



THIRD SOUTH WEST INDIAN OCEAN FISHERIES GOVERNANCE AND SHARED GROWTH PROJECT (SWIOFish3)

Contingency Plan COVID-19

December 2020

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1 Introduction

The Third South West Indian Ocean Fisheries Governance and Shared Growth Project (SWIOFish3) is a project of the Republic of Seychelles financed by the World Bank and the Global Environment Facility (GEF). The project started in April 2018 and has a lifespan of six years. SWIOFish3 is part of a long term regional program that aims to increase the economic, social, and environmental benefits to the countries of the south west Indian Ocean from sustainable marine fisheries.

SWIOFish3 is further supported through the issuance of the world's first sovereign Blue Bond. The proceeds (US\$15 million) are being used to capitalise the Blue Grants Fund (BGF) of the Seychelles Conservation and Climate Adaptation Trust (SeyCCAT) and the Blue Investment Fund (BIF) of the Development Bank of Seychelles (DBS).

The project development objective of SWIOFish3 is to improve management of marine areas and fisheries in targeted zones and strengthen fisheries value chains in Seychelles. The project is implemented through 4 components, namely:

- Component 1: Expanded sustainable-use marine protected areas;
- Component 2: Improved governance of priority fisheries;
- Component 3: Sustainable development of the blue economy;
- Component 4: Project management and coordination.

The SWIOFish3 project is coordinated by the Department of Blue Economy (DBE) and the Ministry of Finance, Economic Planning and Trade (MFEPT) and it is implemented by the Department of Fisheries (DOF), the Department of Environment (DOE), the Seychelles Fishing Authority (SFA), DBS and SeyCCAT.

The SWIOFish3 project has two administrative bodies:

- a) A high-level decision-making deliberative body - The Steering Committee (SC); and
- b) A coordination body – The Project Implementation Unit (PIU). Various entities are involved in implementation of the activities of the project and work in close collaboration with the PIU.

The PIU is headed by a Project Coordinator, the Principal Secretary of DBE, who has the required authority for the effective operation of the unit. The Project Coordinator is assisted by a Project Manager who oversees the day-to-day operations of the PIU and overall project implementation. The PIU also consist of a Monitoring and Evaluation and Communication Specialist, an Environmental and Social Specialist and a Procurement Assistant to oversee these critical aspects of project implementation. The MFEPT provides a senior staff for the role of Financial Management and Procurement Specialist, who is supported by a Financial Management Assistant. In addition, the PIU have component managers from DOF and DOE. They are the key focal points of the project within their departments and are responsible for the planning, implementation and reporting of activities assigned to their departments.

2 Purpose and Justification

On 30th January 2020, the Director General of the World Health Organization (WHO) declared the outbreak of a new coronavirus disease 2019 (COVID-19) as a Public Health Emergency of International Concern. COVID-19 is an infectious disease caused by a newly discovered coronavirus that emerged in China in December 2019. The virus spreads primarily through droplets of saliva or discharge from the nose when an infected person coughs or sneezes. Most of these droplets fall on nearby surfaces and objects such as desks, tables or telephones. People could catch COVID-19 by touching contaminated surfaces or objects and then touching their eyes, nose or mouth. If they are standing within one meter of a person with COVID-19, they can catch it by breathing in droplets coughed out or exhaled by them. In other words, COVID-19 spreads in a similar way to flu. Most persons infected with COVID-19 experience mild symptoms and recover. However, some go on to experience more serious illness and may require hospital care. Risk of serious illness rises with age: people over 40 seem to be more vulnerable than those under 40. People with weakened immune systems and people with conditions such as diabetes, heart and lung diseases are also more vulnerable to serious illness. At this time, there are no specific vaccines or treatments for COVID-19. However, there are many ongoing clinical trials evaluating potential treatments.

In Seychelles, over 150 cases of COVID-19 have been reported by the Department of Health (DOH) of which majority were imported and detected upon arrival, greatly reducing the circulation of the virus in country. It is also important to note that zero deaths have been reported to date¹. According to the WHO transmission scenarios for COVID-19, Seychelles is currently experiencing scenario 2 (sporadic cases: a country has one or more cases, imported or locally detected). To combat COVID-19, DOH has developed a National Response Plan. The plan stipulates a series of measures to prevent local transmission, for instance, it is mandatory to wear face masks in public places where one metre physical distancing cannot be maintained as well as all establishments which include offices, shops and restaurants must have adequate sanitary facilities in place.

