

State of readiness at Point of Entry



Ebola Virus Disease (Bundibugyo strain), Clinical and Risk Communication & Community Engagement Webinar



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PURPOSE



To present the **Measures Implemented at Points of Entry for the Management of Ebola**



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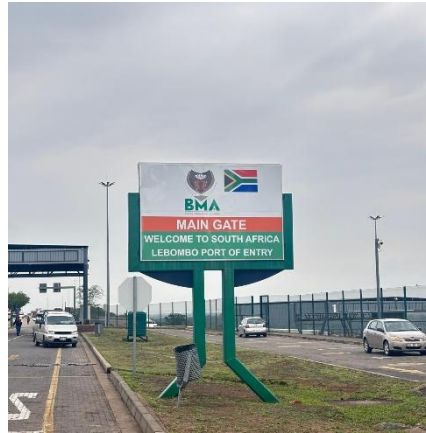
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Definition of Port Health Services

Port Health Service (PHS) is the first line of defense to protecting the citizens of RSA against the health risks associated with cross-border movement of people, conveyances, baggage, cargo and imported consignments.



How do we protect the country



IHR implementation at ports, airports and ground crossings

PREVENTION

Containing known public health risks



Routine control of "Sanitary conditions" at points of entry and conveyances

Risk management

EARLY WARNING

Detecting relevant health events



Inspection, Information and verification

Risk assessment

RESPONSE

Responding to public health emergencies



Support to investigation and contingency plans to adopt control measures

Event management

Conveyances inspection programmes and control measures

Source: WHO



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Core Capacity Requirements for PHEIC



Core Capacity

Response to a potential public health emergency

Provide appropriate public health emergency response by establishing and maintaining a public health emergency response plan, including the nomination of a coordinator and contact points for relevant point of entry, public health, and other agencies and services

Provide assessment of and care for affected travelers (or animals) by establishing arrangements with local medical (and veterinary) facilities for their isolation, treatment, and other support services that may be required

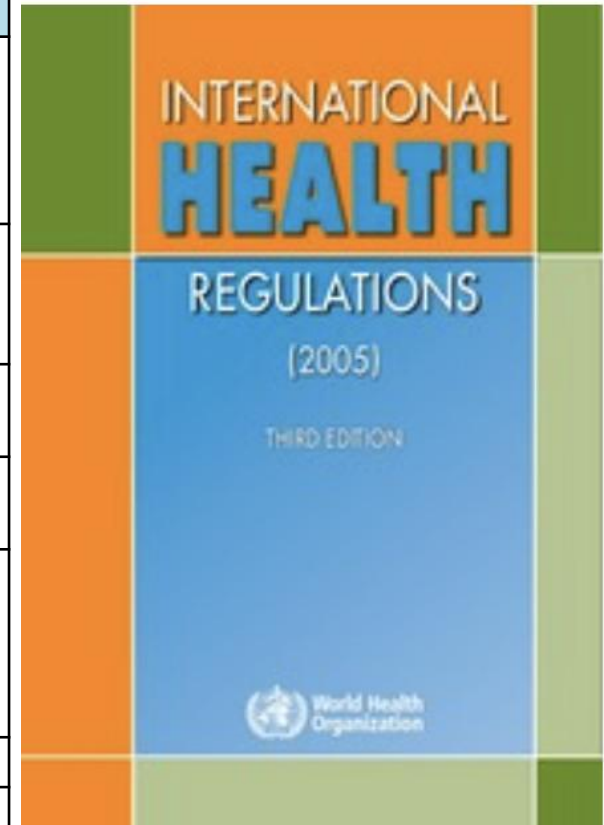
Provide appropriate space, separate from other travelers, to interview suspect or affected persons

Provide for the assessment and, if required, quarantine of suspect travelers, preferably in facilities away from the port of entry

To apply recommended measures to disinsect, derat, disinfect, decontaminate, or otherwise treat baggage, cargo, containers, conveyances, goods, or postal parcels including, when appropriate, at locations specifically designated and equipped for this purpose

Apply entry or exit controls for arriving and departing travelers

Provide access to specially designated equipment, and to trained personnel with appropriate personal protection, for the transfer of travelers who may carry infection or contamination.



