

PUBLIC HEALTH EMERGENCY PREPAREDNESS & RESPONSE PLAN FOR SEA PORTS IN SRI LANKA



Directorate of Quarantine
Ministry of Health, Sri Lanka



IOM International Organization for Migration
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Message from the Minister of Ports, Shipping and Aviation

It gives me great pleasure to convey my best wishes to the Ministry of Health and the International Organization for Migration (IOM) as they launch the International Health Regulation procedures concerning 'Public Emergency of International Concern (PHEIC), for Sea Ports in Sri Lanka.

The Ministry of Ports, Shipping and Aviation is gaining rapid momentum with the growth of stability in the country. With many opportunities extended to Sri Lanka, the geographical location has become a vital aspect that has further enhanced the travel and trade investments within the country. However, a major challenge that the Sea Ports may face is being subjected to PHEIC, which consists of infectious diseases caused by biological and zoonotic events and radio nuclear events. Therefore, it is imperative for the Ministry to be prepared to eradicate these crucial events at its entry points.

I wish to thank the Ministry of Health and International Organization for Migration (IOM) for their efforts and consideration in implementing strategies to further strengthen our borders, I am confident that the procedures they wish to expedite will address the challenges that Sri Lanka may encounter in the near future. I would also like to acknowledge the contribution made by many who have strived to make it a success.

Hon. Min. Arjuna Ranatunga



Message from the Minister of Health

The exponential increase in travel across territories – making the world closer each day, has made significant impacts on trade, socio-economic growth of countries, raising the quality of lives of many people. It is also recognized that the increased population movements and trade facilitates the spread of diseases. As a country at the verge of economic boom with its path to achieving inclusive growth in the region, it is much needed that Sri Lanka looks into the nature of health related issues that could arise with the improved cross border relations. Strengthening the border health services to address these health issues was a key challenge faced by the Ministry of Health and a long felt need.

With the assistance from International Organization for Migration (IOM) we were able to look into the existing policy frameworks on border health, in terms of identifying pressing challenges and gaps in services and resources. I am happy about the initiatives launched in enhancing the border health services aiming to minimize the threat of public health emergency. In this context, there is little doubt that intersectoral coordination is one of the key pillars in implementing this border health strategy.

With sea ports being one of the main points of entries in a country and Sri Lanka being an island nation with nearly five sea ports around its territory, coordination in addressing public health emergencies is of utmost importance. I am confident that this Preparedness and Response Plan for Sea Ports in Sri Lanka is a very timely and highly pertinent initiative in understanding the inter agency preparation and response mechanisms in addressing public health threats. This comprehensive plan will facilitate the efforts in achieving a quality and efficient public health services at the sea ports. I would like to thank all the stakeholders who were engaged in the process of developing this public health emergency preparedness and response plan for sea ports, and my special thanks go to the International Organization for Migration (IOM) for its continuous support in terms of assisting with technical expertise and numerous other assistances throughout the process in determining the health and protection of the migrants and of the country as a whole.

Hon. Dr. Rajitha Senaratne



Message from the Chief of Mission International Organization for Migration

In today's increasingly interconnected world with speed and ease of travel, international migration and the cross border travel shows a significant escalation. It is also recognized that the increased mobility greatly facilitates the emergence and re-emergence of diseases exposing countries to public health emergencies.

In this context, the partnership with the Ministry of Health in establishing a border health strategy was considered as vital in enhancing Sri Lanka's border health management capacity to ensure public health protection for both regular and irregular migrant flows.

Developing capacities at the sea port was one of the key areas of the overall project which captured developing capacities of the border health system, establishing the border health information system, revision of the legislation and the capacity development of the public health staff attached to the points of entry.

I am pleased to see the continued intersectoral participation and the progress made over the past three years in developing coordinated response in addressing public health emergencies of international concern. The development of the standard operating procedures with the training manual for the public health staff on managing routine and emergency activities at the ports, a border health information system and the regulations to the Sri Lanka Quarantine and Disease Prevention Act are remarkable achievements.

The Colombo sea port is one of the busiest sea ports in the region, therefore the strengthening of capacities in addressing public health emergencies is vital. In this regard I am particularly happy for being able to witness the establishment of the round the clock emergency health services at the Colombo sea port. Development of this public health emergency and response plan for the sea ports is a major achievement and I wish to thank all the stakeholders who participated in this process.

Mr. Giuseppe Crocetti

Chief of Mission

International Organization for Migration (IOM)

Sri Lanka



Message from the Director General of Health Services

Throughout the past decades we have witnessed various types of disease outbreaks globally – from Spanish Influenza, H1N1 and Mers Co V to the latest, Ebola. It is widely recognized that increased cross border travel has greatly facilitated the sporadic spread of deadly diseases costing many lives. With human lives being adversely impacted with the emergence and reemergence of infectious diseases, this also has the potential in exacerbating the social and economic insecurity of a nation as well.

As a country rising towards to be the regional hub on commerce, trade, education, aviation and naval, Sri Lanka should be of high concern when it comes to public health emergencies of international concern (PHEIC). Taking the detrimental effects of PHEIC as a high priority in securing the health of its citizens and public health in the country as a whole, the Ministry of Health along with the relentless support by the International Organization for Migration (IOM) has been closely working together in strengthening the border health systems in Sri Lanka. As part of the overall process, the need for reinforcing the existing legal and policy regulations, response mechanisms and action plans were strategically initiated.