As a major fishery government project, SWIOFish3 is involved with a number of ministries, departments, Non-Governmental Organisations (NGOs), consultants and other stakeholders. It is therefore important for the project to have measures in place to combat COVID-19. In line with the World Bank safeguards policies, the SWIOFish3 project has developed a contingency plan as a preventive measure against the spread of the virus within the project.

3 Objective

The objective of this contingency plan is to prepare the project to manage the risk of COVID-19 infection and to be prepared to deal with possible confirmed cases, with the view of minimizing its transmission rate and subsequent impact on SWIOFish3 activities.

¹ As of 31 October 2020.

4 Methodology and Approach

4.1 National Level Measures

This section outlines the measures adopted by DOH to tackle the COVID-19 crisis, which everybody in Seychelles has to adhere to.

1. Practice personal hygiene:
 - Wash your hands regularly with soap and water, or clean them with alcohol-based hand rub (see Annex 1).
 - Maintain at least 1 metre distance between you and people coughing or sneezing.
 - Avoid touching your face.
 - Cover your mouth and nose when coughing or sneezing.
 - Stay home if you feel unwell.
 - Refrain from smoking and other activities that weaken the lungs.
 - Practice physical distancing by avoiding unnecessary travel and staying away from large groups of people.
2. Call the DOH hotline on (+248) 141 if you have any symptoms² of COVID-19 or any health concerns on COVID-19.
3. It is mandatory for all persons in Seychelles to wear face masks in the following places and circumstances:
 - a) On public transportation including but not limited to buses, taxis, ferries, planes or any other conveyance or vessel capable of carrying people;
 - b) Indoor places including but not limited to health facilities, financial institutions including banks and credit unions, customer service centres, retail shops or outlets, places of funerals, cremation or interments, meeting rooms, cinemas, places of worship, ports and airports where one metre physical distancing cannot be maintained;
 - c) Outdoor places including but not limited to markets, sports venues, bus terminals where one metre physical distancing cannot be strictly maintained;
 - d) Places of work including but not limited to massage parlours, beauty salons, barber shops and hair dressers where one metre physical distancing cannot be strictly maintained;
 - e) Other circumstances where one metre physical distancing cannot be maintained.

4. Conditions for entry of persons into Seychelles

Visitors are permitted to travel to Seychelles if they are travelling from countries that are on the published list of permitted countries³, provided that they have not been in a country not on the permitted list in the previous 14 days. If the travel involves a transit stop in a country not on the permitted list and the traveller does not leave the airport in the transit country, that traveller is

² People with COVID-19 have had a wide range of symptoms reported, ranging from mild symptoms to severe illness. Symptoms may appear 2-14 days after exposure to the virus: fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting and diarrhoea. The list is not limited.

³ The published list of permitted countries is constantly being updated by DOH. To obtain an updated version, please visit DOH website on the following link: <http://www.health.gov.sc/>

permitted to travel to Seychelles. Conditions covering pre-travel, travel, arrival and stay in Seychelles should be strictly followed.

Additionally, visitors from a limited number of countries not on the published permitted list, are permitted to travel to Seychelles. These countries are referred to as “special status countries” and different conditions apply to travellers from these countries.

These “special status countries” and supporting conditions are reviewed periodically and will be issued by the DOH and published on the DOH and Tourism Department websites respectively. Visitors should note that the COVID-19 outbreak is dynamic and the listing of countries may change. They must therefore ensure that flight and hotel bookings permit flexibility regarding cancellation or postponement at short notice.

All persons, including all categories of visitors, Seychellois, persons holding permanent residence or Gainful Occupation Permits (GOP), diplomats, consultants, crews of shipping vessels, intending to travel to Seychelles must apply for their Health Travel Authorisation, at <https://seychelles.govtas.com/>. Applicants must have at hand their passport, valid negative polymerase chain reaction (PCR) COVID-19 test result, itinerary, accommodation booking confirmation and GOP certificate. All visitors are also required to have travel and health insurance cover for COVID-19 related quarantine and medical care.

Health Travel Authorisation will be issued electronically by email to applicants. Travellers must present the Authorisation in printed or electronic form at check-in and on arrival. Airlines will not board any traveller without the Authorisation. Travellers are advised to carry printed copies of all the essential documents.

4.2 PIU Level Measures

This section outlines the measures put in place to minimize the spread of COVID-19 at the PIU level.

