Management of a **Port Public Health Event** at a Seaport

HSE Port Health Multidisciplinary Network February 2022



Seirbhís Sláinte | Níos Fearr á Forbairt

Building a Better Health Service

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Glossary

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
	conveyances, that may constitute a public health risk.(3)
De-ratting	The procedure whereby health measures are taken to control or kill rodent
	vectors of human disease present in baggage, cargo, containers,
	conveyances, facilities, goods and postal parcels at the point of entry.(3)
Disinfection	The procedure whereby health measures are taken to control or kill
	infectious agents on a human or animal body surface or in or on baggage,
	cargo, containers, conveyances, goods and postal parcels by direct exposure
	to chemical or physical agents.(3)
Dis-insection	The procedure whereby health measures are taken to control or kill the
	insect vectors of human diseases present in baggage, cargo, containers,
	conveyances, goods and postal parcels.(3)
HSE Port Health	A national group of representatives from Public Health, Environmental
Multi-Disciplinary	Health Service, the National Ambulance Service (NAS) and Emergency
Network	Management. The network aims to protect health by (i) improving
	preparedness and response capacity at Irish points of entry (ii) producing
	guidance documents on the management of health threats at points of
	entry (iii) advising on public health events at ports and airports, (iv) liaising
	with stakeholders to provide guidance and support, and (v) engagement
	with national and international projects which seek to strengthen health
	protection at points of entry. The multidisciplinary approach ensures a
	collaborative and coordinated response to cross-border health threats in
	Ireland. The network is a collaborating stakeholder member of the EU
	Healthy Gateways consortium.
Incident	Any natural or manmade occurrence that negatively affects or can
	potentially negatively affect public health. The incident may not need to be
	declared an emergency.(4)
Infectious disease	Any of the diseases to which Schedule 1 of the Infectious Diseases
	(Shipping) Regulations 2008 relates.(1)

International	See Section 1.3
Health Regulations	
(IHR)	
Major emergency	Any event which, usually with little or no warning, causes or threatens
	death or injury, serious disruption of essential services, the environment or
	infrastructure beyond the normal capabilities of the responding health
	services in the area in which the event occurs, and requires the activation of
	specific additional procedures and the mobilisation of additional resources
	to ensure an effective, co-ordinated response.
Medical Officer of	The MOH has the responsibility and authority to investigate and control
Health (MOH)	notifiable infectious diseases and outbreaks, under the Health Acts 1947
	and 1953 and Infectious Disease Regulations 1981. Designated specialists in
	public health medicine assume the MOH function.
National IHR Focal	It is the role of the National IHR Focal Point (NFP) to be accessible at all
Point	times for communications with the World Health Organization (WHO)
	International Health Regulations (IHR) contact points, and to disseminate
	information and consolidate input from the relevant national sectors (in
	particular, those responsible for surveillance and reporting, points of entry,
	public health services, clinics, hospitals and other government
	departments). The Health Protection Surveillance Centre (HPSC) is the NFP
	for Ireland for communicable diseases.
Port Public Health	A Port Public Health Alert is declared when a Port Public Health Event is
Alert	notified (see below) and a joint risk assessment between Public Health and
	Environmental Health Services (EHS) identifies a complex event or events -
	requiring multidisciplinary input, an incident or outbreak control team, and
	management and control measures.
Port Public Health	A Port Public Health Event involves one or more of the following:
Event	Where passenger and/or crew on board a vessel inbound or outbound from
	the port may be suffering from, or carrying an infectious disease.
	A vessel is otherwise suspected of being contaminated by an infectious
	disease.
	Where a vessel following a maritime declaration of health (MDoH) is
	deemed to be a public health threat.(1)

Public Health	An extraordinary event which is determined, as provided in the IHR:
Emergency of	to constitute a public health risk to other states through the international
International	spread of disease and
Concern (PHEIC)	to potentially require a coordinated international response.(3)
Public health risk	The likelihood of an event that may affect adversely the health of human
	populations, with an emphasis on one which may spread internationally or
	may present a serious and direct danger.(3)

Acronyms

СМТ	Crisis Management Team
COVID-19	Coronavirus disease 2019
DPH	Director of Public Health
EHO	Environmental Health Officer
EHS	Environmental Health Services
ERCC	East Region Command Centre
EWRS	Early Warning and Response System
FSAI	Food Safety Authority of Ireland
GP	General Practitioner
HSE	Health Service Executive
HPSC	Health Protection Surveillance Centre
ID	Infectious Disease
IHR	International Health Regulations
IRCG	Irish Coast Guard
MART	Marine Ambulance Response Team
MDoH	Maritime Declaration of Health
МОН	Medical Officer of Health
MS	Member State
NAS	National Ambulance Service
NEOC	National Emergency Operations Centre
NFP	National IHR Focal Point
NMOC	National Maritime Operations Centre
РЕНО	Principal Environment Health Officer
PES	Primary Emergency Service
PHEIC	Public Health Emergency of International Concern
SPHM	Specialist in Public Health Medicine
WHO	World Health Organization

1. Introduction

1.1. Response Plan: Background/Purpose

This response plan for the management of a Port Public Health Event at a seaport has been developed to guide those Health Service Executive (HSE) divisions/functions (Public Health, Environmental Health Services (EHS), National Ambulance Service (NAS), and Emergency Management) who may be involved in a Port Public Health Event (the initial notification of an incident) at one of the five designated seaports (see Table 1 below). These ports, designated under legislation (1), must maintain core capacities to respond to public health events. The response plan should be interoperable with each designated port contingency plan.

Designated Seaports
Dublin Port
Port of Cork
Rosslare Europort
Port of Waterford
Shannon – Foynes Port

Table 1 Designated Seaports in Ireland

The purpose of the response plan is to:

- Reduce or prevent disease transmission in the populations at risk (seafarers/ ship passengers/ those working in a maritime setting/ the community)
- Implement appropriate and timely control measures
- Produce an effective co-ordinated multidisciplinary HSE response, minimising disruption to normal HSE and other stakeholders' operations
- Improve preparedness by highlighting areas requiring improvement.

The response plan outlines five phases to assist decision making and inter-agency coordination by clarifying the recommended approach to:

- Detection and notification of a Port Public Health Event
- Verification of Port Public Health Event
- Risk assessment of Port Public Health Event
- Escalation and activation of a Port Public Health Alert, if appropriate

• Further HSE multidisciplinary management with interagency involvement and communication with key stakeholders.

Please note:

- This response plan is intended to function as a national level protocol to be applied locally, with modification where needed.
- Each of these relevant individual HSE divisions/functions should develop and exercise their own protocols for the management of a Port Public Health Alert.
- While this document focuses on infectious disease hazards, the principles outlined may be applicable in other environmental incidences that have public health implications (e.g. chemical or radioactive).
- The principles remain the same for use at non-designated ports around Ireland.
- This document is intended as an activation protocol between the HSE, Harbour Authority and in some cases, An Garda Síochána. It is incumbent on each party to ensure this document is supported by the internal procedures of those agencies.

1.2. HSE presence at seaports

Public Health

Ireland does not have a distinct port public health authority. There is no public health department presence at sea ports, nor regional public health service devoted to sea ports. The regional Department of Public Health's Medical Officer of Health (MOH) leads the operational response to events at points of entry, in general through the Specialist in Public Health Medicine (SPHM) on-call for that region.

Environmental Health Services

Environmental Health Services (EHS) have a Principal Environmental Health Officer (PEHO) responsible for each port. The EHS and their port health team within that service operate as national services and are represented nationally by the Environmental Health Port Health Operational Unit (phou@hse.ie).