With Sri Lanka considering health to be an integral part of the society, and recognizing access to health as a right that is critical to human development, we have and will continue to improve the border health mechanisms in our island nation. It is widely recognized that the coordinated and multi stakeholder approach is the best model in addressing PHEIC and sea ports play a key role in this process.

Therefore, I would like to commend the greater interest taken by the Ministry of Ports, Shipping and Aviation in this regard, and I would also like to extend my sincere thanks to the tremendous assistance provided by the International Organization for Migration (IOM) and all the other stakeholders who took part in this process.

Dr. Palitha Maheepala

Message from the Director Quarantine

Today, with the speed and ease of travel, more than 2 million people cross territories each day. While these developments in human migration flows can bring out social, political and



economic benefits in countries, this increased nature of connectivity and interconnectedness also has the potential to accelerate the spread of infectious diseases as well.

As a country which is currently experiencing positive growth phases in terms of employment, education, tourism – resulting in higher numbers of population inflows, and also progresses in the country's economy with free trade policies, Sri Lanka is easily susceptible to many different kinds of disease outbreaks as well as to various biological, chemical and other hazardous substances entering into the country. Such concerns have also intensified with Sri Lanka being an island nation located in the middle of an important naval route connecting to the world.

With the current flows of heightened regular and irregular migration and with Sri Lanka having five active sea ports around its territories, as the Quarantine Department under the Ministry of Health, we recognize the importance of enhancing the border health control measures around the country. At the same time we also recognize that the Ministry of Health cannot achieve this target in isolation and support from all the vital roles should be played by the other stake holders, specially the Ministry of Ports, Shipping and Aviation.

As another successful initiative under the overall border health programme, development of public health emergency preparedness and response plan can be considered as a guiding tool to ensure coordinated approach in addressing public health events of international concern (PHEIC). I am very much pleased by the corporation and the recognition by the Ministry of Ports in identifying this initiative as a need of the hour.

I am pleased to extend my gratitude towards the International Organization for Migration (IOM) for their unwavering assistance provided to us in every possible way to achieve many of our goals in improving the border health systems in the country and all the other stakeholders who contributed to this important initiative.

Dr. L. B. H. Denuwara



Message from the Harbor Master

With the influx of trade and travel taking place across the world, countries are somewhat vulnerable to the spread of infectious diseases as well as are more exposed to threats of deliberate use of biological and chemical agents which could also pose a health threat to the general public. The sea ports hold a key position in terms of access to such substances and therefore, should be regarded as one of the main focal points when addressing border health related concerns.

Sri Lanka as an island nation and with one of the busiest sea ports in the world has collaboratively worked with the Ministry of Ports, Shipping and Aviation, Ministry of Health, the International Organization for Migration (IOM) as well as other stakeholders in order to strengthen the capacity of border health in the country over the years. With a number of successful initiatives conducted on the significance of quality border health mechanisms in the country, this Standard of Procedures (SOP) on handling public health emergency situations will undoubtedly bring paramount benefits to the overall health action plans of Sri Lanka.

In this regard, I am pleased to extend my wishes to all parties who contributed towards developing a comprehensive preparedness and response action plan for sea ports in Sri Lanka.

R. A. Jayawickrama



ACKNOWLEDGEMENT

Preparation of this Public Health Emergency Preparedness and Response Plan for the sea ports in Sri Lanka was completed with the technical and logistical support of the International Organization for Migration (IOM)

All the stakeholders from the Ministry of Health, other Government Ministries and Agencies who valuable feedback and observations during the field visits and the consultative meetings are remembered with gratitude

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INTRODUCTION

Sri Lanka is a strategic naval link between West Asia and South East Asia due to its location in the path of major sea routes. The Sri Lanka Ports Authority (SLPA) operates all specified commercial Ports in Sri Lanka: Colombo, Galle, Trincomalee, Kankasanturai and Point Pedru and a new Port at Hambantota.

The Port of Colombo is the largest port in Sri Lanka and functions as an important terminal in Asia due to its strategic location in the Indian Ocean. It is one of the busiest ports in the world, and ranks among the top 35 ports. At present, the port handles 15% of transshipment cargo in South Asia. The Colombo Port currently has three container terminals: Jaya Container Terminal (JCT), South Asia Gateway Terminal (SAGT) and Unity Container Terminal (UCT).

It is widely recognized that the international voyage facilitate the spread of diseases thus warrants the need for a strong system within the sea ports to prevent international spread of diseases in and out of the country. History of port health laws and regulations in Sri Lanka dates back to 1897, with the establishment of the 'Quarantine and Prevention of Diseases Ordinance' of Sri Lanka, last revised in 1962. It has provisions for preventing the introduction and spread of all contagious and infectious diseases into and outside of Sri Lanka.

The emergence and re-emergence of infectious diseases and threats of deliberate use of biological and chemical agents have highlighted the need to further strengthen the Port of Colombo. The International Health Regulations (IHR) (2005) identifies several human health hazards: may it be of biological (infectious, zoonotic¹, food related), chemical, radiological or nuclear origin or source, which may cause a public health emergency of international concern (PHEIC) at a point of entry to a country. These hazards may be manifested by imported or exported human cases, infected or contaminated vectors (rats, mosquitoes, flies, cockroaches, ticks, mites, midges, fleas), or contaminated goods.