1. The PIU staff conduct work three days (Monday, Tuesday and Thursday) a week at office and two days (Wednesday and Friday) at home in order to prevent the spread of the virus in office and on public transport.
2. The PIU office is large enough to maintain a one metre distance between each person. The Project Manager and the Environmental and Social Specialist each have their own office while the Monitoring and Evaluation and Communication Specialist shares a bigger office with the Procurement Assistant.
3. Each PIU staff is responsible to clean their own desk and laptop as well as door handles and toilet accessories after use on a daily basis. However, general cleaning of the office is conducted twice a week, Tuesday and Thursday by a DBE staff.
4. The DBE supply soap and hand sanitizer to enable good hygiene. There are posters displayed in the office to educate staff and guest on the importance of washing hands regularly and the correct method to do so.
5. The Environmental and Social Specialist and Monitoring and Evaluation and Communication Specialist uses public transportation and as per national regulation, they wear face masks at all times while travelling.
6. The PIU uses virtual technologies in its day to day task to minimize the risk associated with face-to-face meetings, workshops and group discussions. However, meetings that will be organised at the PIU office with consultants, representative from implementing entities and the public shall be conducted in face mask if one metre physical distancing cannot be maintained.

7. As necessary, DBE or the project shall provide Personal Protective Equipment (PPE) such as face mask for PIU staff and stakeholders for project activities as well as tools for PIU to work remotely, in particular data for remote connection.
8. Any staff having flu symptoms should not come to the office. Equally, for any meetings that are organized, if meetings are in person, anyone having flu symptoms should not participate. This will be included in the meeting invitation.
9. The PIU shall keep a register at the office.

4.3 Subproject Level Measures

This section outlines the measures put in place to minimize the spread of COVID-19 during execution of project and subproject activities. Project activities includes consultancy assignments and subprojects funded directly under SWIOFish3 as well as subprojects funded under the BGF and BIF. Project and subproject activities include workshops, meetings, trainings, consultations, travels, consultancies, site visits, field work, research etc.

1. The PIU shall review all planned activities under the project and subprojects requiring stakeholder engagement and public consultations.
2. The PIU shall assess the level of proposed direct engagement with stakeholders, including location and size of proposed gatherings, frequency of engagement, categories of stakeholders (international, national, local).
3. The PIU shall assess the level of risks of the virus transmission for these engagements, and how restrictions that are in effect in the country would affect these engagements.
4. The PIU shall identify project activities for which consultation/engagement is critical and cannot be postponed without having significant impact on project timelines.
5. The PIU shall assess the level of Information and communications technology (ICT) penetration among key stakeholder groups, to identify the type of communication channels that can be effectively used in the project context.
6. The PIU will assess the impact of the current national restrictions on consultants coming to Seychelles in terms of COVID-19 testing and quarantine procedures. Associated costs will be captured in contract negotiation. For all SWIOFish3 consultancies, the Environmental and Social Specialist will review a draft negotiated contract and provide feedback during contract negotiation.
7. During contract negotiation the PIU shall share the SWIOFish3 COVID-19 contingency plan and COVID-19 management plan template. The consultant shall submit the COVID-19 management plan before the signing of the contract.
8. For all SWIOFish3 consultancies that are already at implementation phase, the PIU shall share a copy of the SWIOFish3 COVID-19 contingency plan.
9. Project and subproject activities that have safeguards requirement shall have a section detailing measures to minimize risks related to COVID-19 as part of Environmental and Social Management Plan (ESMP) or other safeguards instruments. This shall also apply to contractor contract for construction and civil works projects. Subprojects that have no environmental and social risks but have COVID-19 risks shall complete the COVID-19 management plan template before funds disbursed.

Based on the above, the PIU should discuss and agree with project partners the specific channels of communication that should be used while conducting stakeholder consultation and engagement activities. The following are some considerations while selecting channels of communication, in light of the current COVID-19 situation:

1. Avoid public gatherings (taking into account national restrictions), including public hearings, workshops and community meetings;

2. If smaller meetings are permitted, conduct consultations in small-group sessions, such as focus group meetings. Meetings can also be conducted through online channels, including WebEx, zoom and skype;
3. Diversify means of communication and rely more on social media and online channels. Where possible and appropriate, create dedicated online platforms and chat groups appropriate for the purpose, based on the type and category of stakeholders;
4. Employ traditional channels of communications (TV, newspaper, radio, dedicated phone-lines, and mail) when stakeholders do not have access to online channels or do not use them frequently. Traditional channels can also be highly effective in conveying relevant information to stakeholders, and allow them to provide their feedback and suggestions.