Emergency Management

The Emergency Management (EM) office has no direct operational function at seaports. It supports the operational services of the HSE and the other Principal Response agencies in developing response plans for incidents which may occur at these locations. The HSE EM function has a twofold

responsibility. It is focused on the preparation for and conduct of integrated operations within the HSE at times of crisis; secondly, it contributes to Ireland's national resilience as the HSE is a Principal Response Agency (PRA) under the National Framework for Major Emergency Management (2006).

National Ambulance Service

The National Ambulance Service (NAS) of the HSE has the responsibility for emergency pre-hospital care of patients across the whole of the Republic of Ireland. The NAS as the Primary Emergency Service for the HSE and the Primary Response Agency under the National Framework for managing major incidents, has the responsibility for initial lead as Controller of Operations. The Incident Response Team of the NAS can mobilise as the Maritime Ambulance Response Team (MART) and deploy Advanced Paramedics off shore via the Irish Coast Guard (IRCG).

1.3. Legislative basis

The International Health Regulations (2005) (IHR)(3) provide a broad legal framework and define the obligations and rights Ireland has when dealing with potential cross-border health threats/ threats at points of entry. Among these obligations include the designation of a National Focal Point (NFP) for communications with the WHO, and the establishment of capacity for surveillance of, and response to health threats.

The Infectious Diseases (Shipping) Regulations 2008(1) define the roles played by various stakeholders in responding to, and managing, infectious diseases on board ships. The MOH is notified of all cases or suspected cases of infectious diseases and any deaths due to cases or suspected cases of infectious diseases on board ships approaching a port. The MOH can direct a ship to be moored, examine it, and carry out any measures he or she considers necessary for the purposes of the IHR, if a ship is believed to be infected. The MOH may detain the ship for medical inspection and continue to detention under the Regulations if necessary. Furthermore, the master of a ship in relation to health threats, must complete and sign a Maritime Declaration of Health (MDoH), stating whether there has been a case or suspected case of an infectious disease or death from a case or suspected case of an infectious disease on board the ship. Each 'positive' MDoH (where there is a case/suspect case) must be communicated to the MOH.

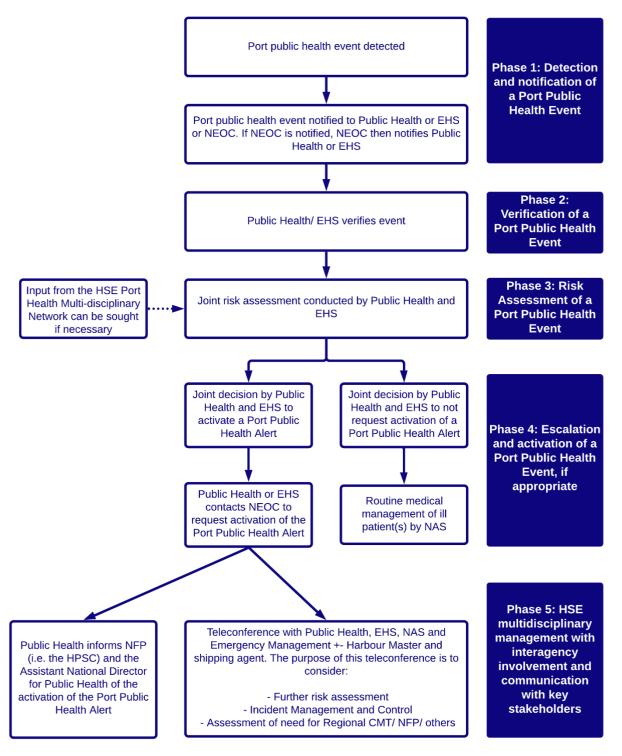
The Infectious Diseases Regulations 1981(5) defines the role of the MOH in the context of the prevention, investigation and control of infectious diseases in Ireland.

2. Port Public Health Event: Notification and Response

Where a Port Public Health Event occurs, the event must be notified and a process commences whereby risk is assessed and the appropriate response is decided. This process requires a multidisciplinary approach. Multiple factors must be considered when managing an event that may pose a direct danger to health.

2.1 Algorithm for the notification and response to a Port Public Health Event.

EHS=Environmental Health Service. NEOC=National Emergency Operations Centre HSE (Ambulance Control) NFP=National Focal Point within HPSC. CMT=Crisis Management Team



2.2 Event Detection

What notifications constitute a potential risk to public health, requiring a Port Public Health Event notification?

- Where passenger and or crew on board a vessel inbound or outbound from the Port may be suffering from, or carrying an infectious disease as defined in the Infectious Disease (Shipping) Regulations 2008.
- A vessel is otherwise suspected of being contaminated by an infectious disease.
- Where a vessel, following submission of a maritime declaration of health (MDoH) (see Appendix 8), is deemed to be a public health threat.

Examples of situations that may trigger a notification which constitutes a potential risk to public health include:(2)

- Persistent fever (≥38 degrees Celsius) lasting more than 48 hours
- Bloody diarrhoea (three or more loose or watery stools in 24 hours and blood in stool)
- Severe diarrhoea (three or more loose or watery stools in 24 hours accompanied by signs of dehydration)
- Cluster or outbreak of diarrhoea cases (two or more cases)
- Fever (≥38 degrees Celsius) plus one of the following: skin rash, glandular swelling, severe vomiting, jaundice, convulsion, bleeding, recent paralysis, cough, headache with neck stiffness, decreased level of consciousness, prostration or shortness of breath.
- Respiratory symptoms (influenza like illness)
- Non-traumatic deaths (deaths as a result of something other than an accident)
- Any cluster of unusual illnesses
- A suspected or confirmed case of illness which is the subject of a current Public Health Emergency of International Concern (PHEIC), e.g. a suspected or confirmed case of coronavirus disease 2019 (COVID-19).

Specifically in relation to gastrointestinal illness, examples of situations that may trigger a notification which constitutes a potential risk to public health include:(6)

- The occurrence of cases of disease with a frequency in excess of normal expectancy (historical/baseline) data for the specific itinerary and time. Normal expectancy is determined from historical/baseline data for the ship.
- For an illness which is not expected to occur on board, two or more cases are considered an outbreak.
- Outbreak definition for gastrointestinal illness: An increase in the number of cases of gastroenteritis above the number normally occurring in that ship over a defined period of time and itinerary. For ships to report to competent authority at ports, two different thresholds should be used.

- An initial report should be prepared and sent to the competent authority at ports, when the
 percentage of reportable gastroenteritis cases reaches 2% or more among passengers or 2% or more
 among crew.
- A second report should be sent when the number of reportable gastroenteritis cases reaches 3% or more among passengers or 3% or more among crew.

2.3 Notification of a Port Public Health Event

Notification from/ to:

Notification may be received through:	and is usually directed towards:
Harbour Master	Environmental Health Services
	Public Health
Shipping Agent	Environmental Health Services
	Public Health
Maritime Declaration of Health (MDoH)	Environmental Health Services
HPSC	Public Health
National Ambulance Service (NAS)	Environmental Health Services
	Public Health
Medico Cork (see section 2.8)	Environmental Health Services
	Public Health
An Garda Siochána	National Emergency Operations Centre (NEOC)
Local Authority/ County Council	NEOC
Irish Navy	Environmental Health Services
	Public Health
Irish Lights	Environmental Health Services
	Public Health
	NEOC
Through Social Media Alert	Environmental Health Services
	Public Health
	NEOC

The following are examples of how a Port Public Health Event may be notified:

 Communication from a ship about an illness on board (ship to port). All Port Public Health Events shall be notified to the Harbour Master's office by the ship. This communication is then passed on from the Harbour Master to the NEOC, Public Health or EHS. Harbour Masters have contact details for Public Health in-hours and out of hours, and for EHS in-hours. If contacted by the Harbour Master, the NEOC can declare a Port Public Health Event using a prescript format (See <u>Appendix 2</u>) and will ensure communication links with NAS, Emergency Management and the port, as well as with Public Health, EHS and the Harbour Master. If contacted by the Harbour Master, the NEOC will also confirm back to designated port that Public Health and EHS have been informed and are assessing the Port Public Health Alert. Contact with the port will be via a 24/7 telephone number (<u>see Appendix 6</u>). The ship may also communicate the Port Public Health Event to their shipping agent. Shipping agents have in-hours contact details for Public Health and EHS.

