



BRAZIL

19 JUN 2020

Coronavirus, COVID-19

The following information was received from our correspondent 19 June:

QUOTE

To help our clients and associates in the maritime sector to keep up with the evolving situation, we have consolidated the relevant guidelines and recommendations issued under the emerging regulatory framework and packed them in the form of a practical guide [enclosed], divided into topical chapters with links to reference material and official sources of information.

UNQUOTE

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Coronavirus (COVID-19) in Brazil

Practical Guidance

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Foreword

As from March 2020, Brazil gradually closed its borders and recommended the adoption of non-pharmacological measures, such as social distance and home isolation for those displaying symptoms of the disease, while states and cities implemented contrasting measures to deal with the situation.

Federal health authorities and port administrations have implemented a multitude of measures in response to the pandemic to ensure the functioning of ports, airports, cargo terminals and other essential services. A broad regulatory framework has emerged and is being reviewed and updated continuously as more information about the new viral disease comes to light.

In late December 2019, the outbreak of the novel coronavirus disease (COVID-19), detected in Wuhan, the most populous city in Central China, was reported to the World Health Organization (WHO). A month later, COVID-19 was declared Public Health Emergency of International Concern, and on 11 March 2020, WHO escalated it to a pandemic.

Six months after, the transmission of the SARS-CoV-2 virus that causes the disease is widespread, with more than 8.3 million people infected with nearly half a million losing their lives.

The first confirmed case of COVID-19 in Brazil occurred in late February 2020, and since then, all 26 states of the Federation and the Federal District have had cases. Brazil is rapidly approaching one million confirmed cases and about 47,000 deaths by COVID-19. The number of cases continues to rise almost exponentially, amid disagreements between federal, state, and municipal authorities over the strategy to address the pandemic and its consequences.

To help our clients and associates better understand the somewhat confusing local situation, we have prepared this guide with practical information on the many protocols, guidelines and recommendations issued by federal public authorities along the four months since the outbreak landed in Brazil. For ease of access, the guide is divided into topical chapters with links to consult the relevant source of information and check for updates at a glance.

While specific advice on the current situation and health control measures in place at different ports should be sought directly from the local maritime and health authorities, we hope this guide will be a useful source of practical information however fluid. We will endeavour to keep an up-to-date version available for free download on our website.

REPRESENTAÇÕES PROINDE LTDA.

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1. Background

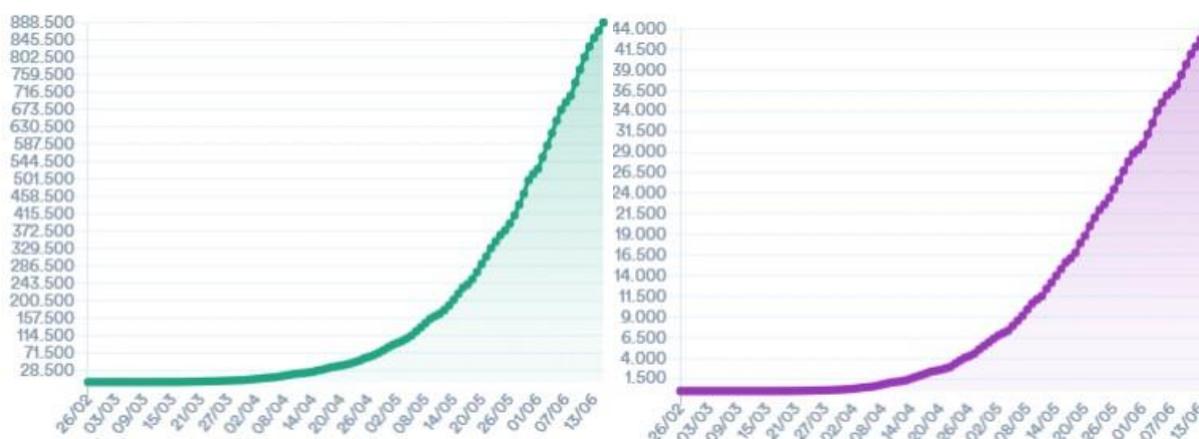
1.1. Evolution of the pandemic

Following the recommendation of the [World Health Organization \(WHO\)](#), on 3 February 2020, Brazil's Ministry of Health declared a Public Health Emergency of National Concern to deal with the outbreak of the SARS-CoV-2 virus, which transmits the novel coronavirus disease ([COVID-19](#))¹. No trade or travel restrictions were then implemented.

The first COVID-19 case in Latin America was registered in Brazil on 26 February 2020, while the earlier death resulting from the infection happened on 17 March 2020, both events occurred in São Paulo, South America's most densely populated metropolis. It was just about a week after WHO had declared the situation a pandemic and rated its impact and risk of global spread as very high, a status that remains to date.

On 20 March 2020, air and sea travel to Brazil was temporarily banned and the land borders shut. The Ministry of Health declared a state of community transmission ruling that *“for the containment of the transmissibility of COVID-19, non-pharmacological measures should be adopted, such as domestic isolation of the person with respiratory symptoms and the people residing in the same home, even if they are asymptomatic, and should remain in isolation for a maximum period of 14 (fourteen) days”*².

On 16 April 2020, President Bolsonaro dismissed his then popular minister of health, orthopaedist and politician Luiz Henrique Mandetta, amid public disagreements over social distancing and the severity of quarantine measures implemented by most state governors. Oncologist Nelson Teich took office only to resign a month later, due to divergences with the president about the handling of the COVID-19 crisis. General Eduardo Pazuello has since headed the Ministry of Health on an interim basis.



Graph 1: number of COVID-19 lab-confirmed cases (left) and deaths (right) in Brazil until 15/06/2020 (Source: Ministry of Health)

Three months after WHO declared COVID-19 a pandemic, Brazil's epidemiological curve keeps rising, with a marked acceleration in the number of cases (and deaths) since April. While the Northeast and Southeast regions feature a pattern aligned with Brazil's general profile, the other three regions are still at a previous stage of the outbreak. Yet, they have already shown substantial increases in recent weeks³.

¹ Ministry of Health Ordinance n° 188 of 3 February 2020

² Interministerial Ordinance n° 126 of 19 March 2020; Ministry of Health's Ordinance n° 454 of 20 March 2020

³ Ministry of Health's Special Epidemiological Bulletin n° 17 (Epidemiological Week 21)

As more and more test kits are made available to the public health network, and pharmacies have been authorised to conduct rapid tests, the universe of the population tested has increased significantly in the last days. This development is likely to steepen up the curve even further. **[Graph 1]**

1.2. Current situation

On 16 June 2020, [WHO dashboard](#) recorded 867,624 laboratory-confirmed cases in Brazil, including 43,332 deaths, leaving it behind the United States as the most affected country in the number of cases and deaths by COVID-19, followed by Russia, the United Kingdom, India, and Spain.