A PHEIC is an extraordinary event which creates a public health risk to other member states through the international spread of disease/events and potentially requires a coordinated international response. According to Annex 2 of IHR (2005), a PHEIC may be declared when the Ministry of Health is satisfied that there is an outbreak or imminent outbreak of an infectious disease or chemical/radio-nuclear event that poses a substantial risk to the population of Sri Lanka or upon activation by the World Health Organization (WHO). Port Health Officers (Medical Officers and Public Health Inspectors) operating at the Ports represent the Director-Quarantine/Ministry of Health, and are mainly responsible for preventing introduction of infectious diseases.

There are other designated focal points at the Sea Ports for preventing and responding to the multi-hazards specified in IHR (2005). Representatives of the Director General-Animal Production & Health, Director-Environment and Occupational Health/Ministry of Health, Chairman - Central Environment Authority and Chairman - Atomic Energy Regulatory Council

¹ Zoonotic diseases are communicable diseases of animals that can cause disease when transmitted to humans



are responsible for preventing introduction of zoonotic, foodborne, chemical and radio-nuclear hazards respectively.

For imported animals (as cargo or pet) and livestock (as cargo)-approval from the Director General of Department of Animal Production and Health is taken prior to the arrival of the cargo. Moreover, health clearance from the Quarantine Unit of Department of Animal Production and Health within a Sea Port is required for imported animals before granting 'free pratique'. Further, Sri Lanka does not permit the import of primates as pets from Yellow Fever Endemic areas or where the origin of the primates cannot be ascertained. For imported food items (as cargo), prior approval that the food items are fit for human consumption is required to be obtained from the Director General of Health Services (DGHS). Health clearance from Food and Drug Inspectors (FDI) of the Food Control Administration Unit, Directorate for Environment & Occupational Health, Ministry of Health is required to be obtained for food items before granting 'free pratique'. Legal shipments of radiological material by licensed importers shall be released only with clearance from the Atomic Energy Regulatory Authority (AERC). At present all such cargo goes through the scanning process of the Megaport surveillance system only at the Port of Colombo.

Preparedness and response at the Sea Ports in Sri Lanka in case of a PHEIC should be strategized adhering to the domestic and international legislations, and also should avoid unnecessary interference with international traffic and trade.

The multifaceted nature of operations involving a large workforce, representing many stakeholders makes the preparedness as well as the emergency response complex. A coordinated response is vital in successful implementation of this Public Health Emergency Preparedness Plan. Therefore, all stakeholders should be made aware of this plan especially with regard to the roles and responsibilities, incident command, lines of command etc. to achieve a coordinated response at an event of PHEIC at the Sea Ports in Sri Lanka.



BACKGROUND

Surveillance for any biological, foodborne, chemical or radio-nuclear hazard is carried out by the Port Health Office at any Sea Ports in Sri Lanka.

According to the Sri Lankan Quarantine and Disease Prevention Act, all vessels arriving from foreign ports are required to obtain a health clearance ('free pratique') by the Port Health Medical Officers (MO-PH) prior to the arrival of the ship at the Sea Port. The free pratique is granted based on the information submitted by the Master of the ship regarding the travellers and nature of the cargo. Master of the ship/vessel shall submit the documents (Maritime Declaration of Health, Ship Sanitation Control Certificate, Yellow Fever vaccination certificates, prior approval certificates for animals/food) to the MO-PH for assessment. In this process, the Shipping Agent plays a crucial role as the intermediary in conveying the information from the Master of the ship to the authorized persons including the Harbour Master, MO-PH and the Pilot Station, and also, in coordinating the logistical arrangements.

Rapid detection of a PHEIC due to an infectious disease at the Sea Ports would be through the same channel of communication. If there is any death, case or suspected² case due to infectious disease that could be of PHEIC on board, risk assessment of a death, case or suspected case is done by the MO-PH after visiting the ship as per the Standard Operating Procedures (SOP) prepared by the Director/Quarantine.

In the situation of dead, case or suspect animals due to a zoonotic disease on board or cargo containing contaminated or suspected food, livestock, chemical or radio-nuclear hazard on board, the relevant focal points are informed through the MO-PH.

After the assessment of the case/other travellers or animals or cargo on board, the ship is declared either as **infected³ (affected), suspected or healthy** in accordance with special provisions relating to a PHEIC. If declared as healthy, the pilot is granted permission by the MO-PH to bring the ship to the harbour.

Incidents of maritime interceptions have been reported occasionally at other Sea Ports where the MO-PH visited the ship in the out-harbour with the assistance of the Sri Lanka Navy.

There is a separate Medical Centre functioning at the Port of Colombo for the staff and any death, case or suspect of an infectious disease detected among the staff that could be of PHEIC are notified to the MO-PH.

In Sri Lanka, a national preparedness and response plan incorporating all hazards approach of the IHR (2005) at the points of entry is not available. However, a disease-specific plan - 'National Influenza Pandemic Preparedness Plan (NIPP) of Sri Lanka' (draft 2012) is available.