- Communication from Medico-Cork or the IRCG about an illness on board a ship to the NEOC, Public Health or EHS.
- Submission of a MDoH (in which a positive answer is given to any of the following questions):
 - \circ has the total number of ill passengers during the voyage been greater than normal/expected?
 - has any person died on the voyage otherwise than as the result of an accident?
 - is there on board or has there been during the international voyage any case of disease which you suspect to be of an infectious nature?
 - o other information of concern

The MDoH is usually submitted through the Department of Transport's Safe Seas Ireland Maritime Single Window for Vessel reporting Ireland <u>https://www.gov.ie/en/service/safeseas-vessel-reporting-formalities/</u> and copied to Department of Transport. When positive (i.e. when illness is reported), it may be reviewed by Harbour Master as ship is on way into port, and by EHS, and may be submitted by the Harbour Master, or by EHS on his/her behalf, to the regional MOH.

- Communication from a foreign port about illness on board ship (i.e. where risk assessment has already taken place) (port to port).
- Evidence found on an inspection by EHS (that may indicate an incident of possible public health concern).
- Notification from HPSC (following their receipt of information from an international health agency).
- Communication from media/social media (about a potential illness on board ship).
- Notification from other agency e.g. Dublin Fire Brigade Control Centre following receipt of a call through the 999/112 system (NEOC); An Garda Siochána through NEOC.

When the competent authority is notifying a Port Public Health Event to Public Health, EHS or NEOC, the type of event should be defined by the competent authority as one of the following:

- An event of unknown origin
- Infectious disease
- Vectors or infestations
- Environmental with public health impact and potential for international spread (e.g. unsanitary conditions, contaminated ballast water)
- Chemical
- Radiological
- Other type of event(2)

See <u>Appendix 12</u> for example questions about the Port Public Health Event that may be asked and options for actions as part of the first standard response to a Port Public Health Event.

Immediate actions on receipt of an event notification

The Harbour Authority is the person or body with overall responsibility for the movement of ships in or out of the port. The roles and responsibilities of the Harbour Authority are detailed in Infectious Diseases (Shipping) Regulations 2008.(1) As noted in these regulations, the Harbour Authority "shall immediately forward a copy of the notification to the MOH in whose district the port is situated".

When a Port Public Health Event is reported to the Harbour Authority, that Authority should contact EHS and Public Health, and inform them of that threat. The Harbour Authority should then work in cooperation with the HSE disciplines to ensure that the actual or potential threat to public health is minimised.

If a case of infectious disease is reported directly to EHS or a Department of Public Health, and if that Department or EHS is concerned about a potential threat, then that Department or EHS should inform NEOC and then follow the algorithm as outlined at the start of this document (see page 8).

On receipt of notice of a Port Public Health Event from the Ship's agent or Harbour Authority to the NEOC, the NEOC should contact on-call members of the relevant Department of Public Health and/or with the in-hours EHS and inform them of the notification received.

2.4 Verification of a Port Public Health Event

To verify the event, further information can be asked by the ship agent, ship master, other designated crew or the authority that reported the event and the type of event can be defined. Event verification requires arrangements for communications that should be available at ports at all times. The information collected will be used in the public health risk assessment to ascertain what level, if any, of intervention is required.

2.5 Joint Risk Assessment

The risk assessment is conducted jointly by Public Health and EHS. Out of office hours, the risk assessment will be conducted by Public Health alone if EHS are not available.

- If event notification comes to regional Department of Public Health or EHS: the SPHM on-call in the regional Department of Public Health contacts EHS Principal Environmental Health Officer (PEHO) for the port in question, or vice versa, for a joint risk assessment. Seek input if needed from HSE Port Health Multi-Disciplinary Network.
- If event notification comes to NEOC/NAS: NEOC contacts the regional Department of Public Health (in hours via Departments of Public Health; Out of hours via regional emergency mobile number) and EHS (in hours only- through local PEHO) and Public Health and EHS arrange joint risk assessment (see <u>Appendix 6</u> for contact phone numbers).

This joint risk assessment process may necessitate:

- an up-to-date MDoH, obtained from the ship's captain, via the Ship's Agent, and given to the Harbour Authority or, where appropriate, delivered directly to the MOH or Environmental Health Officer at the Port
- discussion with Harbour Authorities
- liaison with the ship's captain who may be requested to provide additional information specific to the incident which is being assessed
- liaison with medical personnel on the ship who have been managing illness on the ship (where such
 personnel are present, such as on a cruise ship), through the port health authorities officially, or in certain
 cases, through the shipping agent.
- liaison with specialist trained personnel either on the ship or at port (i.e. engineer, shipping agent)
- liaison with authorities at previous port of call

Translation facilities – if required at any stage during the process outlined in this document – are available on request through the NEOC.

Following receipt of the necessary information, a communicable disease incident risk assessment form may be

used for the joint risk assessment (Appendix 4).

The joint risk assessment by Public Health and EHS may conclude that the Port Public Health Event has to activate a Port Public Health Alert.

Following notification and verification of a Port Public Health Event, the relevant Department of Public Health and EHS should jointly risk assess the notification and determine if the risk can be handled under normal working procedures, or if is there a requirement to activate some or all of the elements of this response plan. The risk assessment process consists of gathering, assessing and documenting information to see if the threshold for requesting the activation of a Port Public Health Alert is reached.

2.6 Activation of a Port Public Health Alert

A Port Public Health Alert is activated when:

The risk assessment identifies a complex event or events, requiring multidisciplinary input, an incident or outbreak control team, and management and control measures.

Decision to request activation of a Port Public Health Alert

A Port Public Health Alert may be activated by Public Health +/- EHS.(1) At present, the decision to activate a Port Public Health Alert is made jointly by Public Health and EHS. Out of office hours, the decision will be made by Public Health alone if EHS are not available.

Request to activate a Port Public Health Alert

There is a prescript format for requesting activation of a Port Public Health Alert (see <u>Appendix 2</u>).

The Department of Public Health and EHS, may consider (for example, in a large-scale alert or emergency) issuing a joint instruction to the NEOC to:

- Advise the NAS of this activation
- Contact the Harbour Master and advise them of this activation
- Advise Emergency Management
- Advise the NFP (i.e. the HPSC)

Teleconference following activation of a Port Public Health Alert

Where a Port Public Health Alert is activated, the relevant Department of Public Health and EHS will arrange a teleconference with Emergency Management, NAS, and possibly the Harbour Master and shipping agent. Public Health and EHS will jointly agree a time for a teleconference. The NEOC may inform Emergency Management and NAS of the time of the teleconference to discuss the Port Public Health Alert. The teleconference should take place as soon as is feasible following activation of the Alert.

The purpose of the teleconference:

- Further risk assessment
- Incident management and control
- Assessment of need for Regional Crisis Management Team (CMT)/NFP/others

This teleconference will further assess the potential or actual risks posed, initiate management and will consider the need for activation of a Regional CMT. A suggested agenda for this teleconference is outlined in <u>Appendix 3</u>.

The relevant Department of Public Health and EHS will contact other agencies and members who may need to be involved in this teleconference and in follow-up discussions. These may include the relevant Garda Port Authority, shipping agents, companies operating jetties, National Directors, laboratory service, HPSC, hospital clinicians, the Department of Agriculture, Revenue, the Department of Transport, Food Safety Authority of Ireland (FSAI), the local authority, the HSE Press officer, the HSE Legal adviser, representatives from other authorities or agencies and technical experts.

