifies commonalities among cases, outlines possible causal factors, informs response decision-taking and the implementation of prevention and control measures, provides information for analytics, and identifies and disseminates lessons learned and best practices.
3. Effective management of infectious diseases0 G[)JT3(a)-8(s0TETQD.00000938(ks)22()-4(i)5(13(f)-4(e)-(13(

developed specifically

12.

16. Director, Division of Healthcare Management and Occupational Safety and Health (DHMOSH)/DOS.

- a. Executive direction of DHMOSH including the promulgation and implementation of the Outbreak Response and Analytic System.

makes initial recommendations on how to prevent further exposure (control measures). ORTs may conduct fact-finding face-to-face, via communications or through tasking a CORT.

30. Contingent Outbreak Response Team (CORT).

One or more persons, one with medical training at Sector/Region or military or UN Police contingent level that perform the functions of the ORT for an identified outbreak. CORTs personnel are not dedicated, but on standby for outbreak response. CORTs are tasked by the ORT.

31. Outbreak Response and Analytic System.

A defined process to identify and confirm an outbreak, conduct fact-finding, assesses any common factors and how the exposure may have occurred, make initial recommendations on how to prevent further exposure (control measures), decide and implement outbreak mitigation and prevention measures, inform the Public Health Section/DMOSH, conduct outbreak analytics, inform senior DPPA/DPO/DOS leadership for high-level decision-taking and provide lessons identified to assist other field missions in disease prevention and mitigation.

F. REFERENCES

32. DPPA-DPO-DOS Code Cable

Outbreak Reporting Form

The outbreak reporting form can also be found here:

INSTRUCTIONS

1. This form provides UN senior management with a snapshot of currently “active” outbreaks involving UN personnel in your duty station. Please complete the form as best as you can, based on current information.
2. **Please submit this form every Tuesday (as long as you have an active outbreak) OR whenever a new outbreak occurs OR whenever an outbreak becomes active**

Date initial/index case was reported: DD/MM/YYYY

Total No. of Currently Active COVID-19 CASES = X

Breakdown of the above number:

- No. of PCR Positive who are Symptomatic = X
- No. of PCR Positive who are Asymptomatic = X
- No. of Suspect/probable cases = X

Total No. of CONTACTS¹ identified = X

Location of outbreak: FREE TEXT

Please specify the population that cases are from:

- Uniformed personnel
- Non-uniformed personnel
- Mix of Uniformed Personnel and Non-Uniformed Personnel

Please describe the population affected (e.g. which specific contingent affected/which UN office affected?):
FREE TEXT

If uniformed personnel are affected, what is the nationality of personnel? FREE TEXT

Common Factors Amongst Identified Cases of Outbreak

Refer to Annex 1 for examples of potential common factors to consider.

Please provide information on observed common factors amongst cases:

FREE TEXT

Potential Source/Origin of This Outbreak

Refer to Annex 2 for examples of potential sources or origin of the outbreak.

Please provide information on the suspected initial cause/origin of this outbreak:

FREE TEXT

Control Measures That Have Been Taken or Will be Taken for This Outbreak

Refer to Annex 3 for examples of control measures you can cite.

Please provide information on control measures that have been taken by the mission/duty station for this particular outbreak?

FREE TEXT

Please provide information, if any, on upcoming measures that are being planned?

FREE TEXT

-----Please replicate the above form if you have more Outbreaks to report Etc-----

Annex 2: Examples of Source or Origin of Outbreak

- Initial case/s may have been exposed through Protection of Civilian duties that consisted of close contact with the local community
- Initial case/s may have been exposed through local rotation of ill soldiers coming in from another affected area in the country
- Initial case/s may have been exposed through their involvement in road traffic accident rescues, without use of PPE
- Initial case/s were healthcare workers who may have been exposed through to a case who came into the clinic for a non-COVID illness, and later determined to have COVID-19
- Initial case was asymptomatic and identified as a case only after exit screening put in place by the government
- Initial case/s may have been exposed through contact with others team members during sports activities
- Initial case/s may have been exposed through visits to local markets to purchase things
- Initial case/s may have been exposed during their routine patrol in the local community
- Initial case/s may

Annex 3: Examples of Local Control Measures Taken

- Ensure ill soldiers are not internally rotated to another location
- Reinforce that dining should be in small cohorts
- Patrols in community reduced to critical activity
- Cancellation of all social and sports team activities
- Reinforce screening for fever and symptoms and hand hygiene measures before visitors enter into contingents' camp
- Immediate isolation of cases, and contact tracing was conducted, and all identified contacts have been placed in strict quarantine
- Cloth masks have been issued to all in the contingents with strict reminders to utilize them for all activities and even within the barracks