² Suspect - persons, baggage, cargo, containers, vessel, aircraft, conveyances, facilities, goods and postal parcels considered by the Port health officer as having been exposed, or possibly exposed, to a public health risk and that could be a possible source of spread of disease

³ Infected/Affected-Persons, baggage, cargo, containers, conveyances, goods, postal parcels or human remains that are infected or contaminated, or carry sources of infection or contamination, so as to constitute a public health risk



The NIPP is designed to enable the Ministry of Health to prepare for identifying and responding to an influenza pandemic and describes the strategies and activities to be undertaken in close collaboration with the other key agencies.

Rapid Response Teams (RRT) have already been identified in the plan prepared by the Medical Centre of the Sri Lanka Ports Authority (SLPA) for the preparedness and response in health emergencies among its employees such as an outbreak of Avian Influenza.

OBJECTIVES

1. To contain or delay spread of the infection or the event in and out of the country
2. To reduce the effect of the public health emergency on humans (travellers, staff and public) and goods
3. To ensure continuity of services at the Sea Ports in Sri Lanka
4. To strengthen the coordinated response (health and non-health measures) to public health emergencies at the Sea Ports in Sri Lanka

STRATEGIES

This plan describes the measures to be adopted for preparedness and response during a public health emergency as highlighted by the articles in the IHR (2005).

Five major strategies are identified under which actions are recommended within the plan.

1. Rapid assessment and notification
2. Response to reduce the spread of the infection or the event
3. Provision of health care to those affected
4. Preparedness
5. Risk communications

PURPOSE

The public health emergency preparedness and response plan describes the strategies and activities to be undertaken at the Sea Ports in Sri Lanka in close collaboration with the other stakeholders such as Ministry of Health, Sri Lanka Navy, Ceylon Association of Shipping Agents, Sri Lanka Customs, Department of Immigration and Emigration, Department of Animal Production and Health, Ministry of Disaster Management, Atomic Energy Regulatory Council and Central Environment Authority for a coordinated preparedness and response to a PHEIC.

The plan focuses on two scenarios:

1. Any death, case or suspected case (human or animal) due to infectious disease, contaminate or suspected cargo (food, chemical or radio-nuclear material) that could be of PHEIC on board
2. A case or suspected case due to infectious disease of PHEIC within the country and measures to minimize the spread to other countries



A. Any death or case or suspect (human or animal) due to infectious disease, contaminated or suspected cargo (food, chemical or radio-nuclear material) that could be of PHEIC on board

1. Risk assessment

- a) MO-PH shall visit the ship and interview or examine travellers or inspect the ship (animals or cargo)
- b) MO-PH shall discuss with relevant focal points at the sea ports in the country for death, case or suspected animals or contaminated or suspected cargo (food, chemical or radio-nuclear material)
- c) MO-PH shall declare the ship either as infected (affected), suspected or healthy

2. Notification

- a) MO-PH shall immediately notify the Director (Quarantine) over the telephone
- b) MO-PH shall immediately notify the Harbour Master or the Deputy Harbour Master over the telephone
- c) Director (Quarantine) shall notify the:
 - 1) Director General of Health Services
 - 2) Chief Epidemiologist
- d) Harbour Master or the Deputy Harbour Master shall notify the relevant members of the Rapid Response Team (RRT)

Rapid Response Team (RRT) for the Sri Lankan Sea Ports comprises:

Chairman - Sri Lanka Ports Authority
Resident Manager
Harbour Master or the Deputy Harbour Master
Sri Lanka Navy
Harbour Police
Ceylon Association of Shipping Agents
Director General of Health Services
Director General - SL Customs
Director General - Department of Immigration and Emigration
Director General - Department of Animal Production and Health
Director General - Disaster Management Centre
Chairman - Atomic Energy Regulatory Council
Chairman-Central Environment Authority

- The RRT will coordinate all measures to respond to the public health emergency within the sea port.



- The Harbour Master or the Deputy Harbour Master will act as the leader of the RRT.
- The number of officers activated to support the public health emergency shall be decided by the leader of the RRT.
- The roles to be performed by the RRT at a public health emergency are listed in Table 1.