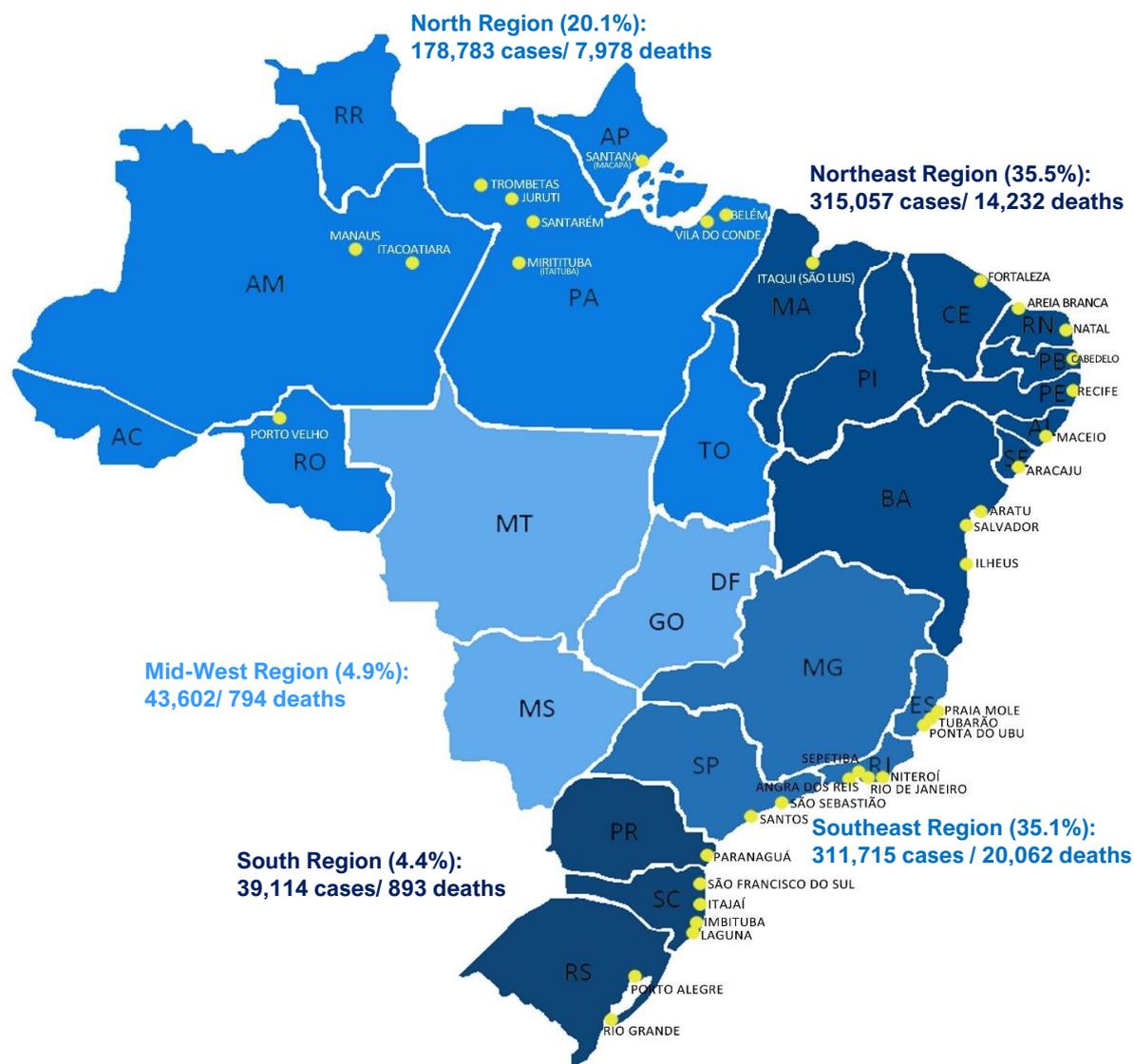


Figure 1: number of COVID-19 cases and deaths by region. Yellow dots are barge stations and ports (Source: Ministry of Health)

For the same period, the [Ministry of Health dashboard](#) registered 888,271 cumulative cases across the country, with 43,959 deaths (4.9% fatality rate). However, it is suspected that the actual numbers may be much higher than those officially disclosed due to poor reporting from municipalities and state health departments, insufficient testing and inefficient data management by the federal administration.

The highest numbers of Brazilian cases are in the south-eastern states of Sao Paulo [SP] (181,460 confirmed cases with 10,767 deaths) and Rio de Janeiro [RJ] (80,946/ 7,728), followed by Ceará [CE] (79,462/ 4,999), Pará [PA] (69,224/ 4,201), Maranhão [MA] (60,592/ 1,499), Amazonas [AM] (56,777/ 2,512) and Pernambuco [PE] (45,507/ 3,886). **[Figures 1 & 2]**

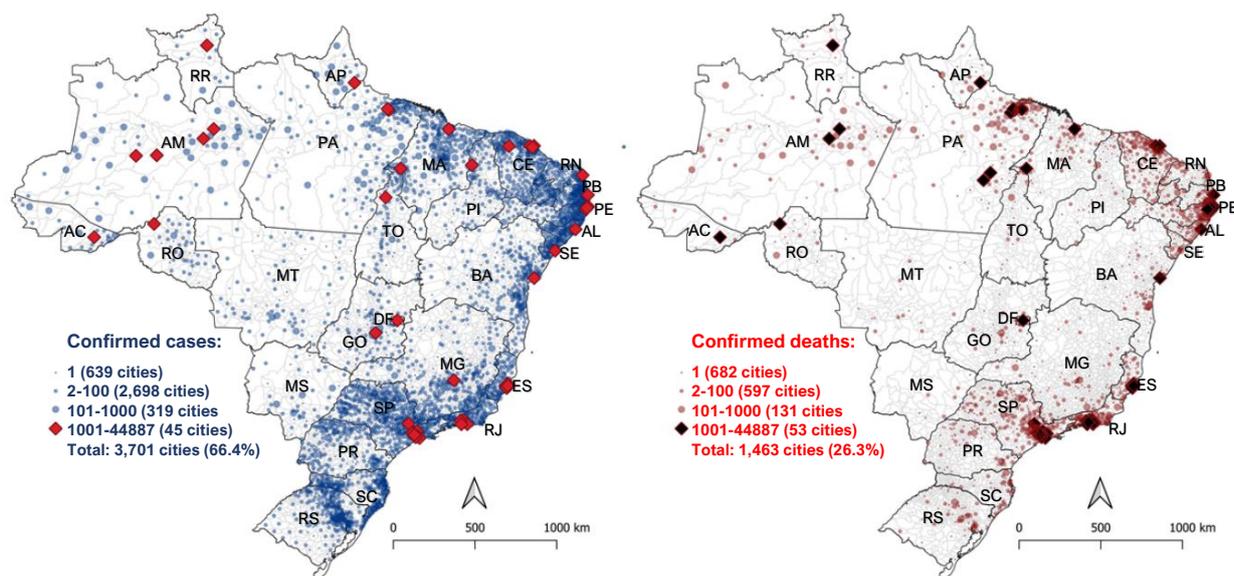


Figure 2: Number of COVID-19 Brazilian cases and deaths by municipalities as at 10/06/2020 (Source: Ministry of Health)

As the season of increased circulation of respiratory viruses approaches, COVID-19 is expected to continue to spread steadily in the coming weeks. In fact, there is still an exponential evolution of new cases registered weekly by state health departments, with no indication of decelerating this growth anytime soon.

On the bright side, the latest data from the Ministry of Health point to a drop in the number of daily deaths by COVID-19 reported by state health departments. To date, 463,474 people had recovered from the disease, and other 445,393 people are being monitored⁴ in Brazil.

⁴ Cases notified in the last 14 days by state health secretariats that did not evolve to death are considered “under monitoring”. In addition, among the cases that presented SARS and were hospitalised, all those who were hospitalised in the last 14 days and do not have a record of discharge or death are also considered under monitoring

2. Quarantine regulations

2.1. Legal framework

The ongoing public health emergency is managed by the Interministerial Executive Group on Public Health Emergency of National and International Concern (GEI-ESPII) under the coordination of the [Ministry of Health](#)⁵.

On 7 February 2020, Brazilian National Congress passed, and president Jair Bolsonaro sanctioned, [Law 13,979](#)⁶ of 6 February 2020. It provides for specific preventive and restrictive measures that may be taken by public authorities, within the scope of their jurisdiction, to deal with the novel coronavirus outbreak and its consequences and repercussions, namely:

- Isolation and quarantine*
- Exceptional and temporary restrictions for entering and leaving the country, as well as for interstate and intercity transport, by road, port and airport, according to technical reasoning and recommendations issued by ANVISA [**Chapter 3**]
- Compulsory medical examinations, laboratory tests, collection of clinical samples, vaccination, and other prophylactic measures or specific medical treatments [**Chapter 6**]
- Epidemiological studies and investigations
- Exhumation, necropsy, cremation, and handling of corpses
- Procurement of goods and services from natural and legal persons under the guarantee of a fair indemnity
- Exceptional and temporary imports and distribution of medicines, equipment, and supplies that were not previously registered with ANVISA, but are otherwise essential to fight the pandemic

(* In line with the [International Health Regulations \(IHR 2005\)](#), the Law defines **Isolation** as “*separation of ill or contaminated persons or luggage, containers, conveyances, goods or affected postal parcels from others in such a manner to prevent the spread of the coronavirus or contamination*”. **Quarantine**, in turn, is defined as “*restriction of activities and/or separation of suspect persons who are not ill or of suspect luggage, containers, animals, conveyances or goods in such a manner as to prevent the spread of the coronavirus or possible contamination*”.

Even though Brazil continues to experience widespread transmission, and is now only behind the United States in the number of coronavirus-related deaths, President Bolsonaro continues to play down the need for social distancing and preventive health measures and recently threatened to pull Brazil out of the WHO under the claim that it is a partisan political organisation. Meanwhile, some states implemented loose quarantine rules, while others imposed temporary lockdowns in some cities and metropolitan areas, either by a decision of the state governor or by court order.

While the Law stipulates that exceptional measures should only be taken based on scientific evidence and analysis of strategic health information available, poorly planned restrictive regulations have been gradually adopted by state and municipal administrations in a disorderly manner, sometimes overlapping or conflicting with federal regulations, leading to a general unawareness of the population about which guidelines to follow to slow down the spread of the virus. The increasing politicisation of the debate on the scope and extent of non-pharmacological measures further exacerbates public misinformation.