It is the responsibility of Harbour Authority to inform An Garda Síochána Command & Control Centre and the Marine Survey Office where appropriate that a Port Public Health Alert has been activated.

The relevant Department of Public Health should inform the Assistant National Director, Public Health and Child Health and the NFP (i.e. the HPSC) of the activation. The relevant EHS should inform the Assistant National Director for Environmental Health.

Each Department of Public Health and EHS with responsibility for a designated port or ports should maintain its own list of contact numbers for local stakeholders.

2.7 Decision not to activate Port Public Health Alert

In the event where a decision is made by Public Health and EHS to not request the activation of a Port Public Health Alert, routine management by NAS of ill person(s) should occur.

2.8 Sources of Medical Advice for Ships

This response plan is not intended as a protocol for the medical management of those who are unwell on a ship or coming into port. The sources of medical advice available to ships with a medical concern about passengers/crew are:

- Medico-Cork (via IRCG): A vessel at sea can obtain medical advice from Medico Cork via the IRCG. Medico-Cork is part of the National Framework for Major Emergency Management, as included in the Multi-Agency Protocol "Land Based Response to Marine Emergencies" (May 2011). It provides telemedical support to ships 24 hours a day, year-round, from an Emergency Medicine Registrar or Consultant based in Cork University Hospital. For more information see: <u>https://emed.ie/Administration/MedicoCork/MedicoCork_about.php</u>
- HSE NAS
- MART and or IRCG. For more information on MART, see section 3.1.

3. HSE Roles and Responsibilities

3.1. HSE National Ambulance Service

NEOC- the National Emergency Operations Centre of NAS, will facilitate the receipt of communications from the Harbour Master Officer/Harbour Authority Building and notify the appropriate Department of Public Health, EHS, HSE Emergency Management and other relevant organisations and services as requested.

NEOC will dispatch the pre-determined response to the vessel or meeting point and send a Senior Manager to the On-Site Command Centre. The On-Site Command Centre will be the place designated by the Port Authority as the on-site centre of operations for the event.

In the event of a Port Public Health Alert being activated by the Department of Public Health or EHS, NEOC will facilitate receipt of a call from these bodies.

During the alert NEOC will:

- Confirm/notify to the Harbour Authority that a Port Public Health Alert has been activated.
- Ensure communication links between NAS staff, Public Health, EHS, Emergency Management and the Harbour Authority.
- Provide on scene triage, assessment and pre-hospital emergency care and transport ill patients to designated hospitals, in conjunction with other service such as the IRCG.
- If required, initiate the Major Emergency Plan in conjunction with all relevant stakeholders.
- If affected ship is anchored outside of the Port, activate the Marine Ambulance Response Team (MART) to facilitate on board assessment and pre-hospital emergency care, if requested.

The MART was formed in 2008. The team comprises of 20 Paramedics and Advanced Paramedics, belonging to the NAS. The team is primarily based on the East Coast, but is deployed nationally as required. A Service Level Agreement between the HSE and the Irish Coast Guard IRCG stipulates the provision of service. The team is requested by the IRCG, who contact the NEOC. The NEOC will mobilise the MART. The first team of six will activate to the nearest IRCG helicopter base within 30 minutes.

The on-board roles of the Marine Ambulance Response Team (MART) are:

- o Scene Management
- Liaison with Irish Coast Guard (IRCG communications pathway
- Liaison with on-board medical crew (if available)
- Triage, treatment and evacuation (if required) of casualties
- Update to the NEOC via the National Maritime Operations Centre (NMOC) The team is a declared asset to the IRCG.
- NEOC liaises closely with the relevant Department of Public Health MOH, who is usually the SPHM on-call.

3.2. HSE Emergency Management

The role of HSE Emergency Management is:

- To support the HSE strategic coordination around the Port Public Health Alert.
- To act as facilitator and liaison with other state agencies around the response to the Port Public Health Alert.
- To coordinate the Health services strategic response and recovery around the Port Public Health Alert.
- To act as advisor to the HSE response services in the area of Major Emergency response.
- To facilitate the area CMT if activated.

3.3. HSE Environmental Health Services

The core responsibility of the EHS is to ensure compliance with International Health and Infectious Disease Regulations, including the inspection of conveyances (Ships and Aircraft) and Port environs. In particular the duties of the Environmental Health Service include:

- Assisting with measures in the prevention / control of the spread of infection, as part of Incident Control Team.
- Inspection of the conveyance, including food safety standards, sanitary conditions, environmental sampling, infestations etc.
- Implementation of agreed control measures as required Oversee the implementation of disinfection, decontamination, dis-insection or deratting
- Advising the ship or Harbour Authority on control measures applicable to the ship/ port/baggage/cargo
- Assisting conveyances and Harbour Authority with sampling as appropriate Issuing of Ship Sanitation Control Certificate

3.4. HSE Public Health Departments

The actions taken by Departments of Public Health with respect to Port Health are mandated under the Public Health Infectious Disease (Shipping) Regulations 2008 and the Infectious Diseases Regulations 1981. These regulations are the legal basis for the MOH response to a serious infectious disease threat on a ship. Directors of Public Health (DPH) and SPHMs have been designated in writing by the HSE as MOHs.

The full details of the role and responsibilities of MOHs are laid out in the aforementioned regulations. These include the ability of the MOH to examine or cause to be examined:

- any person who is suffering from an infectious disease on board a ship
- any person who is on board such a ship, where there are reasonable grounds for believing or suspecting that infectious disease may be present on the ship, or that a person on board the ship has been exposed to infection from infectious disease during the voyage or during the 3 weeks prior to the ship's arrival
- any person believed to be carrying or infected with vermin

DPH/SPHM are involved in initial risk assessment of the situation, differential diagnosis and liaison with clinical colleagues.

DPH/SPHM are responsible for the provision of public health medical advice and management.

DPH/SPHM may also take such actions as are considered necessary to prevent onward spread of infection. These steps may include isolation and detention of a ship at a designated mooring station and prohibition of persons leaving a ship.

DPH/SPHM/Departments of Public Health will also identify and obtain contact details of potential contacts. They will consider the need for surveillance of contacts and carry out contact tracing of persons as appropriate.

DPH/SPHM will liaise with other stakeholders as necessary to minimise the actual or potential threat to public health. Stakeholders will include clinical colleagues e.g. hospital, general practitioners (GPs), microbiologists, laboratories; the public; ship's crew and passengers; port stakeholders; government agencies; HSE Communications.

DPH/SPHM undertake the Notification to the NFP (i.e. the HPSC), for national and international relay and management.

4. HSE Incident Management

4.1. Management of Case(s)/Suspect case(s)

Initial management will include but not limited to:

- The NEOC shall arrange for on-site clinical assessment (pre-hospital assessment by pre-hospital practitioner) of ill passengers, and liaise with the MOH.
- The NAS shall isolate the case(s)/suspected case(s) as appropriate and transfer to hospital if required, or on the ship if the patient's status is stable and medical personnel and suitable facilities are available. This may require communication between NAS staff and Medical Director or Deputy Medical Director of the NAS and/or between NAS Staff and the MOH.
- If appropriate, a list of close contacts of the case should be obtained.
- In the instance where a case of COVID-19 is on board, all passengers must fill out a passenger locator form (current guidance- see latest update **) (see Appendix 13) and these passenger locator forms may be requested by the MOH. See <u>Appendix 5</u> for guidance on decision making in the event of a possible or confirmed case of COVID-19 on a ship. See <u>Appendix 11</u> for the process of testing suspect cases of COVID-19 on board ships.
- If transferred to hospital, the hospital will be advised in advance by the NEOC and Public Health
- The Emergency Department is to advise where the patient(s) is/are to be assessed (for example not through emergency department).
- The Department of Public Health will brief GPs and hospitals and laboratories as appropriate.