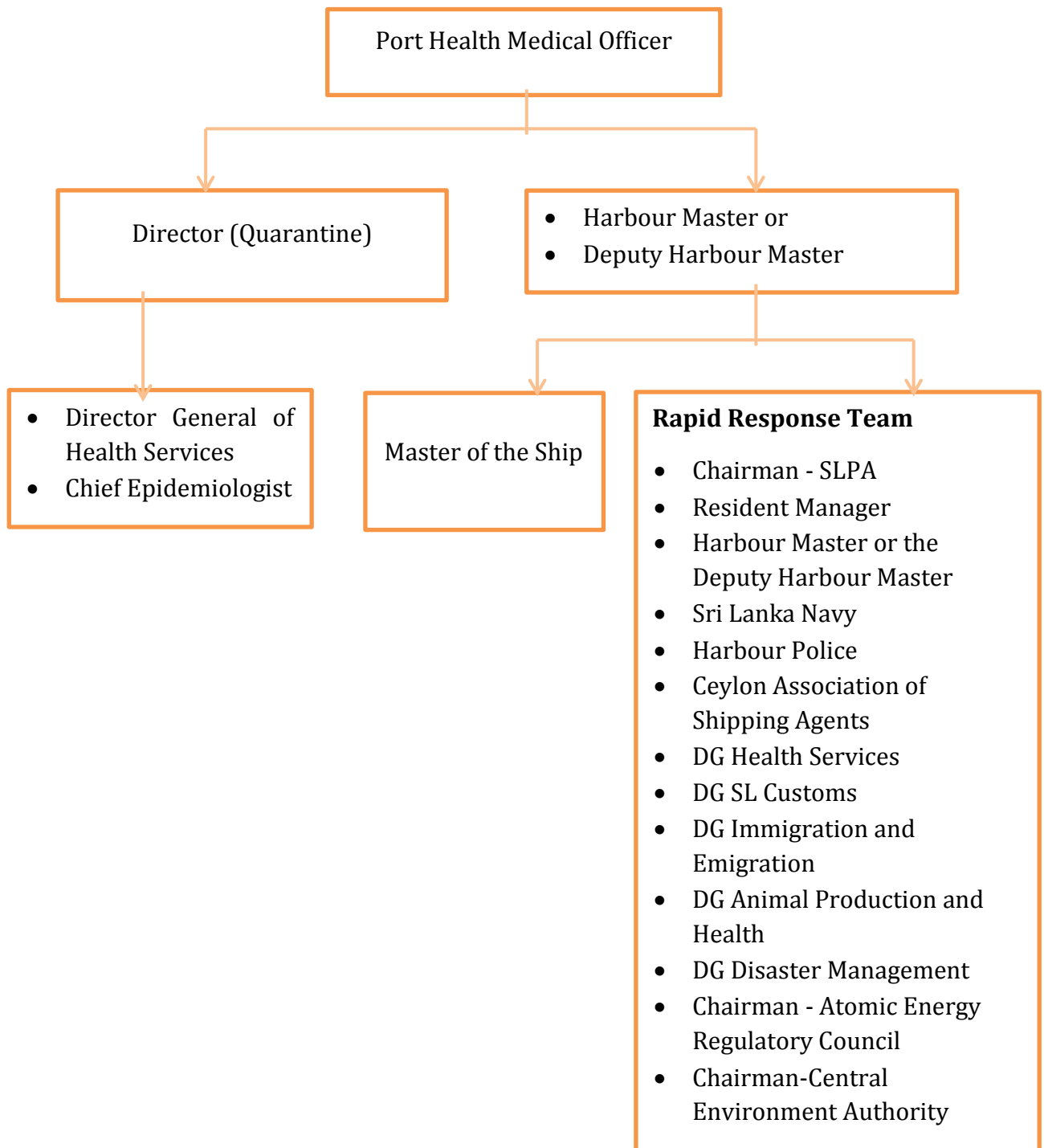
3. Parking a ship affected/suspected of having a PHEIC

- MO-PH shall notify the Harbour Master or the Deputy Harbour Master regarding the situation, and also the Master of the Ship to comply with the instructions until authorization is granted:
 - a) Ship is not allowed to enter any dock or come alongside any wharf
 - b) Ship is not allowed to have communication with the shore or with any other vessel in the Sea Port
 - c) Travellers on board are not allowed to disembark
 - d) Cargo is not allowed to be removed from the ship

****Special note - MO-PH shall not prevent the ship from taking on fuel, water, food and supplies***

- For navigational reasons:
 - a) MO-PH shall permit the ship to come alongside a specially controlled wharf where strict vigilance is maintained and enforced to prevent any communication or contact with the shore or with any other vessel in the Sea Port.
 - b) MO-PH shall give written permission to take a boat alongside the ship with a pilot and a mooring crew
- Harbour Master or the Deputy Harbour Master shall advise the Master of the Ship to park at the pre-designated mooring point
- If the ship is not allowed to come to the Sea Port, yet, requested to depart immediately, any passengers who desire to disembark with or without their baggage or to tranship from the ship may be permitted to do so on the condition that they agree to follow the necessary health measures required by the MO-PH.

The activation of the RRT is shown in Figure 1



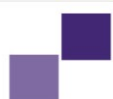


Figure 1 Activation of the RRT at the Sea Port

Table 1: Roles/Responsibilities of the Rapid Response Team

Harbour Master (MH) or Deputy Harbour Master (DHM)	<ul style="list-style-type: none"> • Acts as the leader of the RRT • Coordinates all activities to respond to the PHEIC
Sri Lanka Navy	<ul style="list-style-type: none"> • Coordinates with HM or DHM for mobilizing staff
Harbour Police	<ul style="list-style-type: none"> • Coordinates with HM or DHM for mobilizing staff
Director General of Health Services	<ul style="list-style-type: none"> • Informs National Coordinator/Disaster Preparedness and Response Division • Informs WHO once identified as a PHEIC
Director General - Sri Lanka Customs	<ul style="list-style-type: none"> • Informs the Chief Custom Officer of the respective Sea Port for coordination of activities
Director General - Department of Immigration and Emigration	<ul style="list-style-type: none"> • Informs the Chief Immigration Officer of the respective Sea Port for coordination of activities
Director General - Department of Animal Production and Health	<ul style="list-style-type: none"> • Informs the respective Chief Animal Quarantine Officer for coordination of activities of the Animal Quarantine Unit in the Sea Port
Director General - Disaster Management Centre	<ul style="list-style-type: none"> • Informs the designated Disaster Management Centre (DMC) to coordinate with Disaster Preparedness and Response Division, Ministry of Health
Chairman - Atomic Energy Regulatory Council (AERC)	<ul style="list-style-type: none"> • Activation and deactivation of the plan of the AERC for managing a radio-nuclear emergency
Chairman - Central Environment Authority (CEA)	<ul style="list-style-type: none"> • Activation and deactivation of the plan of the CEA for managing a chemical emergency
Director Quarantine and Chief Epidemiologist	<ul style="list-style-type: none"> • Activation and deactivation of all public health measures
Disaster Preparedness and Response Division, Ministry of Health	<ul style="list-style-type: none"> • Coordinator for additional ambulances, staff and equipment • Coordinate with IDH, NCCI, NHSL