⁵ The *Grupo Executivo Interministerial de Emergência em Saúde Pública de Importância Nacional e Internacional* - GEI-ESPII (Interministerial Executive Group on Public Health Emergency of National and International Concern) was created by Decree 10,211 of 30 January 2020 (as amended) to monitor and articulate measures to prepare and deal with public health events, allocate budgetary-financial resources, establish guidelines and prepare reports of emergency situations

⁶ As regulated by Ministry of Health Ordinance 356 of 11 March 2020, Interministerial Ordinance 5 of 17 March 2020, and Federal Decree 10,282 of 20 March 2020, as amended

2.2. Essential services

Law 13,979/2020 and its subsequent amendments establish that, if adopted, the exceptional measures must safeguard the exercise and functioning of vital public services and essential activities. It also prohibits restricting the movement of key workers and the handling and transport of goods of any kind that could result in a shortage of necessary supplies for the population. Port and airport operation and cargo logistics services are among the activities considered essential.

On 15 April 2020, the Federal Supreme Court (STF) affirmed that, regardless of the Ministry of Health guidelines, states and municipalities of the federation have the authority to concurrently adopt norms and measures to combat the outbreak and decide, within the limits of their constitutional powers, which services and activities are considered essential in their jurisdiction.

2.3. Public services and businesses

As of mid-March 2020, all private businesses and public not defined by law as essential services have been forced to close temporarily, with employees working from home, whenever possible. Labour legislation has been reformed to allow employers to enter into agreements with employees seeking to preserve jobs during the pandemic by way of teleworking, early vacation or holidays, collective vacation, comp time, reduced working hours with proportional wage reduction, among others arrangements.

Employers are responsible for taking measures to reduce the risk of transmission in the workplace and to ensure compliance with the health guidelines and recommendations issued by the authorities. They are also responsible for assuring that employees who display symptoms or have been tested positive for COVID-19 are adequately isolated and cared.

2.4. Courts and procedural deadlines

To standardise procedures across Brazilian law courts, except the high courts, since 19 March 2020, [National Justice Council \(CNJ\)](#), suspended judicial timeframes for digitalised and physical proceedings. The duration of the suspension varies between state civil courts. The federal and labour court systems have also implemented suspensions in varying lengths. An extraordinary duty regimen was put in place, with magistrates and lawyers working remotely⁷. Despite the temporary suspensions, time bars (statute of limitations) continue to flow throughout the pandemic and can only be prevented judicially.

From 18 March 2020, the [Maritime Tribunal](#) (Admiralty Court)⁸ successively suspended time limits. Judgment sessions were eventually resumed via videoconference since 22 April 2020 and, currently, procedural deadlines are halted until 26 June 2020 and face-to-face hearings and judgements until 17 July 2020⁹.

2.5. Reopening and economic recovery

Under the allegation that the public health network was expanded and upgraded to cope with the demand of COVID-19 patients, as of the second week of June 2020, some states on their own, notably Rio de Janeiro, São Paulo, Ceará (Fortaleza), Pará (Belém), Amazonas (Manaus) and Pernambuco (Recife), which together account for almost half of COVID-19-related deaths, put in place protocols to ease quarantine and reopen a wide range of economic activities, such as bars, restaurants, shopping malls, parks, and tourist attractions.

⁷ Given that courts in different jurisdictions have adopted distinct suspensions and duty regimes, the official website of the specific court must be consulted for the preventive measures adopted and the applicable timeframes

⁸ The *Tribunal Marítimo* (Maritime Tribunal) is an administrative, autonomous body auxiliary of the judiciary branch linked with Ministry of Defence and the Navy Command. It is based in Rio de Janeiro and has jurisdiction to judge accidents and facts of navigation and to manage the Brazilian Special Ship Registry (REB)

⁹ Ordinance TM 28 of 10 June 2020 extended suspension of procedural time limits until 26 June 2020 and Normative Act 5 of 10 June 2020 suspended in-person attendances in the Maritime Tribunal until 17 July 2020

3. Travel restrictions

3.1. International travel policy

The [National Health Surveillance Agency \(ANVISA\)](#) is the federal regulatory agency under the purview of the Ministry of Health with jurisdiction over sanitary surveillance in Brazilian points of entry. ANVISA is the National Focal Point for the enforcement of the IHR 2005 in Brazil, and for advising the federal government on the emergency health measures to be taken to address the outbreak, including restrictions on the entry and departure of persons, goods, and conveyances in Brazilian ports, airports and land crossings¹⁰.

WHO standing advice is against restricting travel or trade to countries affected by COVID-19 and in favour of measures compatible with the public health risk posed? Nonetheless, following ANVISA recommendations, Brazil gradually put in place exceptional and temporary restrictions on the entry of foreign nationals; first banning the arrival by air of citizens from selected countries, then closing all borders to non-resident foreign nationals, regardless of nationality.

3.2. Restrictions in place

Currently, air, sea and land borders are closed to non-resident foreign citizens until at least 22 June 2020. The cross-border public transport will remain suspended until 31 August 2020.

Failure to comply with the travel restrictions will subject the offender to civil, administrative, and criminal liabilities, repatriation, deportation, or disqualification of asylum or refugee status if any.

3.2.1. Air travel

On 19 March 2020, the government imposed a 30-day ban on the entry by air of foreign citizens arriving from specific countries (Australia, China, EU Members, Iceland, Iran, Japan, Korea, Malaysia, Norway, Switzerland, and the United Kingdom).

The restriction was amplified on 27 March 2020 to include all non-resident foreigners, and its effect was extended for successive 30-day periods on 28 March 2020 and, on 22 May 2020, the latter under [Interministerial Ordinance 255](#) of 22 May 2020, which also prohibits entry by sea and by land. Therefore, the ban on air travel will remain in place until at least 22 June 2020¹¹, except for foreign travellers falling into one of the following categories:

- Foreign nationals with definite permanent residence
- Professionals employed on a mission for an international organisation
- Foreign passengers in international transit, if they do not leave the airport's international area and the country of destination admits their entry
- Officials accredited to the Brazilian Government
- Spouse, partner, child, parent, or guardian of a Brazilian national
- Foreign nationals whose entry is authorised by the Brazilian Government in the public interest or for humanitarian reasons
- Bearers of the National Migration Register card (RMN)
- International flight crews and airlines employees in the country for operational purposes

Air cargo transport and technical landings for refuelling where foreign passengers are not disembarking are also exempt.

¹⁰ Art. 3, IV, of Law 13,979/2020, as amended by Provisional Measure nº 926 of 20 March 2020

¹¹ Interministerial Ordinance 126 of 19 March 2020; Interministerial Ordinance 152 of 27 March 2020; Interministerial Ordinance 203 of 28 April 2020 and Interministerial Ordinance 255 of 22 May 2020

The airline is responsible for ensuring that foreign travellers remain in the transit area, under the supervision of the immigration authority (Federal Police). In the event of a delay of more than six hours or flight cancellation, the carrier will provide material assistance to foreign travellers, including food, transfer and accommodation. The airline will report the case to the Federal Police for their evaluation on the need to lodge stranded passengers outside the airport, for carrier's account and responsibility.

In April 2020, ANVISA issued its revised "[Guidelines on Sanitary Measures for Aircraft Crew in Brazil](#)" with detailed advice for aircrews in the combat against COVID-19.

In line with international civil aviation agencies and authorities, the [National Civil Aviation Agency \(ANAC\)](#) discourages unnecessary air travel. As most countries around the world have closed their borders and airspace – and Brazil's air network is operating to a minimum –, ANAC recommends those who need to travel to access the [travel database](#) of the [International Air Transport Association \(IATA\)](#) and the websites of the destination country and the airline to check if there are restrictions or closures in place.

ANVISA recommends social distancing and home isolation for at least one week for asymptomatic travellers arriving from abroad, and two-weeks quarantine for those displaying symptoms of COVID-19.

3.2.2. Land travel

Brazil is the largest and most populated country in South America, and, except for Chile and Ecuador on the West Coast, it borders all other countries in the continent.

On 17 March 2020, the entry by land of Venezuelan nationals was restricted for 15 days. On 31 March 2020, this ban was extended for 30 days¹².

On 19 March 2020, the government also closed the land borders with all its neighbouring countries but Uruguay and Venezuela (Argentina, Bolivia, Colombia, French Guiana, Guyana, Paraguay, Peru, and Suriname). It extended it for another 30 days from 2 April 2020¹³.