**<u>https://enterprise.gov.ie/en/Publications/Publication-files/Transitional-Protocol-Good-Practice-Guidance-for-Continuing-to-Prevent-the-Spread-of-COVID-19.pdf</u>

4.2. Management of a possible affected conveyance

Questions to consider may include:

- Does the ship need to go to a designated mooring station / remain at mooring station?
- Can cargo be unloaded?
- Does the ship require inspection (within 12 hours of detention or as soon as possible thereafter)?
- Are control measures required and assess if they can be implemented at port?
- Is food or environmental sampling required or requested?
- Update Ship Sanitation documents as appropriate.

4.3. Preventing the spread of infection

The MOH shall risk assess jointly (see <u>Appendix 2</u>), consider likely differential diagnoses, and from this, provide advice and information to passengers and crew, including infection prevention and control advice. Using the MOH response protocol (see below link), the Department of Public Health shall identify and obtain contact details of potential contacts using the Public Health Contacts Form (see <u>Appendix 7</u>). The MOH will consider the need for surveillance of contacts as appropriate. The MOH may request the MDoH, details of the ship's itinerary over the previous 21 days, Details of all passengers and crew on board, including their points of embarkation and disembarkation over the previous 21 days, details of any incidents or illness which have occurred on the ship.

Further action not contained in this document might include the convening of an outbreak control team, infection prevention and control actions, or other actions deemed necessary.

Key document:

Medical Officer of Health (MOH) Response to a Communicable Disease Incident on a Ship V3.0

https://www.hpsc.ie/a-

z/emergencyplanning/porthealth/publichealthguidance/phguidancedocuments/MOH%20guidance%20for%20r esponding%20to%20a%20communicable%20disease%20incident%20on%20a%20ship%20Feb%202020_v3.0.p df.

The MOH/NAS may make requests of the Harbour Authority

- The Harbour Authority shall facilitate implementation of directions given by the MOH or the NAS
 Ambulance Officer acting on their behalf. This may include ensuring, in so far as is safe and feasible, that
 no persons embark or disembark until clearance is given by the MOH or the NAS Ambulance Officer acting
 on their behalf, following consultation with the Harbour Master Port Operations.
- Identify suitable location and make ready (if required) an isolation facility for examination of passengers and crew.
- Arrange with agent if required to provide a list of all passengers inclusive of the following details:
- Name and Address
- Passport number (if applicable)
- Contact address & telephone number for next 14 days
- Passenger's e-mail contact address.

Appendices

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4. Centers for Disease Control and Prevention. Public Health Emergency Preparedness

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5. Infectious Diseases Regulations 1981 (S.I. No. 390/1981).

6. EU SHIPSAN ACT joint action. European Manual for Hygiene Standards and Communicable

Disease Surveillance on Passenger Ships. Second Edition.; 2016.

Other relevant documentation

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Medical Officer of Health (MOH) Response to a Communicable Disease Incident on a Ship V3.0. HPSC 2020. <u>https://www.hpsc.ie/a-</u>

z/emergencyplanning/porthealth/publichealthguidance/phguidancedocuments/MOH%20guidance% 20for%20responding%20to%20a%20communicable%20disease%20incident%20on%20a%20ship%20 Feb%202020_v3.0.pdf

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Operational Considerations for Managing COVID-19 Cases and Outbreaks on Board Ships. WHO April 2020 (online course). <u>https://extranet.who.int/hslp/training/enrol/index.php?id=326</u>

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https://www.healthygateways.eu/Portals/0/plcdocs/EU_HEALTHY_GATEWAYS_COVID-19_Cleaning_Disinfection_ships_21_4_2020_F.pdf?ver=2020-04-21-154731-953

European joint action groups focusing on preparedness and coordinated action against health threats at points of entry

EU HEALTHY GATEWAYS Joint Action Preparedness and Action at Points of Entry (Ports, Airports, Ground Crossings). EU HEALTHY GATEWAYS Joint Action 2021. <u>https://www.healthygateways.eu/</u>

EU SHIPSAN ACT Joint Action (February 2013- April 2016). https://www.shipsan.eu/

COVID-19 specific resources

Coronavirus (COVID-19) Guidance for Ship Operators for the Protection of the Health of Seafarers v3. International Chamber of Shipping 2020. <u>https://www.ics-shipping.org/publication/coronavirus-covid-19-guidance-for-ship-operators-for-the-protection-of-the-health-of-seafarers-v3/</u> COVID-19: EU guidance for cruise ship operations. ECDC 2020. <u>https://www.ecdc.europa.eu/en/publications-data/COVID-19-cruise-ship-guidance</u>

Management of ill travellers at Points of Entry (international airports, seaports, and ground crossings) in the context of COVID-19. WHO March 2020. <u>https://apps.who.int/iris/bitstream/handle/10665/331512/WHO-2019-nCoV-POEmgmt-2020.2-eng.pdf</u>

Management of ill travellers at points of entry in the context of the COVID-19 outbreak. WHO April 2020 (online course). <u>https://extranet.who.int/hslp/training/enrol/index.php?id=325</u>

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Appendix 2: Prescript format for Port Public Health Event/ Alert

Prescript format for a ship notifying the Harbour Master of a **Port Public Health Event**

"My name is	My title is
My contact number is	
Please prepare to receive an	ETHANE
message:	
E Estimated time of arrival o	f vessel, name of vessel, origin of vessel
T Nature of the complaint-ill	ness
H Hazardous material involve	ed, if any
A Access, Berth No or Meetir	ng point for National Ambulance Service
Number of persons affecte	d, the number of persons on board
E Other emergency services	present and required
"We are identifying	as the on-site command centre of operations*
for this event"	

Prescript format for requesting activation of a Port Public Health Alert

Ale The	lowing a joint assessment by EHS and Public Health, it may be deemed that a Port Public Health rt should be activated, upon which EHS or Public Health shall contact: e NEOC (see <u>Appendix 6</u> for contact details). quest the activation of the Port Public Health Alert in the following prescript format:
	This is the Department of Public Health / Environmental Health, I am requesting
	the activation of a Port Health Alert forPort
	My name is:My title is
	My contact number is;
	Please prepare to receive an ETHANE message:
	E Estimated time of arrival of vessel, name of vessel, origin of vessel
	T Nature of the complaint -illness
	H Hazardous material involved, if any
	A Access, Berth No, (to be confirmed by the Harbour Master or Harbour Authority Bld)
	N Number of persons affected, the number of persons on board
	E Other emergency services present and required
	A teleconference will take place between Public Health, Environmental Health, the HSE Emergency Management and the National Ambulance Service atTIME
	The dial-in details for this teleconference are General Telephone Number:
The	e NEOC Manager initiating the activation should then contact the Harbour Master.
The	e notification will be passed in the below prescript format (see next page):

Prescript format for the NEOC notifying the Harbour Master of the activation of a Port Public Health Alert