4. Health measure to disembarked travellers (affected or suspected)

The activation of the health measures will be initiated by the Ministry of Health. The response is shown in Figure 2.

- 1) In the case of Port of Colombo-for single/few patients - ambulance of the SLPA Medical Centre shall be utilized to transfer the patients
- 2) For other Sea Ports or for more patients at the Port of Colombo - ambulance/s with designated equipment and staff (medical officers, nursing officers, supportive staff), specifically, trainings on transferring such persons shall be organized at the port by the Disaster Preparedness and Response Division, Ministry of Health
- 3) Appropriate Personal Protective Equipment (PPE) shall be provided to all staff: SLPA staff, customs officers, immigration officers, who are in contact with travellers (by the Port Health Office).
- 4) PPE will be provided to travellers suspected of having an infectious disease or contamination (either due to symptoms or close contact with a potentially infectious traveller or chemical or radio-nuclear hazard) by the Port Health Office.

a) Travellers affected or suspected of infectious disease

Travellers who may be affected or suspected of carrying infectious diseases shall be transferred immediately to the Infectious Disease Hospital (IDH) or the closest designated hospital for further assessment and care, isolation or quarantine and other supportive services.

** Special note - According to the latest revisions of WHO pandemic phases for Avian Influenza, there are six distinct stages of response. The Ministry of Health will be involved in each stage in different capacities as described in the 'National Influenza Pandemic Preparedness Plan (NIPP) of Sri Lanka' (draft 2012). This will be done by assessing the global WHO phase in progress and the current status of outbreaks and human transmission of influenza within the country. Decisions to move from one phase to another will be made by the National Technical Committee on Avian/Pandemic Influenza Preparedness and Response*

**Contamination - presence of a toxic agent or matter on a human or animal body surface, in or on a product prepared for consumption or on other inanimate objects, including vessel, ships and conveyance that may constitute a public health risk*