On 22 March 2020, a 30-day restriction was placed in the entry of nationals from Uruguay and extended for 30 days beyond 20 April 2020¹⁴.

On 29 April 2020, the government restricted, for 30 days, the entry by land of all foreign nationals¹⁵. Eventually, on 22 May 2020, Ordinance 255/2020, repelled previous regulations and imposed a 30-day ban on the entry of foreigners, by air, sea or land¹⁶, except for:

- Foreign nationals with definite permanent residence, except Venezuelans
- Professionals employed on a mission for an international organisation
- Officials accredited to the Brazilian Government
- Spouse, partner, child, parent, or guardian of a Brazilian national
- Foreign nationals whose entry is authorised by the Brazilian Government in the public interest or for humanitarian reasons
- Bearers of the National Migration Register card (RMN)

¹² Interministerial Ordinance 120 of 17 March 2020 and Interministerial Ordinance 158 of 31 March 2020

¹³ Interministerial Ordinance 125 of 19 March 2020 and Interministerial Ordinance 8 of 2 April 2020

¹⁴ Interministerial Ordinance 132 of 22 March 2020 and Interministerial Ordinance 195 of 20 April 2020

¹⁵ Interministerial Ordinance 204 of 29 April 2020

¹⁶ Interministerial Ordinance 255 of 22 May 2020

Restriction on the entry of non-resident foreign citizens will continue at least until 22 June 2020. However, the [National Land Transportation Agency \(ANTT\)](#) prohibited cross-border public transportation until 31 August 2020, save for the return of Brazilians or foreign citizens to their respective country of origin and to transport key workers to their workplaces and ill persons seeking medical treatment¹⁷.

The closure of the ground crossings does not prevent the free traffic of international road freight, even if a foreign driver does not fit in any of the exemptions. Likewise, vehicles in cross-border humanitarian actions previously authorised by the local health authority and residents of twin cities exclusively with a land border are free to transit upon proof of border residency.

A foreigner who is in one of the land border countries and needs to cross the border to Brazil to catch a flight back home may exceptionally be authorised by the Federal Police to enter the country and head directly to the airport to board the scheduled flight, provided an official request is made by the foreigner's consular authority, and proof of travel (ticket for the entire journey) is produced to the immigration authority.

Interstate and intercity public transportation of passengers remains operative, albeit with a reduced service.

3.2.3. Sea travel

Because of the growing number of shipborne COVID-19 cases and escalating travels restrictions imposed by some port cities, the 2019/2020 cruise season in Brazil was voluntarily called off by most cruise operators since early March 2020, about a month ahead of schedule. Future departures were cancelled at once, and vessels laying in Brazilian ports underwent a 14-day quarantine before passengers could disembark for repatriation. Some vessels already underway decided to turn back to Brazil to land passengers after completing health screenings and quarantine measures under the supervision of ANVISA¹⁸.

On 25 March 2020, the [National Commission of Port Authorities \(Conaportos\)](#)¹⁹ issued Resolution 2 to guide public entities and companies operating in Brazilian ports and port facilities. The Regulation determined the immediate suspension of new cruise departures and restricted landing of passengers and crewmembers. Although asymptomatic Brazilian passengers and crew could disembark to quarantine at home, foreign nationals, with symptoms or not, had to be isolated on board before air repatriation, except where there was a need for hospitalisation ashore. Resolution 2/2020 was replaced by [Resolution 3](#) of 27 May 2020, which mirrors basic standards adopted by ANVISA and the [National Waterways Transportation Agency \(ANTAQ\)](#) concerning the carriage of passengers within Brazilian inland waterways²⁰.

On 27 March 2020, the government restricted the entry of all foreigners arriving by sea for 30 days. The suspension was first extended for 30 days on 24 April 2020 and, again for another 30 days, on 22 May 2020, this time under Ordinance 255/2020, which temporarily closed Brazil's air and land borders as well.

¹⁷ MINFRA/ANNT Resolution nº 5,893 of 2 June 2020

¹⁸ ANVISA maintains a dedicated website with its "[Brazilian Sanitary Guide for Cruise Ships](#)" in English

¹⁹ The *Comissão Nacional de Autoridades nos Portos* – Conaportos (National Commission of Port Authorities) is chaired by the Ministry of Infrastructure's Secretariat of the Ports and comprise members of the other ministries as well as ANVISA and ANTAQ

²⁰ ANTAQ Resolution 7,653 of 31 March 2020 provides recommendations to port administrations, port facilities and companies engaged in the carriage of passengers and ensures the circulation of key workers and handling of cargoes that may result in a shortage of necessary supplies for the population. It was replaced by Resolution 7,781 of 29 March 2020, which will remain in force for as long as the state of health emergency persists

Disembark of foreign nationals at Brazilian waterways is therefore prohibited until 22 June 2020, except for individuals fitting in one of the categories listed below:

- Foreign nationals with definite permanent residence
- Professionals employed on a mission for an international organisation
- Officials accredited to the Brazilian Government
- Spouse, partner, child, parent, or guardian of a Brazilian national
- Foreign nationals whose entry is authorised by the Brazilian Government in the public interest or for humanitarian reasons
- Bearers of the National Migration Register card (RMN)

The ban on entry of foreigners by waterways does not prevent the continuity of cargo loading, transport and discharge without disembarking foreign crews except for medical assistance or when the seafarer needs to board a connecting flight back home. **[Chapter 6]**

3.3. Airport operation

On 15 May 2020, ANVISA issued [Technical Note 101/2020](#) with a revised set of measures and recommendations to protect travellers and aircrews and prepare the air sector to recover travel demand. These guidelines include:

- Use of PPE by workers and public servants, where necessary
- Audible warnings on flights, national and international boarding and disembarking areas
- 2-metre distance between people at the airport
- Discourage crowding in airport food courts, check-in counters, boarding gates and bridges, and during boarding and disembarking
- Use of face mask by passengers, aircrews and airport employees in general
- Disinfection of passenger areas (boarding gates and bridges, aircraft, buses and public spaces)
- Carefully organise for passenger boarding, and disembark in rows, starting with the seats located in front of the plane, while the other passengers remain seated until their turn to deplane
- Suspension of onboard service on domestic flights is recommended. If maintaining this service, the airline should prioritise food and drinks in individual packages, sanitised before service
- On international flights, food and beverages must ideally be served in individual packages, sanitised before service

Following WHO recommendations, ANVISA is not carrying out passenger screening at Brazilian airports, regardless of the traveller's airport of origin. Only symptomatic passengers are monitored by the federal health agency. The Federal Supreme Court (STF) confirmed that the sanitary control of restricted areas within airports is under the jurisdiction of ANVISA instead of state or municipal health authorities.

Airport transfers are undisturbed despite the quarantine measures in place in some cities. All major airports are open with reduced staff and limited services to passengers. Only an essential domestic air network is operating to cover most capitals and some major cities.

Currently, around forty cities are being served with a minimal number of weekly flights, corresponding to a 90% drop in the offer of domestic flights. International flights are even scarcer, with the reduced air fleet focused on repatriation of Brazilians who are abroad and on cargo carriage.

4. Ship and port health controls

4.1. Regulations

ANVISA sets the standards for enhanced health surveillance and controls at Brazilian points of entry. Since the coronavirus reached Brazil in February 2020, the federal health agency has published a wide range of recommendations, guidelines, and procedures in the form of technical notes, information notes and resolutions, which are regularly updated following Ministry of Health's epidemiological bulletins and WHO guidelines and recommendations.

Specific health measures and controls were issued and are regularly updated for land borders and vehicles ([Technical Note 40/2020](#) of 25 March 2020); airports and aircraft ([Technical Note 101/2020](#) of 15 May 2020); and ports, ships and platforms ([Technical Note 128/2020](#) of 9 June 2020). These standards are enforced by the federal regulatory agencies (ANAC, ANTAQ and ANTT, respectively), which also issued specific guidelines of their own as the outbreak evolved.

Under the current regulatory framework, cargo vessels arriving from overseas are not subject to automatic quarantine. They will receive the free pratique certificate to enter the port, embark and disembark, and discharge or load cargo and stores after a remote documentary review by ANVISA, on the condition that those aboard are healthy and have not been ashore in the past 14 days since the last port abroad, except where the landing of crewmembers is essential to the operation.

4.2. Preventive health measures

Technical Note 128/2020 and related protocols establish preventive measures to be taken by vessels, platforms, port administrations, port workers and service providers to avoid contagion and to manage shipborne COVID-19 cases, as summarised below.