My name is:My title is My contact number is; "I am requesting the activation of a Port Health Alert for Port on behalf of the Department of Public Health and or Environmental Health. This activation has been requested following assessment of a received Maritime Declaration of Health". And relay the following information; 1. The name and contact details of the SPHM on-call/EHS officer. 2. The name of the vessel. 3. Meeting Point is Port Operations Centre.	This is ⊦	ISE National Emergency Operations Centre,
"I am requesting the activation of a Port Health Alert for Port on behalf of the Department of Public Health and or Environmental Health. This activation has been requested following assessment of a received Maritime Declaration of Health". And relay the following information; 1. The name and contact details of the SPHM on-call/EHS officer. 2. The name of the vessel.	My nam	e is:My title is
 the Department of Public Health and or Environmental Health. This activation has been requested following assessment of a received Maritime Declaration of Health". And relay the following information; The name and contact details of the SPHM on-call/EHS officer. The name of the vessel. 	My conta	act number is;
 been requested following assessment of a received Maritime Declaration of Health". And relay the following information; The name and contact details of the SPHM on-call/EHS officer. The name of the vessel. 	"I am re	equesting the activation of a Port Health Alert for Port on behalf of
Health".And relay the following information;1. The name and contact details of the SPHM on-call/EHS officer.2. The name of the vessel.	the Dep	artment of Public Health and or Environmental Health. This activation has
And relay the following information;1. The name and contact details of the SPHM on-call/EHS officer.2. The name of the vessel.	been re	equested following assessment of a received Maritime Declaration of
 The name and contact details of the SPHM on-call/EHS officer. The name of the vessel. 	Health".	
 The name and contact details of the SPHM on-call/EHS officer. The name of the vessel. 		
2. The name of the vessel.	And rela	y the following information;
	1. T	he name and contact details of the SPHM on-call/EHS officer.
3. Meeting Point is Port Operations Centre.	2. T	he name of the vessel.
	3. N	leeting Point is Port Operations Centre.

Appendix 3: Suggested agenda for teleconference following activation of a Port Public Health Alert

Suggested Agenda

- Roll call and introductions
- Chair appointment Public Health
- Background information on the event from informants
- Risk Assessment
- Epidemiology
- Environmental
- Microbiological
- Risk Management- Proposed actions and health measures
- Scaling Up
- surge capacity requirements (additional departmental staff, clerical, other Public Health departments, HPSC, etc.)
- activation of Regional CMT
- Communication
- Harbour Authority/on-site command centre/Harbour Master, ship, ship's agent, passengers
- Other
- Notify NFP at HPSC if needed
- HSE Communications department- consider preparing holding media statement
- Contact numbers for all
- Review agreed actions
- Next meeting

Appendix 4: Public Health/Environmental Health communicable disease incident risk assessment form

Available from: <u>https://www.hpsc.ie/a-</u>

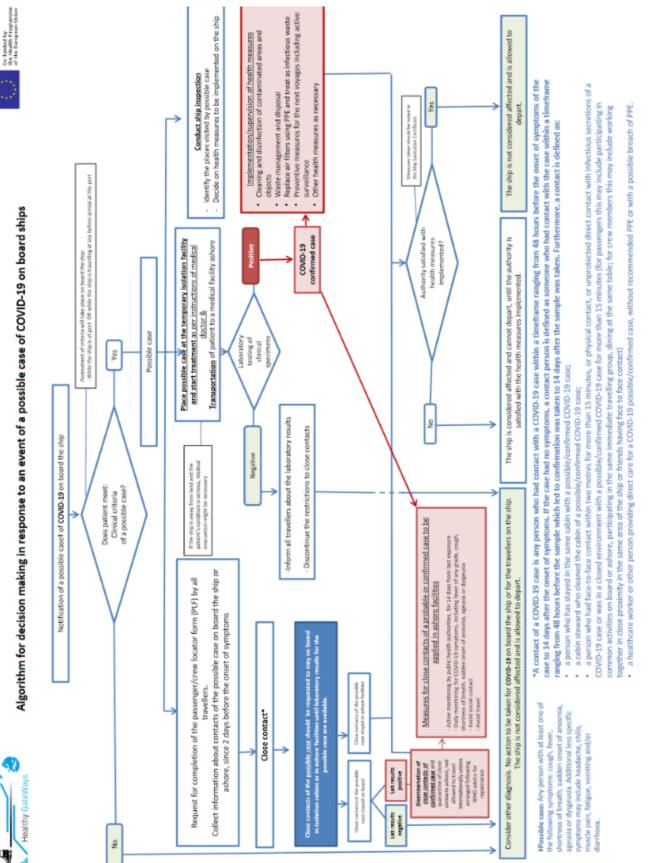
z/emergencyplanning/porthealth/publichealthguidance/forms/seaportforms/File,15513,en.pdf

Fredhresmart is within State Bealth Struct To within State
Date Port Time Berth Location
Name and contact details of Harbour Master
INFORMANT
JobTitle Surname Forename
Contact details
Has the Medical Declaration of Health Form (MDOH) been provided Yes No If yes, some of the information below may be sourced from the MDOH form Are there medical personnel on board Yes No
If yes, please give name and contact details including phone number
SHIP INFORMATION
Name of ship Ship contact details
Where did the voyage originate:
What ports have been visited to date:
NUMBERS ILL
When and where did the first person become ill
Countries where ill persons were exposed to in the past 21 days
Total number of passengers on board Total number of ill passengers Total number of crew on board Total number of ill crew
SYMPTOMS IN THOSE ILL ON BOARD
Tick the symptoms associated with the illness Headache Temperature> 38°C Diarrhoea Confusion of recent onset History of fever Bloody diarrhoea Neck stiffness Myalgia Vomiting Dizziness Unexplained bruising Cough Loss of consciousness Jaundice Runny nose Rash Image: State of the symptoms and the symptom
Describe the rash
Other, please specify
Has any ill passenger travelled from an endemic area for VHF within the past 21 days? (see www.hpsc.ie for list of endemic areas and guidance on VHF risk assessment)
Duration of illness
Current status of ill persons

Sufficience International Force Forciant Beddit Mover Forciant Beddit Mover Forciant
What tests have been carried out What is the current working diagnosis
PUBLIC HEALTH RISK ASSESSMENT
Infectious Yes No
Possible Public Health Emergency of International concern Yes No
Likely Diagnosis:
PUBLIC HEALTH ACTIONS
Signature Date

Appendix 5: Algorithm for decision making in response to an event of a possible or confirmed case of COVID-19 on board ships





Appendix 6: Contact information

Departments of Environmen	tal Health (09:00–17:0	0, Monday–Fri	day)							
Dublin Port		(01) 8976140								
Cork Port		(021) 4927703								
Limerick Port		(061) 461502								
Rosslare Port		(053) 9114381	L							
Waterford Port		(051) 842957								
Email		ehnationaloffi	ce@hse.ie and phou@hse.ie							
	h (00:00 17:00 Mand									
Departments of Public Healtl Region	In hours phone num									
HSE East	(01) 635 2145	IDEI	idnotifications.east@hse.ie							
HSE Midlands	(057) 9359891		hprotmidlands@hse.ie							
HSE Mid-West	(061) 483338		dphoncall.midwest@hse.ie							
HSE North-East	(046) 9076412		dph.ne@hse.ie							
HSE North-West	(071) 9852900		infoid@hse.ie							
HSE South East	(056) 7784142		Covid19.phse@hse.ie							
HSE South	(021) 4927601		dphoncall.south@hse.ie							
HSE West	(091) 775200		phdoc.west@hse.ie							
HPSC	(01) 8765300	healthprotectionhpsc@hse.ie								
Public Health Depts Out of hours phone number	the caller onto the i	relevant SPHM	r for the NEOC, who will forward on-call. There is limited access- ty, Harbour Master for example.)							
Harbour Masters of the Desig	gnated Ports in hours.	Regions should	l keep out of hours numbers locally.							
Dublin Harbour Master		(01) 8876045								
Limerick Harbour Master		(069) 73100 (maritime ops)								
Rosslare Harbour Master		(053) 9157920								
Waterford Harbour Master		(051) 899801								
Cork Harbour Master		(021) 4273125								
HSE Emergency Managemen	t (09:00–17:00. Mond	av–Fridav)								
Dublin	,	(01) 7959840								
		(091) 775080/ (091) 775079								
West		(091) //5080/	(091) 775079							
West South		(091) 775080/ (021) 4921622	• •							
			• •							
South	e (ERCC)									
South Dublin Fire Brigade	e (ERCC)	(021) 4921622								
South Dublin Fire Brigade East Region Command Centr	e (ERCC)	(021) 4921622	• •							