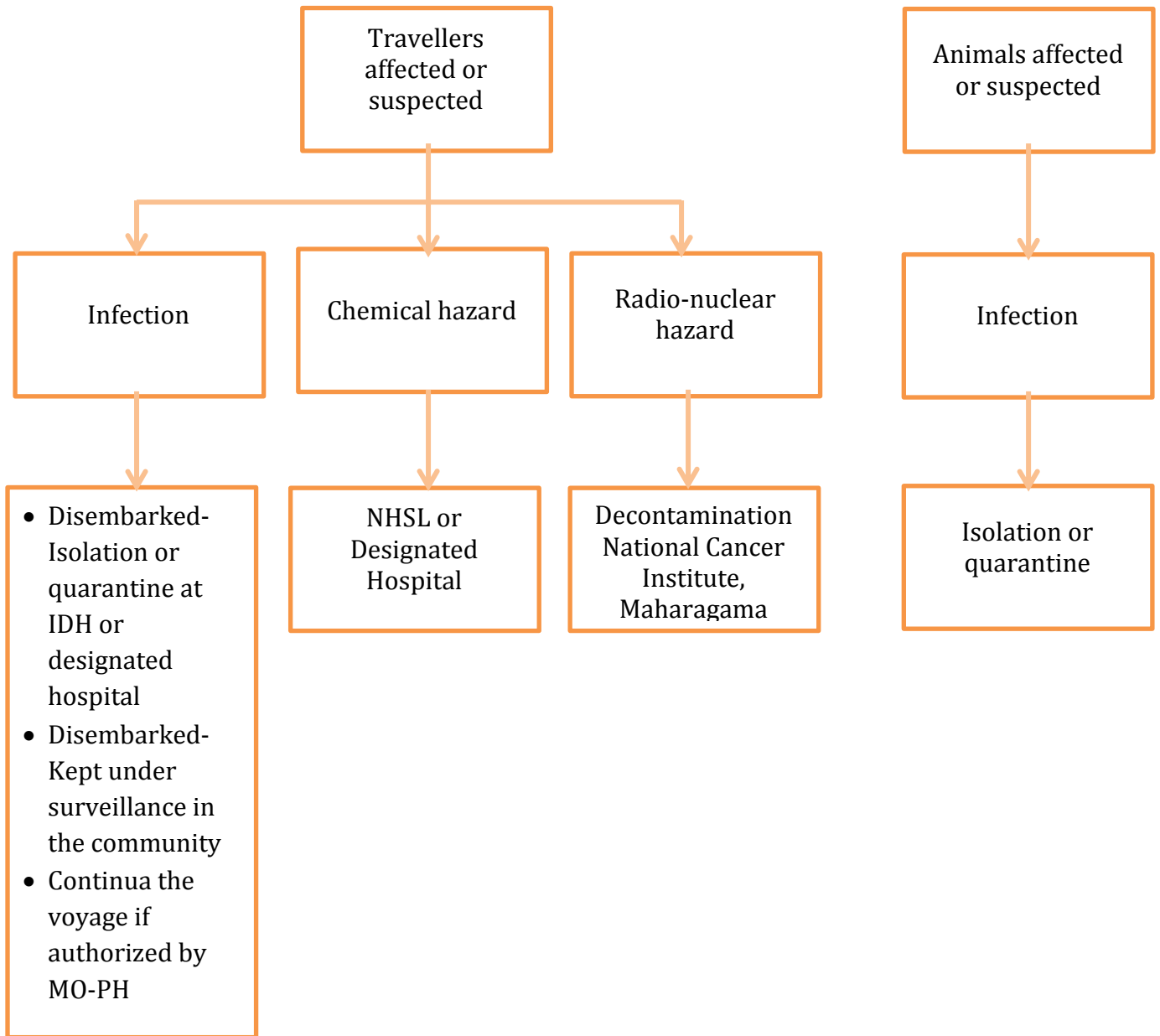


Figure 2 Health measures for travellers of animals affected or suspected



b) Travellers contaminated by hazardous chemical material

Travellers who may be contaminated by hazardous chemical material shall be immediately transferred to the designated location for decontamination with the assistance of the Fire Brigade. From there, they will be transferred to the National Hospital of Sri Lanka (NHSL) in the case of the Port of Colombo or to the closest designated hospital for further assessment and care.

c) Travellers contaminated or suspected by radio-nuclear material

Travellers who may be contaminated by radio-nuclear material shall be transferred immediately to the National Cancer Institute in Maharagama for further assessment, decontamination and other supportive services.

5. Measure to prevent contamination from cargo

a) Cargo with affected or suspected illness in animals

Animal/s affected or suspected of having an illness of PHEIC on board will require assessment, quarantine or isolation, and further action shall be decided by the Animal Quarantine Unit within the port in consultation with the Chief Animal Quarantine Officer, Colombo.

- Personal Protective Equipment to handlers of the affected/suspected animals shall be provided by the Animal Quarantine Unit.
- Suspected cargo shall be temporarily quarantined at the designated facility inside the port. If needed, cargo shall be transferred inland for quarantine up to 30 days. Modes of safe transportation and responsible personnel shall be decided by the Animal Quarantine Unit.

b) Cargo with contaminated food

If a cargo is identified of having contaminated food, transfer it back to the country of origin. If destruction of such goods is allowed, it shall be decided by the Food and Drug Inspectors of the port in consultation with the Director/Environment & Occupational Health, Ministry of Health.

- Personal Protective Equipment to handlers of contaminated food shall be provided by the Port Health Office.
- Until decided, suspected cargo shall be stored at a designated place in the port.
- Once decided to destroy, modes of safe transportation, place and responsible personnel shall be decided by the Director/Environment & Occupational Health.



c) Cargo containing hazardous chemical material

Cargo containing hazardous chemical material on board requires assessment, transferring back to the country of origin or relocation or decontamination of such goods. This would be decided by the Focal Point appointed by the Chairman of the Central Environment Authority (CEA) as per the plan for a chemical emergency.

- Personal Protective Equipment to handlers of the hazardous chemical shall be provided by the CEA.
- If detected after unloading, until decided, suspected cargo shall be stored at a designated place in the port.
- Once decided to relocate, modes of safe transportation, place and responsible personnel shall be decided by the CEA.

d) Cargo with hazardous radio-nuclear material

Cargo containing hazardous radio-nuclear material on board also requires assessment, transferring back to the country of origin or decontamination of goods affected. This will be decided by the Focal Point appointed by the Chairman of the Atomic Energy Regulatory Council (AERC) as per the plan for a radio-nuclear emergency.

- Personal Protective Equipment to handlers of the hazardous radio-nuclear material shall be provided by the AERC.
- In Sri Lanka, no mechanism currently exists to destroy any radio-nuclear material detected in the country. Therefore, if detected after unloading (e.g. illegal shipment), contaminated cargo shall be transported outside the port. Until decided, suspected cargo shall be stored at a designated place in the port. Modes of safe transportation, safe storage and responsible personnel shall be decided by the AERC.

6. Travellers who continue the international voyage

- MO-PH shall allow a traveller, placed under surveillance, to continue the voyage if measures to safeguard the health of other travellers are assured.
- If there is evidence of an impending public health risk, the MO-PH shall request such travellers to undergo additional health measures to control this risk. Vaccinations and/or prophylaxis as per the case management protocols will be required.
- MO-PH shall record this in the Ship Sanitation Control Certificate and communicate to the next port of call.
- MO-PH shall allow a traveller placed under isolation (in exceptional circumstances), to continue the voyage before the expiry of the isolation period, provided that measures to safeguard the health of other travellers are assured.



a) Disposable material in contact or potential contact with the human or animal case or suspect

All disposable materials in contact or potential contact with the case or suspect of an illness of PHEIC shall be destroyed as per the recommendations of the Director/Quarantine, the Chief Epidemiologist and the Chief Animal Quarantine Officer.

