Enhanced Surveillance Strategy for COVID-19

1. Active Surveillance in High-Risk Areas:

Paro, Thimphu, Samtse, Trashichholing, Phuentsholing, Lhamoizingkha, Gelephu, Panbang, Nganglam, Samdrup Jongkhar, Samdrupcholing, Jomotshangkha.

• All Frontline worker identified by the respective Dzongkhag / Taskforce must be tested every two weeks (14 days) with exception of health worker, which is exclusively identified.

Risk sites	Risk groups	Testing method	Frequency of testing	Sample size	Report/recording system	Responsibility	Remarks
Paro International Airport, PoE- Ground Crossings, MDP / depot, Private warehouses, Border patrolling	Registered Frontline workers identified by the respective agencies	RT-PCR	Weekly	50% of the group should be tested every week so that every individual is tested once in two weeks	COVID-19 Test Record for Frontline workers	Respective agency head through COVID-19 Taskforce (Dzongkha / regional)	Existing but need to ensure compliance to testing protocol, monitoring and reporting to DDM (Secretariat to NC19TF)
Factories and industries	All staff*- identify all at risk individuals working in the unit including support staff	Rapid Ag (transition to conduct their own testing)	Every 14 th Day	20 % of the randomly selected staff should be tested every 14 th day		Chair of the Regional COVID-19 Task Forces	Existing but need to ensure compliance to testing protocol, monitoring and reporting to DDM (Secretariat to NC19TF)
Health facilities excluding primary healthcare centers	All staff (clinical, administrative, support staffs, drivers, etc) * In-patient and attendant	RT-PCR where current access is available if not Rapid Ag Rapid Ag during non-	Weekly Before admission	50% of the group should be tested every week so that every individual is tested once in two weeks	Health Facility System (Surveillance module)	MS/ CMOs/ MOICs MS/ CMOs/ MOICs	Respective health facilities report to National Surveillance Team
	Outpatient undergoing invasive procedures	outbreak; RT-PCR during outbreak time	Before medical procedures	All		MS/ CMOs/ MOICs	

COVID-19 Task Forces	Task force members	RT-PCR where currently accessible. Where RT- PCR is not not available use Rapid Ag	Every 14 th Day	50 % of the randomly selected members every 14 th day so that each individual should be tested once a month	COVID-19 Test Record for Frontline workers	Chairpersons of the Regional C19TFs, Dasho Dzongda/ Thrompon/ Dungpa	Existing but need to ensure compliance to testing protocol, monitoring and reporting to DDM (Secretariat to NC19TF)
Schools & institutions – located in district and satellite towns	Teaching faculty, administrative staff, support staff Students /trainees	Rapid Ag Rapid Ag	Every 14 th Day Every 14 th Day	10% randomly selected staff. 10% randomly selected students from each class/section		Head of schools and institution	New measure: Ensure compliance to testing protocol. Monitoring and reporting to DDM (Secretariat to NC19TF)
Vegetable markets – Thimphu, Paro, Phuentsholing only	Vendors and management	Rapid Ag	Every 14 th Day	50% of vendors and CFM management staff; 300 randomly selected customers		Dasho Dzongda of Paro/ CFM Management of Thimphu	New measure: Ensure compliance to testing protocol. Monitoring and reporting to DDM
Mega Projects	Laborers; management and support staff	Rapid Ag (transition to conduct their own testing by their own health center)	Every 14 th Day	10 % representing from various categories of workers	Health Facility System (HFS)	Head of a Project Authority	(Secretariat to NC19TF)
Monastic Institutions - urban and near periphery of urban areas	Monks and nuns	Rapid Ag	Every 14 th Day	10% randomly selected		Head of Institutions	
Mobile population – Chuzom and Menchuna Check Posts and City buses	Bus drivers (within City and inter district)	Rapid Ag	Every 14 th Day	50% (every individual should be tested once monthly)		Thimphu Throm/RSTA	
	Driver and passenger of all vehicles including government and military vehicles going out of Thimphu and Paro	Rapid Ag	Every day Sampling spread over 9.00 AM to 5.00 PM	Driver and passenger of every 10 th vehicles		Dasho Dzongda, RBP	

Inter-dzongkha	g RT-PCR	One random	100% of the	RSTA	
Public transpor		day a week	passengers coming		
buses and			to buy tickets on		
passengers leav	ing		that selected		
Thimphu and Pa	ro		random day		
at Bus Stations					

^{*}The head of COVID-19 TF should identify all individuals working in the unit (e.g. Paro International Airport or MDP, etc) and send the details of staff or officials as per the Excel Template attached to DDM (Secretariat to the National COVID-19 Task Force-NC19TF)

2. Active Surveillance in low-Risk Districts

ALL Frontline workers identified by the respective Dzongkhag/ Taskforce must be tested every two weeks with exception of health worker, which is exclusively identified.

Risk sites	Risk Groups	Testing method	Frequency of Testing	Sample size	Report/recording system	Responsible	Remarks
Health facilities - all districts hospital (exception of PHCs)	All staff (clinical, administrative, support staffs, drivers, etc) *	Rapid Ag	Every 14 th Day	50 % of the staff. That is every individual should be tested once monthly		MS/ CMOs/ MOs	Respective health facilities report to National Surveillance Team
	In-patient and attendant- only referral hospitals	Rapid Ag	Before admission	All	Health Facility System (Surveillance	MS/ CMOs/MOs	
	Outpatient (undergoing invasive procedures) - only referral hospitals	Rapid Ag	Before performing medical procedures	All	module)	MS/ CMOs/MOs	
Schools & institutions – all schools in district and satellite towns only	Teaching faculty, administrative staff, support staff and students	Rapid Ag	Every 14 th Day	5% randomly selected		Head of schools and institution	New measure: Ensure compliance to testing protocol. Monitoring and reporting to DDM (Secretariat to NC19TF)

^{*}The head of COVID-19 TF should identify all individuals working in the unit (e.g. Paro International Airport or MDP, etc) and send the details of staff or officials as per the Excel Template attached to DDM (Secretariat to the National COVID-19 Task Force-NC19TF)

3. Passive Surveillance for both High-risk and Low-Risk Area

Risk sites	Risk Groups	Testing method	Frequency of Testing	Sample size	Report/recording system	Responsible	Remarks
Health facilities	Symptomatic	Rapid Ag	As and when	All	system	MS/	Respective health
ILI (flu clinic) and	individual	follow by RT-	reported			CMOs/MOs	facilities report to
SARI (in patient,		PCR if positive					National Surveillance
hospital)					Health Facility		Team
Hospital -	Inpatient and	Rapid Ag	On admission	All	System	MS/	
admission testing	attendant				(Surveillance	CMOs/MOs	
					module)		
Schools and	Teaching faculty,	Rapid Ag	Symptomatic	All		Head of schools	
institutions -	administrative staff,		faculty and			and institutions	
symptomatic	support staff and		students				
testing	students						