Appendix 7: Public Health contacts form

Available from:	https:/	<mark>/www.h</mark>	psc.ie/	<u>′a-</u>
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z/emergencyplanning/porthealth/publichealthguidance/forms/seaportforms/File,15516,en.pdf

forthmeanacht na Soithine Stáinte Bealth Service Executive										
- 1000	Public Health Passenger Contact Card									
In acco	In accordance with Infectious disease (shipping) regulations, S.I. No 4, 2008, please complete the following:									
SHIP INFORMATION										
Name of ship	Date of arrival									
Port										
	PERSONAL INFORMATION									
Last name	First name									
Date of Birth	Age Sex M F									
	CONTACT DETAILS									
Mobile/cell	Prefix Phone Number									
Email:										
Home address										
Contrast - dd	ea) in Iraland (if different from abova)									
	es) in Ireland (if different from above)									
· · · · · · · · · · · · · · · · · · ·										

Appendix 8: Model of a Maritime Declaration of Health

Available from: <u>https://www.hpsc.ie/a-</u> z/emergencyplanning/porthealth/publichealthguidance/forms/seaportforms/APPENDIX%20C%20MARITIME %20DECLARATION%20OF%20HEALTH.pdf

To be	e completed and submitted to the competent authorities by the masters of ships arriving from foreign ports.
Name (Nati Gross Tonn Valid Re-in Has s Port a	nitted at the port of
since	n request of the competent authority at the port of arrival, list crew members, passengers or other persons who have joined ship/vesse e international voyage began or within past thirty days, whichever is shorter, including all ports/countries visited in this period (ad tional names to the attached schedule):
(1) (2)	Name
(2) (3)	Name(2)
	aber of crew members on board
Num	ber of passengers on board
	Health questions
(1)	Has any person died on board during the voyage otherwise than as a result of accident? yes no If yes, state particulars in attached schedule. Total no. of deaths
(2)	Is there on board or has there been during the international voyage any case of disease which you suspect to be of an infectious nature? yes no If yes, state particulars in attached schedule.
(3)	Has the total number of ill passengers during the voyage been greater than normal/expected? yes no How many ill persons?
(4)	Is there any ill person on board now? yes If yes, state particulars in attached schedule.
(5)	Was a medical practitioner consulted? yes no If yes, state particulars of medical treatment or advice provided in attach schedule.
(6)	Are you aware of any condition on board which may lead to infection or spread of disease? yes no If yes, state particulars in attached schedule.
(7)	Has any sanitary measure (e.g. quarantine, isolation, disinfection or decontamination) been applied on board? yes no If yes, specify type, place and date
(8)	Have any stowaways been found on board? yes If yes, where did they join the ship (if known)?
(9)	Is there a sick animal or pet on board? yes no
	: In the absence of a surgeon, the master should regard the following symptoms as grounds for suspecting the existence of a disease fectious nature:
	 (a) fever, persisting for several days or accompanied by (i) prostration; (ii) decreased consciousness; (iii) glandular swellin (iv) jaundice; (v) cough or shortness of breath; (vi) unusual bleeding; or (vii) paralysis.
	(b) with or without fever: (i) any acute skin rash or eruption; (ii) severe vomiting (other than sea sickness); (iii) severe diarrhoea; or (iv) recurrent convulsions.
	reby declare that the particulars and answers to the questions given in this Declaration of Health (including the schedule) are true a set to the best of my knowledge and belief.
	Signed
	Master
	Countersigned
	Ship's Surgeon (if carried)

Appendix 9: Checklist/ non-exhaustive summary to assist with management of a seaport COVID-19 event/outbreak v3 100222

For use of Public Health on-call and multidisciplinary teams managing an event/outbreak situation If a ship arriving into a port has suspected or confirmed COVID-19 cases among its crew and/or passengers. This appendix should be read in conjunction with this full document 'HSE Response plan for the management of a Port Public Health Alert at points of entry (seaports)' and up to date guidance on COVID-19 case/contact management (www.hpsc.ie).

	1.									
1.	•	Epidemiological and Environmental Investigation								
(i)		Receiving the Maritime Declaration of Health (see Appendix 8 for model MDoH)								
	The ship's captain will submit the Maritime Declaration of Health (MDoH) to Port									
	Authority/Environmental Health. Upon receipt of MDH, Environmental Health will alert									
		Public Health.								
		• MDoH should be submitted to Port/EHS pre-arrival through Safe Seas Ireland, in								
		most instances. Public Health can request it from either Harbour Authority or EHS.								
		• MDoH will include departure dates and arrival dates, ports of call, lists of those								
		who joined the ship, list of ill aboard and nature of illness								
(ii)		Confirmed or suspect crew/passenger case of COVID-19 on board:								
		• Review case details, including symptoms, symptom onset date, possible								
		exposures, and close contacts etc.								
		Undertake contact tracing as per relevant guidance								
(iii)		If needed, convene a multidisciplinary outbreak control team (OCT) meeting.								
		Representatives from Public Health, EHS, NAS and Emergency Management, as well as the								
		Harbour Master and shipping agent may need to partake.								
2.	•	Case(s) Management on board/ on shore								
Most	ca	ases will be isolated on board as per the Ship's COVID Management Plan and may not								
requir	re	significant Public Health involvement. Public Health expects that medical oversight of a								
cruise	e s	hip's passengers/ crew should be provided - by prior arrangement between the shipping								
comp	ar	ny and relevant medical expertise - by a medical officer on board or by a maritime medical								
agenc	су	or otherwise. The ship's captain may seek further clinical assistance, when in Irish Waters,								

The clinician/ NAS paramedic/advanced paramedic who has assessed the patient(s) will decide if they are well enough to remain on board or if they need to be brought ashore for further

from NAS (HSE National Ambulance Service) or from Medico Cork.

assessment and/or admission to hospital. The NAS paramedic/ clinician will update Public Health accordingly. Medico-Cork should also update Public Health. (Public Health Alert System in operation)

If an infectious agent is suspected, Public Health will offer risk assessment and advise as necessary. The role of Public Health is to prevent/control spread, and will advise on public health management of cases and contacts, infection prevention and control measures. It is important to note that Public Health does not have a clinical review role with regard to cases /contacts on board. In the event of any clinical deterioration of ill persons still on board, they should be reassessed by the on-board medical officer, NAS, or Medico Cork as appropriate and clinical attention obtained.

Case(s) may require being taken ashore +/- hospitalisation depending on outcome of clinical assessment:

- Hospital transfer arrangements (NAS with Public Health alert)
- Arrangements for isolation ashore if required.

If remaining on board (should be as per Ship's COVID Management Plan):

- Case Isolation & symptom monitoring (clinical oversight provided by shipping company's designated person as per ship's outbreak management plan))
- Increase natural ventilation where possible.
- Appropriate use of PPE.
- Log of visitors to isolation cabin.

Public Health should be kept informed of any additional symptomatic individuals or new cases on board. This will likely be achieved through submission of a new MDoH, phonecall, or email to the Department of Public Health.

3. Contact Management on board/ on shore

- Close contacts generally identified via ships track and trace protocol
- Public health advice to close contacts vis restricted movements / testing where necessary
- Testing arrangements for close contacts
- Shore leave for crew should be cancelled pending designation of contacts. Following designation, crew close contacts will generally restrict movements on board.