- This shall be carried out at a location especially designated in the ship and using equipment designated for this purpose.

b) Baggage and cargo arriving in the contaminated ship

Baggage, cargo, containers, conveyances, goods or postal parcels which may be contaminated shall be disinfected⁴, disinfected⁵, decontaminated⁶ or treated as per the recommendations of the Director/Quarantine, the Chief Epidemiologist and the Chief Animal Quarantine Officer.

- This shall be carried out at a location especially designated in the ship and by using equipment designated for this purpose.
- Loading or unloading of above items shall be prohibited until the procedures are completed.
- Areas within the ship and the premises of the port which may be contaminated by humans or animals confirmed or suspected as having an infection of PHEIC shall be disinfected or decontaminated.

c) Disposal of solid and liquid waste of the affected or suspected humans or animals from the ship

Disposal of any contaminated water or food, human or animal dejecta, waste water and any other contaminated matter from the ship which might contaminate the waters of the port should be removed and disposed safely as per the recommendations of Director/Quarantine, the Chief Epidemiologist and the Chief Animal Quarantine Officer.

A ship that has been considered as 'affected' will cease to be considered as 'affected' when the MO-PH is satisfied that the recommended measures have been effectively carried out and there are no conditions on board that could constitute a public health risk.

⁴ *Disinsect - a procedure whereby health measures are taken to control or kill the insect vectors present in baggage, cargo, containers, vessel, aircraft, conveyances, facilities, goods and postal parcels*

⁵ *Disinfection - a procedure whereby measures are taken to control or kill infectious agent/s on a human or animal body, on a surface or in or on baggage, cargo, containers, conveyances, goods and postal parcels by direct exposure to chemical or physical agents.*

⁶ *Decontamination- a procedure whereby health measures are taken to eliminate an infectious or toxic agent or matter on a human or animal body surface, in or on a product prepared for consumption or on other inanimate objects, including vessel, aircraft and conveyance, that may constitute a public health risk*



7. Death on board due to a suspected or confirmed illness of PHEIC

If a dead body is brought to the port, clearance is needed from MO-PH to bring the body into the country. Disposal of the dead body shall be carried out as per the guidelines prepared by the Epidemiology Unit.



B. A case or suspect of infectious origin of PHEIC within the country

In a situation of a PHEIC arising within Sri Lanka, measures should be taken to prevent it from spreading out of the country through the port. Health measures shall be activated as per the recommendations of the Ministry of Health.

a) Staff affected

- All port workers shall be advised to check their temperature before leaving home for work.
- Any port worker with fever (temperature of 37.5 C and above, or as per national guidelines) and/or specified symptoms shall be advised not to report for work. Such worker shall be advised to get admitted to a designated hospital for treatment.
- If diagnosed with an infection of a PHEIC, he/she shall be advised not to report for work until full recovery and/or the requisite time recommended in the national guidelines.
- Any port worker who has been exposed to an infection of a PHEIC through a family member at home shall be advised not to report for work till the defined incubation period (as per national guidelines) is over.
- If a port worker develops an infection of a PHEIC during the incubation period he/she shall be advised to get admitted to a designated hospital for treatment and not to report for work until full recovery and/or the requisite time recommended in the national guidelines.

b) Departure travellers

- MO-PH shall grant permission in writing to all people who embark or re-embark.
- MO-PH may request a valid vaccination certificate from the departing travellers.
- MO-PH may persuade the person to avoid travel or prohibit the embarkation on any ship based on the following:
 - If the person shows symptoms of an infection of a PHEIC or,
 - If the person is a contact of a person showing symptoms of an infection of a PHEIC.
- MO-PH may request the person to undergo screening and/or other health measures before departure.
- MO-PH shall issue a certificate after the medical examination.
- All cruise liners departing from the port should take certificate of health clearance from MO-PH before departure.

c) Preparedness

- Director/Quarantine shall ensure that adequate PPE are available at the Port Health Office and SLPA Medical Centre.
- Director/Quarantine in collaboration with the Disaster Preparedness and Response Division, Ministry of Health, shall identify specially equipped ambulances from the adjacent hospitals for immediate mobilization in a PHEIC.



- Director/Quarantine in collaboration with the Disaster Preparedness and Response Division, shall train Medical Officers, Nursing Officers and supportive staff from adjacent hospitals for attending to a PHEIC
- Director/Quarantine in collaboration with the Harbour Master and the Disaster Preparedness and Response Division, Ministry of Health, shall train other staff (staff -SLPA Medical Centre, custom officers, immigration & emigration officers, Sri Lanka Navy officers, Harbour Police, Shipping Agents etc.) in responding to a PHEIC, which will be done as a series of Desk Simulations and a real simulation annually.
- Director/Quarantine shall stockpile vaccines and prophylactic drugs for a PHEIC in consultation with the Chief Epidemiologist.

d) Risk Communication

Communication of information pertaining to risks and prevention of the PHEIC to the public will be done only by the Focal Points (Director/Quarantine and the Chief Epidemiologist)

REFERENCES

International Health Regulations (2005), Second Edition, [World Health Organization www.who.int/ihr](http://www.who.int/ihr)