Managing COVID-19 risk when organising meetings and events

Before the meeting or event

1. Seek advice from the venue where you plan to hold the meeting or event. However, it is important that the advice is consistent with the national and the project's contingency plan.
2. Develop and agree a preparedness plan to prevent infection at your meeting or event.
 - a. Consider whether a face-to-face meeting or event is needed. Could it be replaced by a teleconference or online event?
 - b. Could the meeting or event be scaled down so that fewer people attend?
 - c. Ensure and verify information and communication channels in advance with key partners such as DOH.
 - d. Pre-order sufficient supplies and materials, including masks, tissues and hand sanitizer for all participants. Have face masks available to offer anyone attending the meeting.
 - e. Advise participants in advance that if they have any symptoms or feel unwell, they should not attend. This shall be included in the meeting invitation.
 - f. Make sure all organizers, participants, caterers and visitors at the event provide contact details: mobile number, email and physical addresses. State clearly that personnel details will be shared with DOH if any participant becomes ill with symptoms of COVID-19. If they will not agree to this, they cannot attend the meeting or event.
If food is provided, these should be provided in a manner to reduce touch points, for example; buffets should not be used but rather separately served portions.
3. In the case someone at the meeting becomes ill with symptoms of COVID-19 (dry cough, fever, malaise).
 - a. Identify a room or area where he/she can be safely isolated
 - b. Contact the health hotline number and wait for further instruction from DOH.

During the meeting or event

4. Each participant shall be given a numbered seat. The seat number shall be recorded on the register. All participants shall be encouraged to sit in the allocated seat throughout the meeting/workshop.
5. The host shall provide information or a briefing on COVID-19 and the measures that organizers are taking to make this event safe for participants.
6. The organizer shall display dispensers of alcohol-based hand rub prominently around the venue.
7. The organiser should ensure that there is space to arrange seats so that participants are at least one meter apart. If this is not possible the venue should not be considered.
8. Open windows and doors whenever possible to make sure the venue is well ventilated.

After the meeting

9. Retain the names and contact details of all participants for at least one month. This will help DOH trace people who may have been exposed to COVID-19 if one or more participants become ill shortly after the event.
10. If someone at the meeting or event was isolated as a suspected COVID-19 case, the organizer should inform DOH and provide them with the relevant meeting information.
11. If the participants develop any form of flu like symptom they should stay at home and self-isolate. This means avoiding close contact (1 meter or nearer) with other people, including family members. They should also telephone DOH, giving them details of symptoms.

5 Emergency Procedures

1. If someone at the PIU office is a suspect case

The Project Manager will immediately notify DOH, Project Coordinator at DBE and other PIU staff. The Project Manager shall request other staff to:

- Work from home
- Monitor their health, including doing temperature checks at least three times daily;
- Adopt good personal hygiene and
- See a doctor immediately if they are unwell.
- When the outcome of the test for the suspect case is provided, the Project Manager will notify Project Coordinator and other staff of the outcome.

2. If someone at the workplace is a confirmed case

The Project Manager will cooperate with DOH contact tracing officers to provide all the name of PIU staff as well as to identify others who may have had close contact with the confirmed case. The Project Manager assisted by the Environmental and Social Specialist will cooperate with DOH and provide them with the necessary assistance and support.

The Project Manager will immediately place all PIU staff on 14 days' quarantine at home in order to prevent close physical contact with other people.

Upon being notified of the confirmed case, Project Manager will adopt the following precautionary measures:

- Immediately vacate the PIU office. There is no need for other people to vacate the building⁴ or the whole floor if there had been no sustained and close physical contact with the confirmed case;
- Carry out a thorough cleaning and disinfecting of the PIU office;
- Keep in touch with PIU staff who is a suspect or confirmed case or was placed in quarantine.

⁴ The PIU office is located on the second floor of Highway Point Building at the Providence Highway near the roundabout opposite Civil Construction Company Limited (CCCL).

6 Communication

While the PIU take up every possible measures to prevent COVID-19 outbreak in the workplace, the PIU will notify and keep the World Bank and the Steering Committee updated in case of any contingency event that may happen, in worst scenario affecting work schedules.

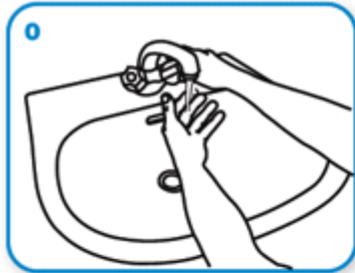
Target Audience	Type	Delivery Method	Frequency	Responsible	Remarks
Sponsors	Progress report	Email	Quarterly	Project Manager	Activities executed, funds disbursed and challenges
Steering Committee	Progress report Minutes meeting	Email Meeting	Quarterly Quarterly	Project Manager	Review of progress for Procurement Plan and AWPB
PIU	Weekly updates	Meeting	Weekly	Project Manager	Updates, delegation of tasks and challenges