4. Communication of Public Health information/requests/directions:

- If need to talk to ship's captain, who has overall governance over the ship's movements and the passengers, contact the shipping agent who is the land-based point of contact in Ireland. Some captains operate their own email on board.
- The ship should have identified a COVID-19 Coordinator for liaison with Public Health, EHS. e.g. the purser or master. Liaise with medical personnel on board if/as necessary.
- If need to stop ship docking or leaving, go through Harbour Master.
- If need to stop passengers/crew disembarking, go through harbour master initially.

5. General advice on COVID-19 preventive measures on board (where indicated).

In previous times, this may include consideration of:

- Workforce division by role e.g. deck, hotel, engine room no mingling.
- Bubble working
- Masks in all areas except when eating
- Segregation when eating
- Changing areas (e.g. to overalls for deck crew : buddy system two at a time)
- Encourage vaccination for all staff
- Cleaning & Disinfection; Touch points, post-isolation rooms etc.
- Provide cleaning plan (see Appendix 10)- augmented cleaning, fogging and ventilation regime
- Assess chemicals, fogging, disinfection, hot spots, touch points, high traffic area disinfection (bridge, restaurant, engine room), as well as deck, engine room and tools, ventilation schedule and filtration, cabin cleaning.
- Super chlorination of air conditioning units.
- Air changes per hour in all communal areas.

Appendix 10: Summary of cleaning and disinfection on a COVID-19 affected vessel

Suggested procedures for cleaning and disinfection of ships during the COVID-19 pandemic Version 2, 20 April 2020.

Available from: <u>https://www.healthygateways.eu/Portals/0/plcdocs/EU_HEALTHY_GATEWAYS_COVID-</u> <u>19 Cleaning Disinfection ships 21 4 2020 F.pdf?ver=2020-04-21-154731-953</u>

	Healthcare setting	Non-healthcare setting	General settings
Surfaces	Neutral detergent AND Virucidal disinfectant OR 0.05% sodium hypochlorite OR 70% ethanol [S]	Neutral detergent AND Virucidal disinfectant OR 0.05% sodium hypochlorite OR 70% ethanol [S]	Neutral detergent [S]
Toilets	Virucidal disinfectant OR 0.1% sodium hypochlorite [S]	Virucidal disinfectant OR 0.1% sodium hypochlorite [S]	Virucidal disinfectant OR 0.1% Sodium hypochlorite [O]
Textiles	Hot-water cycle (90°C) AND regular laundry detergent alternative: lower temperature cycle + bleach or other laundry products [S]	Hot-water cycle (90°C) AND regular laundry detergent alternative: lower temperature cycle + bleach or other laundry products [S]	n/a
Cleaning equipment	Single-use disposable OR Non-disposable disinfected with: Virucidal disinfectant OR 0.1% sodium hypochlorite [S]	Single-use disposable OR Non-disposable disinfected with: Virucidal disinfectant OR 0.1% sodium hypochlorite [0]	Single-use disposable OR Non-disposable cleaned at the end of cleaning session [S]
PPE for cleaning staff	 Surgical mask Disposable long-sleeved water-resistant gown Gloves FFP2 or 3 when cleaning facilities where AGP have been performed [S] 	 Surgical mask Uniform and plastic apron Gloves 	• Uniform • Gloves [S]
Waste management	Infectious clinical waste category B (UN3291) [S]	In a separate bag in the unsorted garbage [S]	Unsorted garbage [S]

Table 1. Cleaning options for different settings. S: Suggested, O: Optional.

Appendix 11: HSE Port Health protocol with respect to arranging a COVID-19 test: v3 100222

This information is correct as of 10/02/2022; please seek current guidance and national/regional protocols as this is a transition period.

This Protocol is a supplement, not a replacement for agreements already in place i.e. in case of person ill with suspect Infectious Disease (ID) of international significance, NAS are called to conduct an initial risk assessment and transfer ill person to Mater Misericordiae Hospital (MMH), if clinically indicated.

This protocol addresses the situation where person affected does not need transfer to hospital but where COVID-19 swab result is needed to assist in decision re care of crew +/- passengers and onward/detention of ship with implications for cargo etc. In the event the person is not clinically indicated for transport to hospital, they should be advised to self-isolate either at home or on the ship.

COVID-19 testing and close contact regulations are subject to change. Please review the latest guidance on the Health Protection Surveillance Centre website: <u>https://www.hpsc.ie/a-</u> <u>z/respiratory/coronavirus/novelcoronavirus/guidance/newupdatedguidance/</u> COVID-19 testing should be organised in line with the current national guidance. <u>https://www2.hse.ie/conditions/covid19/testing/get-tested/</u>

If a crew member/passenger requires a PCR test for whatever reason this can be arranged via the HSE website <u>https://covid19test.healthservice.ie/hse-self-referral/</u> or via a General Practitioner. However, in shipping environments where PCR testing may not be available in a timely manner, in order to expedite diagnosis antigen testing may be considered.

Appendix 12: Initial questions as part of a standard first response to a Port Public Health Event and options for actions

Available from:

https://apps.who.int/iris/bitstream/handle/10665/205796/9789241549462_eng.pdf?sequence=1

Question	Specific indicative options for action
 Is a human life in danger (clinical signs and symptoms among travellers and severity)? 	Evacuation of ill traveller Medical support Ambulance arrangement Identification of the medical facility to send the patient ashore
Has any death been linked with the event?	 Investigate cause of death; ensure that autopsy has been arranged, if necessary; ensure IMGS (17) has been followed, and check if contact tracing is needed; ensure that death has been registered
 Is there a doctor on board? 	 Ensure access to radio medical support Send doctor to board the ship en route or upon arrival of the ship at the port
 Is the event an immediate risk to health? Is there a potential for spread on board or ashore or in the environment? 	 Consider activating the contingency plan at the port if necessary Consider if contact tracing is needed
Are special measures needed upon arrival at the port? Does the ship need any supplies?	Arrange delivery of supplies that the ship may need (e.g. PPE, medicines)
 Are any precautions for disembarkation of ill and healthy tra- vellers needed? 	Communicate with the terminal station staff and start preparing arrangements
 Is the event related to a hazard where other authorities/experts should be involved (clinicians, epidemiologists, environmenta- lists, experts on responding to chemical or radiological events)? 	Communicate with other authorities/experts If appropriate, report the event to the NFP for further assessment and notification to WHO if necessary
 Is the ship coming from an affected area where WHO has re- commended measures in place? 	 Consult WHO website for recommendations on health measures If appropriate, report the event to the NFP for further assessment and notification to WHO if necessary
 Have clinical specimens or environmental samples been collec- ted or do officers of the competent authority need to collect them? 	 Arrange collection of clinical specimens or environmental samples Arrange transport and delivery of clinical specimens to an appropriate laboratory Communicate data related to the sample and its shipment to appropriate authorities.

Appendix 13: Passenger locator forms

WHO Passenger Locator Form. Available from: <u>https://www.who.int/publications/m/item/public-health-passenger-locator-card</u>

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Ireland's COVID-19 Passenger Locator Form

Available from: <u>https://cvd19plf-prod1.powerappsportals.com/en-us/</u>

Updated 20 November 2020.

1. Personal Details: Eolas Pearsanta	e
First name: Céadaine:	Last name: Sloinne:
Date of birth: Ddta Breithe:	
Mobile phone number: Ulmhir för på	ca: Country Code: Cod Tire: +
Email address: Seoladh r-phoist:	
2. Travel Information: Faisneis Taist	97
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Carrier: Iompróir:	
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Address 2: Seoladh 2:	
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Last name: Sloinne:	
First name: Céadainm:	
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Child 2: Leanbh 2:	
Last name: Sloinne:	
First name: Céadainm:	
Date of birth: Dáta Breithe:	
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