4.2.1. Vessels arriving from overseas

- Adhere to the IHR 2005, flag state and ANVISA regulations
- Provide a copy of the medical logbook for the past 30 days and the Maritime Declaration of Health, filled out in the ANVISA form when applying for the free pratique certificate²¹
- ANVISA will grant the free pratique remotely unless there is a health event on board or crew disembarks within the last 14 days since departure from the previous port of call abroad
- In case of a COVID-19 event, ANVISA's specific protocols should be adopted, and the free pratique will be issued after a [shipboard sanitary inspection](#) [Chapter 5]

4.2.2. Port authorities and operators

- Adhere to the IHR 2005 and relevant ANVISA regulations
- Supervise port terminal cleaning staff on enhanced cleaning and sanitation procedures, HVAC systems, and promote the use of adequate PPE
- Provide sanitising stations (fitted with soap, running water and tissue) or points with alcohol-based hand rub dispensers, and display signage with hand hygiene recommendations
- Update contingency plans for response capacity where necessary
- Suspend mass gatherings and private events in port areas during the pandemic

²¹ The documents provided by the vessel to the shipping agents is submitted electronically to ANVISA stations via the Paperless Port (PSP) single-window system for preliminary documentary review and issuance of the Certificate of Free Pratique. ANVISA may request additional information or carry out a sanitary inspection on site before granting the Certificate

4.2.3. Port service providers

- Promote the use of adequate PPE and hand hygiene recommendations
- Reinforce cleaning and sanitation procedures at terminals and conveyances, with emphasis on places such as toilets, drinking fountains, and frequently touched objects and surfaces²²
- Reinforce the use of PPE by workers handling shipboard wastewater and sewage depletion
- Pilots may carry out ship berthing manoeuvres wearing adequate PPE observing the measures outlined in the "[Recommendations for Pilotage Services During COVID-19 Pandemic](#)" issued by ANVISA in May 2020

4.2.4. Port workers and visitors

- Use appropriate PPE and adopt safety practices
- Frequently hand wash with soap and water. When the hands are not visibly dirty, alcohol-based sanitiser can be used
- Keep a minimum distance of 2 meters from the others
- Adopt respiratory etiquette:
 - Use a disposable tissue for nasal hygiene
 - Cover nose and mouth when sneezing or coughing
 - Avoid touching mucous membranes of the eyes, nose and mouth
 - Hand hygiene after coughing or sneezing

4.2.5. Port health authorities

- Communicate recommendations regarding the use of adequate PPE and protective health measures to public servants, and other workers in direct contact with visiting crews
- Issue guidelines and recommendations for travellers based on the epidemiological bulletins and disseminate informative material in Portuguese and English, as available on the Ministry of Health website
- Review and verify documentation provided by the vessel and issue the free pratique in the absence of a health event, otherwise, issue free pratique after a sanitary inspection

²² Cleaning and disinfection should be performed at least three times a day (morning, afternoon and evening) with water and soap or detergent and disinfected with a 0.5% [5,000 ppm] hypochlorite solution after rinsing

5. Shipboard COVID-19 cases

5.1. Responsibility matrix

The various regulations issued by the authorities lay down the general recommendations and procedures to be adopted to prevent contagion. ANVISA regulations define the response to a suspect or confirmed case²³ of COVID-19 infection and allocate the role and responsibilities of stakeholders, as summarised below.

5.1.1. Shipowner (or cruise operator)

- Undertake full financial liability for affected crewmembers and passengers embarking and disembarking in Brazil throughout their stay until repatriation
- Review and enforce contingency plans on procedures for embarking and disembarking of crewmembers and access of shore workers and other service providers
- Ensure the wellbeing and medical assistance to crew and passengers, including pre-boarding and pre-repatriation screenings
- Procure appropriate location for quarantine (onboard or in a hotel, as agreed with ANVISA)
- Arrange daily health monitoring during quarantine on board or ashore, and psychological support when needed
- Keep ANVISA informed of the progress of suspect cases in isolation
- Arrange repatriation of crewmembers upon completion of quarantine or medical discharge

5.1.2. Master

- Adopt the measures provided for in relevant regulations and recommendations, particularly those issued by IMO, WHO, ILO, flag state, and ANVISA
- Submit required documents to the authorities, through the shipping agency, and inform:
 - Origin of the suspect case, including the previous ports of call
 - General status of the suspect case
 - If the suspect case travels alone or in a group and, if so, how many people
 - Total number of people on board
 - Type of vessel
 - ETA at the next berth
 - Autonomy (fuel, water, food and stores)
- Designate a crewmember, wearing appropriate PPE, to tend to the suspect case
- Report other health events to ANVISA

5.1.2. Crew

- Provide a hospital mask to the suspect case. If he is unable to wear it because of breathing difficulties, he should be provided with towels or tissue and exercise respiratory etiquette
- Accommodate the suspect case in an individual cabin (do not use the cabin previously occupied by the suspect case before it is decontaminated and disinfected)
- If possible, assign a toilet for the exclusive use of the suspect case; otherwise, regularly clean frequently touched objects and surfaces with soap and water or disinfectant
- Avoid sharing glassware, cutlery and dishware. These must be cleaned and disinfected with sodium hypochlorite or, ideally, replaced with disposable utensils

²³ In the context of the International Health Regulations (IHR 2005) and the regulations of Brazil's Ministry of Health, a "suspect case" means those persons who have been potentially exposed to public health risk and could be a possible source of disease spread while a "confirmed case" means those persons who have been confirmed by medical examinations to be infected or contaminated, or who carry sources of infection or contamination, constituting a public health risk

5.1.3. Health authority

- Request vessels in international and national transit with a suspect case to provide the medical logbook for evaluation, together with the Maritime Declaration of Health, crew list and Ship Sanitation Certificate **[Chapter 7]**
- After assessment of the case in conjunction with the epidemiological surveillance service, ANVISA will define if:
 - the case will be discarded (diagnosis of a disease other than COVID-19)
 - the affected person will be quarantined on board the vessel, or
 - the affected person will be disembarked for medical assistance or quarantine ashore
- Inform the maritime authority, port authority and shipping agency if the vessel with a confirmed case should be directed to an anchorage point designated for quarantine
- Advise the affected person to remain in isolation for 14 days (after medical examination) and seek health care in case of worsening of clinical condition, especially shortness of breath
- Advise close contacts, through express notification, of the need for self-isolation for 14 days

5.2. Handling suspect cases

ANVISA's Technical Note 128/2020 and correlated regulations are complemented by its "[Protocol for Detection and Attendance to Suspect Cases of COVID-19 in Ports, Airports and Ground Crossings](#)", which consolidates guidelines on the handling of COVID-19 cases at the points of entry and aboard vessels, platforms and aircraft in Brazilian territory.

5.2.1. Case detection underway

If a suspect case of COVID-19 is detected with the vessel en route to a Brazilian port, ANVISA will only issue the free pratique after the case is discarded or quarantine completed. A medical team arranged by the shipowner may visit vessels at anchorage or alongside for medical examination and collection of material from suspect cases, under ANVISA supervision. If the infection is discarded, the ship will receive free pratique; otherwise, the health authority will decide whether the confirmed case will be isolated aboard or disembarked for medical care.

The affected crewmember or passenger will remain in quarantine for 14 days, and the vessel directed to a specific anchorage point, or a layby berth, as defined in the port contingency plan or as agreed with the local authorities.

The maritime authority ([Brazilian Navy](#)) is responsible for coordinating medical evacuations at sea following the protocols related to the use of PPE and cleaning and disinfection procedures. ANVISA, or the local port authority in its absence, will oversee the transfer of the suspect case to a healthcare unit arranged by the shipowner or its shipping agents.

If infection by COVID-19 is ruled out, the vessel will be cleared to resume the voyage.

5.2.2. Case detection in port

If the suspect case is confirmed during the port stay, the crew will not be allowed ashore for 14 days from the onset of symptoms (or positive test) of the latter shipborne case, except for medical assistance not available aboard.

Cargo operations may be suspended, and the vessel prevented from leaving the port or be shifted to the anchorage area, at the discretion of ANVISA, until the quarantine period is concluded without new health events.

5.3. Disembark from an affected vessel

Mildly symptomatic Brazilian travellers may be allowed to disembark to quarantine at home or in a hotel after a medical examination by a doctor appointed by the shipowner and with the assurance of safe transfer home. Suspected cases will also be allowed ashore for medical treatment irrespective of nationality.

Close contacts (persons who have had contact with suspect cases) may be allowed to disembark to quarantine ashore upon medical examination and prescription in that regard.

5.4. Embark of affected persons

The boarding of symptomatic persons will not be allowed, except on the inland waterways of the Amazon Region, where affected travellers can be transported by boat to seek riverside healthcare, provided they maintain social distancing and wear a face mask during the entire journey.