Important Contact

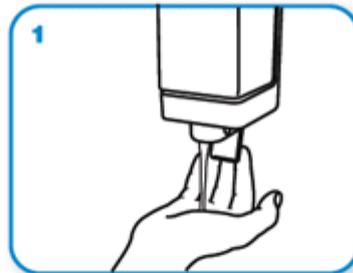
Name	Contact Number
DOH COVID-19 Hotline	+248 141
Department of Blue Economy	+248 4672300
Project Manager: Jan Robinson	+248 2616044
Environmental and Social Specialist: Danielle Jupiter	+248 2827276
Monitoring and Evaluation and Communication Specialist: Thessia Kilindo	+248 2581312
Procurement Assistant: Meggy Tirant	+248 2819175

Annex 1 –Practice Personal Hygiene

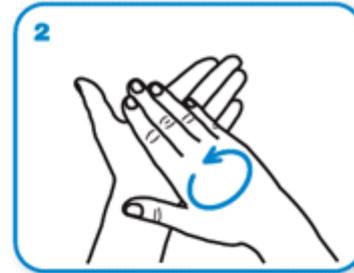
Handwashing remains the number one tip for preventing the spread of COVID-19. It's common sense and it works. However, it must be done properly and with soap and water. When soap and water are not available, the next best option is to use an alcohol-based hand sanitizer.



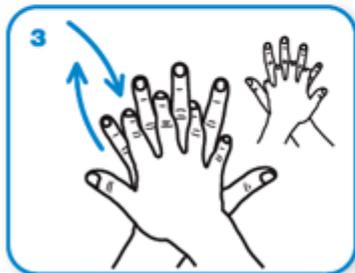
Wet hands with water



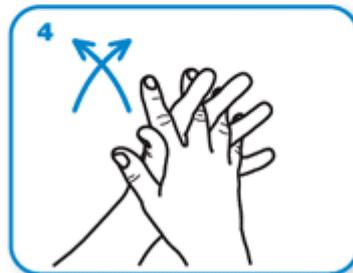
apply enough soap to cover all hand surfaces.



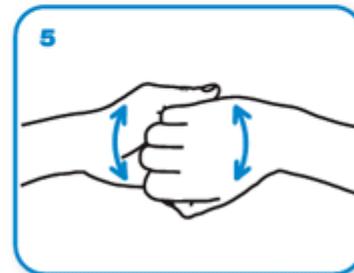
Rub hands palm to palm



right palm over left dorsum with interlaced fingers and vice versa



palm to palm with fingers interlaced



backs of fingers to opposing palms with fingers interlocked



rotational rubbing of left thumb clasped in right palm and vice versa



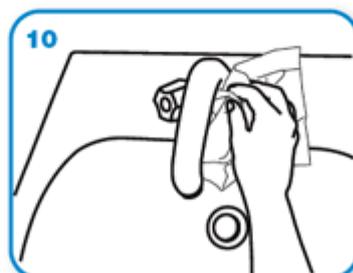
rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa.



Rinse hands with water



dry thoroughly with a single use towel



use towel to turn off faucet



...and your hands are safe.

Hand sanitising: Alcohol-based hand sanitizer (containing at least 60% alcohol) is helpful in protecting against the spread of germs and viruses. However, handwashing with soap and water is still best. Hand sanitizer is effective when soap and water are not available. This includes when taking public transportation and it's difficult to get to a bathroom (airplane, ferry, bus). Carrying a travel size bottle of hand sanitizer makes it easy to disinfect your hands in these situations.

Hand Hygiene Technique with Alcohol-Based Formulation

 **Duration of the entire procedure: 20-30 seconds**



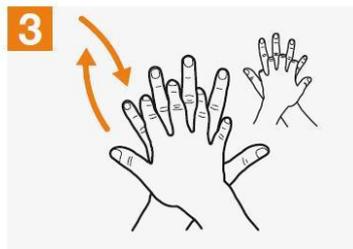
1a Apply a palmful of the product in a cupped hand, covering all surfaces;



1b Apply a palmful of the product in a cupped hand, covering all surfaces;



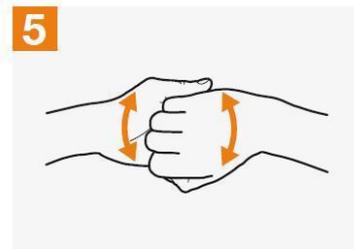
2 Rub hands palm to palm;



3 Right palm over left dorsum with interlaced fingers and vice versa;



4 Palm to palm with fingers interlaced;



5 Backs of fingers to opposing palms with fingers interlocked;



6 Rotational rubbing of left thumb clasped in right palm and vice versa;



7 Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



8 Once dry, your hands are safe.

7 References

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