5.5. Quarantine on board

The measures for quarantine after the detection of a shipboard COVID-19 event is outlined in ANVISA's "[Protocol for Vessel Quarantine with Confirmed Case of COVID-19](#)". Under the Protocol, COVID-19 cases must be closely monitored throughout the shipboard quarantine, as follows:

- Twice a day, inquire the isolated person, through the telephone extension (it is not necessary to physically approach the interviewee) about his health condition and, if there are serious complaints, the ill person must be referred to a medical service ashore for examination, and the event reported to ANVISA for assessment of the case together with the epidemiological surveillance service
- If possible, hand out thermometers to each person on board for self-monitoring of body temperature, at least twice a day, during the quarantine
- Follow the protocols on cleaning and disinfection, bedding changing, laundering and waste removal
- Record all health events into the vessel's medical logbook
- Take meals inside the cabin and leave the utensils outside after use (in the corridor, next to the cabin's door) for collection and subsequent cleaning and disinfection, even if not used

Vessels under quarantine measures may be provided with regular services, such as the supply of fuels, water, food and stores and removal of residues and effluents upon ANVISA's prior approval.

5.6. Quarantine ashore

The health authority may exceptionally authorise the disembark of asymptomatic suspect cases for quarantine in a shore lodging are outlined in the "[Protocol for Quarantine of Travellers in Hotels](#)". When so authorised by ANVISA and the immigration authority (Federal Police), the following measures must be observed during quarantine ashore:

- After a medical examination when disembarking, including a rapid test for COVID-19, the shipowner must provide a place to keep affected persons in isolation for 14 days, counted from the onset of symptoms (or positive test result) of the latter suspect case
- Travellers must be distributed on floors reserved for isolation purposes, in individual rooms, except when accompanied, for example, in couples. If occupying more than one level, prefer sequential floors at either end of the building (rooms on upper or lower floors) not accessible to other guests
- The rooms must have windows and be well-ventilated
- Travellers must remain in the hotel room until the repatriation plan is approved by the authorities
- Shipowner's medical team must monitor isolated persons by telephone and ask them twice a day about their health condition and report to ANVISA, even if there are no symptoms or complaints
- If possible, hand out thermometers to each person in isolation for self-monitoring of body temperature, at least twice a day, during the quarantine

- Strictly follow the protocols and guidelines on cleaning and disinfection, bedding changing, laundering and waste removal
- Take meals inside the room and leave the utensils outside after use (in the corridor, next to the room's door) for collection and subsequent cleaning and disinfection, even if not used
- Provide advice and counselling on psychological care and arrange means of improving the wellbeing and mental health of the isolated persons by adopting measures such as:
 - Unlimited Wi-Fi connection to enable phone and video calls with friends and relatives
 - TV package with as many channels as possible for entertainment
 - Step out of the room in small groups (wearing face masks and adopting social distancing) from time to time, unless the isolated person is symptomatic

5.7. Completion of quarantine

Upon completion of the 14-day quarantine on board or ashore, the affected person will be submitted to a medical examination, which may include rapid tests for COVID-19, to certify fitness for duty or travel. For air repatriation, the traveller must fill out a specific form ("[Pre-boarding Public Health Screening for Repatriation Flights](#)") and submit it to the authorities and the airline for approval of the exercise.

If there has been no new health event on board during the quarantine period, the suspect vessel will be cleared to operate or leave the port. ANVISA may exceptionally agree to allow affected vessels trading in the cabotage to complete the quarantine underway or at an anchorage area of another Brazilian port.

5.8. COVID-19 testing

The Ministry of Health and ANVISA adopt [WHO guidelines](#) for testing procedures of suspected cases.

Rapid tests for COVID-19 are acceptable as part of a health assessment of vessels calling at national ports and for pre-boarding and pre-disembark crew screenings, which are performed by private health professional with test kits approved by ANVISA. If the serological test is positive, an additional molecular laboratory analysis is recommended to confirm the diagnosis. **[Table 1]**

Test type			Interpretation
Molecular	Serology		
rRT-qPCR	IgM	IgG	
Positive	Negative	Negative	Patient may be in the window period of infection
Positive	Positive	Negative	Patient may be in the early stage of infection
Positive	Positive	Positive	Patient may be in the active stage of infection
Positive	Negative	Positive	Patient may be in a late or recurrent stage of infection
Negative	Positive	Negative	Patient may be in the early stage of infection. PCR test result may be false negative, or the antibody test result may be false positive
Negative	Negative	Positive	Patient may have had an infection and has recovered, or the antibody test result may be false positive
Negative	Positive	Positive	Patient may be in the recovery stage of an infection, or the PCR result may be false negative, or the antibody test result may be false positive

Table 1: clinical interpretation of molecular and serological test result for COVID-19 (Source: WHO/Ministry of Health/ANVISA)

ANVISA points out that all tests currently available have a varying degree of uncertainty and inaccuracy. While it is possible to determine whether an individual is or has been infected with the coronavirus, no test can completely rule out whether a person, showing symptoms or not, has been exposed to the SARS-CoV-2 virus and will develop the disease. Depending on the stage of the infection, the test may be false positive or false negative; therefore, ANVISA may keep emergency health measures in place based on clinical-epidemiological information regardless of a negative test negative.

6. Crew change and repatriations

6.1. Seafarer status

Brazil ratified Convention C185²⁴ of the [International Labour Organisation](#), which came into force in 2015 and expressly denounced the previous Convention (ILO C108)²⁵. Nevertheless, Brazilian immigration authority (Federal Police) accepts seaman's books issued under both Conventions. For the purposes of the immigration regulations, any member of the crew who holds a valid seaman's book and performs professional duties onboard a ship is a professional seafarer²⁶.

6.2. Seafarer exemption

On the outset of travel bans in response to COVID-19, the government restricted the disembarkation of all non-resident foreign citizens arriving by sea, except for medical care not available onboard or to catch a connecting flight to the country of origin. As airspace was also closed to all foreigners, without exception for seafarers, it was then virtually impossible to transfer maritime crews in Brazilian ports.

Ultimately, [Interministerial Ordinance 255/2020](#) extended entry restrictions by air, land and sea until 22 June 2020. However, at the same time, it authorised for the first time since the borders were closed, entry and stay of foreign seafarers holding a valid seaman's book or passport issued by an ILO-signatory member state²⁷.

6.3. Shore leave

No crewmember can go ashore for 14 days from the departure of the last foreign port, except for medical assistance, repatriation upon the termination of a contract of employment or when the landing is essential to the operation. Some private terminals restricted or even suspended crew shore leaves and imposed stringent hygiene and sanitation protocols for the interface with shoreside personnel.

6.4. Crew change

Since 22 May 2020, the Federal Police have allowed the entry of ILO certified seafarers, whose admission is required by the shipping agent to perform specific duties aboard a ship or platform operating in Brazilian waters. It is also possible to disembark seafarers for medical assistance and direct repatriation²⁸.

Crew movements are subject to the carrier or shipping agent providing an undertaking to the immigration authority to bear the costs and expenses associated with the stay and repatriation of the foreign seafarer, together with the consent of the port health authority and the corresponding tickets for the entire journey²⁹.

ANVISA has published its guidelines on the "[Procedures for Embarking and Disembarking Crews of Ships and Platforms](#)" to identify suspect cases of COVID-19 and to contain the spread of the virus. It also covers procedures for rapid testing, voluntary or compulsory quarantine, and guidelines for disinfecting conveyances used in the transfer of suspect cases.

²⁴ ILO C185: Seafarers' Identity Documents Convention (Revised), 2003 (n° 185). Entry into force: February 2005

²⁵ Brazil ratified ILO C185 in 2010 and enacted it through Decree 8,605/2015, revoking Decree 58,825/1966 that used to regulate ILO C108. ILO C185 provides that the seaman's book can only be issued to a national or to a permanent resident of the issuing country

²⁶ Art. 6 of ILO C185; art. 4, sole paragraph of Normative Resolution 5 of December 2017 (IN 5/2017)

²⁷ The provision does not exempt the holder of the passport from the obligation to carry an entry visa when one is required by Law (art. 5, VII, § 3 & 4 of Interministerial Ordinance 255/2020)

²⁸ The signing off crewmember must be transferred from the vessel directly to the airport. Only in exceptional cases the authorities may allow the off signer to stay in overnight accommodation to board the outward flight the next day

²⁹ Arts. 41 & 42 of the Migration Law; arts. 172, 174 & 175 of Decree 9,199/2017; art. 5, VII, § 2, of Interministerial Ordinance 255/2020

Land transfers of seafarers must comply with standing preventive health measures and be carried out exclusively in private vehicles; no public transport is permitted. The crewmember must wear a mask, sit in the rear seat and keep the windows open with the air conditioning off. The driver should be asked to wear a mask, and the vehicle disinfected after service³⁰. The transfer should be coordinated to ensure that contacts between the crewmember and the hotel, transfer and airport staffs are kept to a minimum.

ANVISA must be informed about the form and location of the quarantine. A healthcare professional or the shipping agent must inquire the crewmember, by teleconsultation no less than twice a day, about his health condition, including the presence of symptoms and body temperature. The health monitoring log of the quarantine must be sent to ANVISA for permission to embark or disembark.

6.4.1. Joining a vessel

- Crewmembers must quarantine at home **[Table 2]** if Brazilian or permanent resident, or in a hotel **[Table 3]** if non-resident, for 14 days, before embarking on a vessel
- The crewmember who did not present symptoms throughout the quarantine will join the ship after the shipping agent provides ANVISA with the health monitoring log for the past 14 days and the day of boarding together with the result of the rapid test for COVID-19
- The crewmember who displays respiratory symptoms, with or without fever, must be prevented from joining the ship and will have to undergo compulsory quarantine **[Table 4]** by medical prescription accompanied by the free will and consent form, as laid down in Annex I of the [Ministry of Health Ordinance 356](#) of 11 March 2020. Symptomatic crewmember must be instructed to seek medical assistance in case of worsening of his general state, especially shortness of breath, and to inform if a person who shares a residence with him has tested positive to COVID-19, in which case all residents must undergo compulsory quarantine for 14 days from the onset of symptoms
- The return for duty of a crewmember who remained isolated for 14 days may only occur after the symptoms disappear and a new medical examination, including a rapid test for COVID-19, has been carried out and conditioned to the crewmember being asymptomatic for at least 72 hours

6.4.2. Leaving a vessel for repatriation

- The shipowner should concentrate the landing of suspected cases in places with better healthcare facilities, as authorised and guided by ANVISA
- Disembark of an asymptomatic crewmember to board a flight home upon completion of his duties on board, should only occur after a medical examination, including a rapid test for COVID-19 whenever possible. ANVISA will issue a Sanitary Control of Traveller Form (TCSV) authorising the disembark and will forward it to the Federal Police according to the flow of information agreed locally³¹
- Brazilian crewmembers with mild symptoms may be allowed for isolation at home or in a hotel, after a medical examination and guarantee of safe transfer
- The crewmember who displays respiratory symptoms, with or without fever, must undergo compulsory quarantine by medical prescription accompanied by the free will and consent form (Annex I of Ordinance 356/2020). He must be instructed to seek medical assistance in case of worsening of his general state, especially shortness of breath. Close contacts must be notified, by medical prescription (Annex II of Ordinance 356/2020), to undergo compulsory quarantine

³⁰ All the touchable surfaces and materials must be sanitised, particularly: doorknobs, handles, seat belts, hand grips, dashboards, pullers, among others. The cleaning must be made with water and soap and the disinfection must be made with alcohol 70% or sodium hypochlorite 0.5%. Observe the use of PPE

³¹ ANVISA Informative Note 2/2020 of 29 May 2020

- ✓ Stay in home isolation for 14 days
- ✓ Follow preventive health recommendations: wash your hands frequently with water and soap or, when the hands are visibly dirty, use alcohol-based hand sanitiser; maintain respiratory etiquette, avoid touching the eye, nose and mouth mucosae if your hands are unclean
- ✓ Keep a distance of at least 2 metres from others
- ✓ Wear a reusable cloth mask and follow ANVISA guidelines for mask sanitation and disinfection
- ✓ Avoid the circulation of non-resident persons
- ✓ Monitor your health for COVID-19 signs and symptoms and report them to the shipowner
- ✓ Keep the room well ventilated

Table 2: guidelines for home quarantine

- ✓ Stay in hotel isolation for 14 days
- ✓ Follow preventive health recommendations: wash your hands frequently with water and soap or, when the hands are visibly dirty, use alcohol-based hand sanitiser; maintain respiratory etiquette, avoid touching the eye, nose and mouth mucosae if your hands are unclean
- ✓ Have your meals in the room. If not possible, keep a distance of at least 2 metres from others
- ✓ Wear a reusable cloth mask and follow ANVISA guidelines for mask sanitation and disinfection
- ✓ Avoid circulating in the hotel premises
- ✓ Monitor your health for COVID-19 signs and symptoms and report them to the shipowner
- ✓ Keep the room well ventilated

Table 3: guidelines for hotel quarantine

- ✓ Stay in home or hotel isolation for 14 days
- ✓ Always wear a disposal hospital mask
- ✓ Should you need to cook, wear a protection mask, covering mouth and nose
- ✓ After using the toilet, wash your hands with water and soap and always clean the toilet seat, sink and other surfaces with alcohol 70% or sodium hypochlorite for disinfection of the room
- ✓ Separate bath towels, glassware, cutlery, etc. for the use of the symptomatic person
- ✓ The refuse produced needs to be separated and discarded, preferably with the use of individual trash bins and double bags
- ✓ The clothing of the isolated crewmember must be washed separately from the others
- ✓ Coaches and chairs may not be shared and need to be frequently cleaned up with sodium hypochlorite or alcohol 70%
- ✓ Keep the window open for air circulation in the room used for isolation and the door shut; clean the knob frequently with sodium hypochlorite or alcohol 70%
- ✓ Clean the furniture frequently with sodium hypochlorite or alcohol 70%
- ✓ In case the patient does not live alone, the other residents must sleep in another room, away from the infected person, observing a minimum distance of 1 metre between the patient and the others
- ✓ In case a second person has an onset of symptoms, he must reinitiate isolation for 14 days

Table 4: guidelines for compulsory quarantine

7. Ship and crew certification

7.1. Ships' and seafarers' documents

To ensure minimal disruptions to maritime trade throughout the pandemic, Brazilian Navy's [Directorate of Ports and Coasts \(DPC\)](#), representing the maritime authority, granted automatic extensions for a period of up to 120 days after the expiration of certificates and documents issued for Brazilian vessels, foreign vessels operating in national waters, and seafarers, which expiry before 1 August 2020³². The extensions were [communicated to IMO on 14 April 2020](#) for circulation and apply as follows:

7.1.1. Ships and platforms

- Vessel register and small vessel register (TIE/TIEM)
- Provisional document of property (DPP) and protocols for registration, transfer of ownership or jurisdiction of Brazilian ships
- Annual, intermediate and renewal surveys relating to statutory certificates issued under IMO conventions and the [Brazilian Maritime Authority Standards \(NORMAM\)](#)
- International oil pollution prevention certificate (IOPP Certificate)
- Statement of compliance for the operation of platforms
- Statement of completion for the carriage of alcohol, oil and its derivatives
- Permits for operation or permanence of a foreign vessel in Brazilian jurisdictional waters
- Condition survey statement for bulk carriers
- Licenses for researching sunk, submerged, grounded or lost objects and goods in Brazilian waters (extension counted from the date the permits were granted)

7.1.2. Seafarers and maritime workers

- Brazilian seaman's book (CIR) personal data labels expiring until 30 June 2020
- Certificate of competence (DPC-1031/33) and proficiency (DPC-1034)
- Complementary course and training certificates issued by institutions accredited to DPC

7.2. Ship sanitation certificates

Foreign vessels operating in Brazilian waters and Brazilian vessels sailing overseas must have a ship sanitation certificate (SSC) under the IHR 2005, which is valid for six months and extendable for one month. They are issued in the form of an SSCC (Ship Sanitation Control Certificate), when a health risk is detected on board and control measures have been taken, or an SSCEC (Ship Sanitation Control Exemption Certificate), when there is no evidence of a health risk and the vessel is free of vectors, reservoirs, infection or contamination. A valid SSC is required to obtain free pratique.

The domestic equivalents to the SSCC/SSCEC are the NSSCC (National Ship Sanitation Control Certificate) and the NSSCEC (National Ship Sanitation Control Exemption Certificate), respectively, which are valid for six months and must be on board Brazilian-flagged vessels that sail exclusively on national cabotage as well as manned platforms operating in Brazil³³.

When preventive health measures were heightened in Brazil from mid-March 2020, ANVISA suspended the issuance of SSCs and started to offer 30-day extensions, under the condition that the extension request was submitted before the certificate expires, unless the master could convince the authority that, due to the vessel's rotation and quarantine restrictions along the way, it was not possible to obtain renewal or extension before arriving in Brazil. Otherwise, the ship would have to undergo a sanitary inspection to receive a new SSC.

³² DPC Ordinance 85 of 19 March 2020 and DPC Ordinance 86 of 24 March 2020

³³ ANVISA Regulation RDC 373/2020 of 16 April 2020 amended the National Ship and Port Health Technical Regulation (RDC 72/2009) to provide a one-off extension of 30 days of the NSSCC /NSSCEC which until then was not possible

As ANVISA inspectors in some Brazilian ports, such as Santos and Rio de Janeiro, do not attend to vessels in anchorage areas, those arriving with an expired CSC had to come alongside a layby berth to pass a sanitary inspection and have the SSC renewed, generating substantial additional costs with fuels, wharfage, tugs, pilots, mooring gangs and watchmen.

In response to a joint statement by WHO, IMO and ILO³⁴, [Resolution RDC 384](#), issued by ANVISA on 12 May 2020, introduced a temporary procedure to the [National Ship and Port Health Technical Regulation \(RDC 72/2009\)](#), enabling ANVISA to remotely assess the health of the crew and sanitation of the vessel and issue the SSC without exposing its inspectors to unnecessary risks and using their resources on other fronts against the pandemic.

Applications for renewal of SSCs are processed through the single-window system '[Paperless Port](#)' (PSP), accompanied by digitised copies of the documents listed below, in addition to the mandatory pre-arrival documents (Medical Declaration of Health, current SSC, crew list, and medical logbook for the past 30 days):

- **Potable water:** reports, records and certificates on the control of the quality of water supplied and the cleaning of drinking water tanks
- **HVAC system:** maintenance and operation control plan (M&O) spreadsheets, reports or service orders related to the cleaning and disinfection procedures
- **Food management:** manuals and standard operation procedures (SOP); temperature measurement logs of cold chambers and the benches where food was offered in the last seven days
- **Medical Facilities:** Maritime Declaration of Health; medical logbook with appointments for the last 30 days; list of drugs on board; inventory of equipment in the medical facilities
- **Sanitary Effluents:** International Sewage Pollution Prevention Certificate (ISPP), when applicable, or other document describing the type of existing system and its operation
- **Accommodations:** vessel cleaning checklists; records of procedures performed and at least three high-resolution pictures of the facilities
- **Synanthropic fauna harmful to the health:** integrated pest management programme (IPM) and updated records or certificates of actions performed on board
- **Solid Waste Management:** garbage book; solid waste management plan and at least one high-resolution picture of the waste storage area

The issuance of a ship sanitation certificate after a document review does not preclude a shipboard sanitary inspection at any time during the vessel's port stay if the health authority deems it necessary.

SSCs are issued or extended only by WHO authorised ports around the globe. Certificates issued at a port not explicitly mentioned (same five-letter UN/LOCODE) in the [IHR List of Authorised ports to issue Ship Sanitation Certificates](#) are not accepted as proof of compliance with the international health regulations, and a new SSC will have to be obtained.

³⁴ On 22 April 2020, WHO, IMO and ILO issued a joint statement urging member states to take measures to minimise unnecessary interference with global traffic and trade with regard to ship and crew certificates. The statement encouraged national authorities to grant extensions of ship sanitation certificates "...on one or more occasions as necessary, provided that no authorised port along the ship's route is able to conduct ship inspection and issuance of sanitation certificates; and provided that such exceptional extension does not extend beyond the termination of the current Public Health Emergency of International Concern by the WHO Director-General".

8. Port operation and services

8.1. Access to ports

Although there are some port cities in Brazil undergoing temporary lockdowns, which may involve screenings on outsiders, all land accesses to main ports and terminal are normal. Security checks on crewmembers and visitors to port facilities have been gradually intensified as the outbreak developed.

A few private terminals are restricting entry of out-of-town professionals (inspectors, surveyors, correspondents, etc.) and some are even demanding presentation of rapid tests for COVID-19. The landing of crews is generally only being permitted for direct repatriation.

Due to the restricted mobility and massive reduction of the domestic air network, there may be extended delays in the arrival of outside marine professionals and service providers on board vessels facing problems or requiring services in isolated locations, especially in the river ports of [Brazil's Northern Arc](#) in the Amazon, where there are even fewer flights available than usual to cover a vast geographical area, impossible to travel by land and with some river terminals only accessible by boats several hours away.

[Section 3.3]

8.2. Cargo operations

All major Brazilian ports and cargo handling facilities continue without disruptions other than reduced labour force. Non-essential employees and public servants, such as those from the Customs and Ministry of Agriculture, are still working remotely or on paid leave. Preventive health protocols have been increased across all ports and terminals.

Volumes of cargo handled in Brazilian ports in the last months, particularly agriproducts, were substantially higher than the same period of last year despite the general downturn in the economic activity of other sectors. The production and exports of commodities, particularly soya bean and soya products, reached unprecedented numbers for this period and the prospects of a record crop in the 2019/2020 season are promising regardless of the long-term uncertainties surrounding foreign trade.

8.3. Cargo clearance

Even with the substantial slowdown in the workforce in public administration and regulatory agencies, customs-bonded ports and terminals are operating without congestions. At the same time, cargo transport in the cabotage and inland waterways remains undisturbed. Loading and discharge operations are uninterrupted, and no significant delays in cargo clearance and delivery are reported.

8.4. Port labour

On 4 April 2020, the federal government enacted Provisional Measure 945 (MP 945/2020)³⁵ to protect the workforce during the pandemic and preserve jobs in the port sector, critical to the supply chain and the domestic economy. It also regulates the temporary cession of military aprons for use by private companies that provide air transport services during the pandemic.

MP 945/2020 introduces changes in the way port operators recruit casual port workers (dockers, stevedores, watchmen, etc.) from the Casual Port Work Managing Body (OGMO) and the regime of compensation for workers infected with the coronavirus or within the risk group. It provides for an online assignment of casual port workers so that they do not have to gather at the usually crowded port roster stations and only will need to attend at the port area to clock in for duty.

³⁵ A Provisional Measure is an act of urgency and legal relevance enacted by Brazil's president without the need for prior approval by the National Congress. It remains in force for 120 days. On 29 May 2020, the Federal Senate extended the effects of M/P 945/2020 for 60 days

Under the provisional regulation, OGMO will not recruit casual port workers who:

- Display COVID-19-like symptoms, with or without fever
- Tested positive for COVID-19 or undergo home isolation for cohabitating with a confirmed case
- Are pregnant or breastfeeding
- Are aged 60 or older
- Were diagnosed with acquired immunodeficiency, respiratory or cardiovascular diseases or other chronic or severe pre-existing comorbidities

Casual port workers who fall under any of the above conditions will be entitled to a monthly compensation corresponding to 50% of the individual's average earnings in the last six months. This amount will be paid by the port operators (or the party that hires the port workers), proportionally to the port workforce required from the unions. As the indemnity is compensatory, no income tax or social duties will be charged to the port operators or the workers.

In the event of increased costs, the port operators who are not lessees but eventually use public port facilities may obtain proportional discounts on port tariffs. Those operators with existing leasing contracts with the port authorities will be entitled to amend the contractual terms to restore economic and financial balance. The law is unclear about how the tax returns and port tariff restructuring will work in practice.

Port operators will be allowed to hire workers directly, under a contract of employment and for a predetermined period not exceeding 12 months, in case of shortage of casual port workers resulting from strikes, downtime movements, and work-to-rule actions.

8.5. Bunkers and supplies

Delivery of bunkers, ship stores and water at main ports remains normal. However, during the emergency health situation, the supply of water and provisions and the removal of solid residues and effluents must be previously approved by ANVISA.

8.6. Spare parts and courier

Arrival and release of spare parts and supplies for vessels are functioning normally at all major international airports handling cargo, despite the shortage of staff and the physical absence of customs officials. Shipping and delivery of international courier and samples are slower than usual, with courier companies levying surcharges to cope with the restructuring of global air network.

9. Conclusion

During the four months since the novel coronavirus disease arrived in Brazil, a plethora of laws and regulations, often at odds with each other, has emerged to cope with the outbreak, and we hope that this publication will be useful in helping our clients and associates making some sense of the somewhat confusing local situation and ensure compliance by visiting ships and crews.

As the COVID-19 regulatory framework changes by the day, it is strongly recommended that before the vessel arrives, a proper assessment of the current state of affairs on a given port is made with the local maritime and port health authorities, through the agents.

We are closely monitoring the evolution of the outbreak in the country and the impacts of the ensuing emergency health measures in the maritime and shipping sectors. Significant changes to prevailing conditions will be posted on our website.

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