Multi-Layered Screening Approach



Port Health implement a multi-layered screening approach– monitoring of arriving conveyances, visual observation and temperature screening
(traveller health questionnaire)

Notification of ill
traveller on
board

Visual
Observation –
Traveller looks
visually unwell

Traveller has
elevated
temperature

Traveller has
answered yes to 2
or more questions
in THQ

Risk assessment to determine if traveller meets case definition of
suspect case and to inform next steps towards the response
actions

Traveller meets case definition,
activation of PHECP



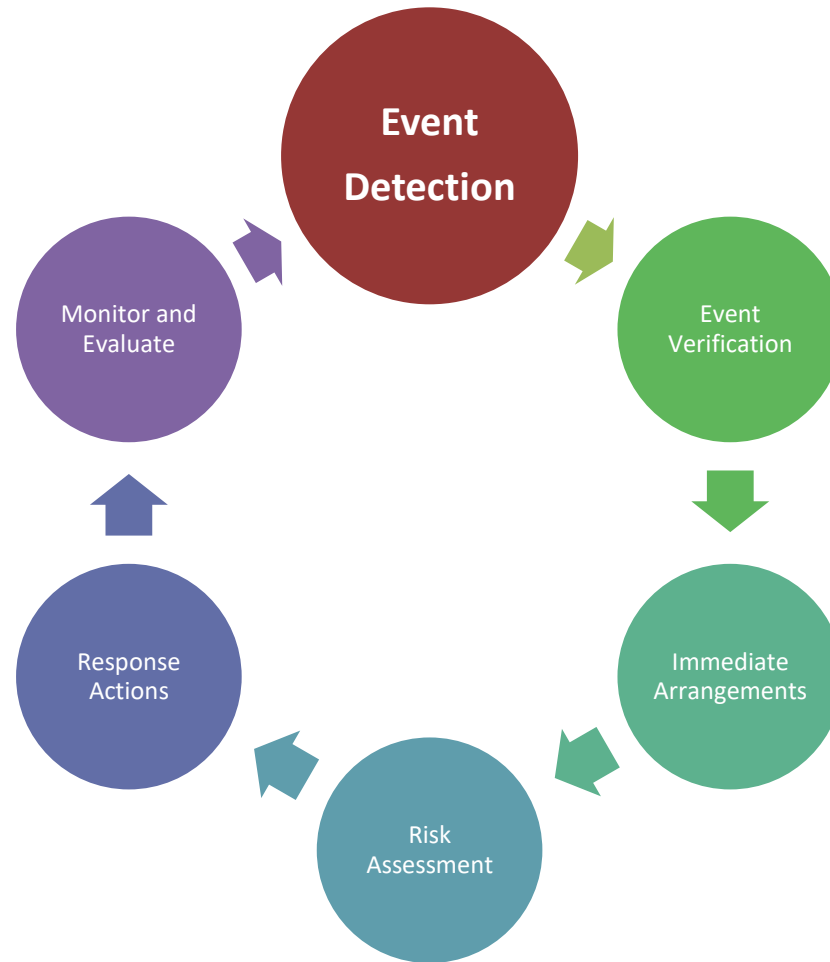
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Event Detection



Detect
Assess
Report
Respond



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Event Detection



An ill traveller can be detected during different processes and sources:

Conveyance
Operator
prior arrival

On arrival
of a
conveyance

During
temperature
screening

Visual
observation
by PHO on
arrival

Notification
from port
users at the
PoE



Detection
during
conveyance
monitoring



Temperature
screening
using
thermal
scanner



Notification
from border
officials



Visual
observation
of ill person

Multi-layered screening approach



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Event Detection



Importance of continuously communicating with port stakeholders:

- Signs and symptoms
- Notification procedures



- Aviation/port authorities
- Airlines/ship agents/public transport associations
- Pilot/Driver/Master of vessel
- Security agencies (including Customs and Police)
- Law enforcement
- Emergency medical and ambulance services
- National Department of Health, including representatives from Province/district
- Referral hospitals
- Port authorities (i.e TNPA).



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Event Verification and Preliminary Risk Assessment



Once notified, Port health confirm and collect additional information:

- ✓ Symptoms experienced
- ✓ When did the symptoms start
- ✓ Have the crew taken temperature
- ✓ Number of people experiencing symptoms
- ✓ Departure airport/country/port
- ✓ Travel history of ill traveller
- ✓ Number of people onboard
- ✓ Seat numbers of people experiencing symptoms
- ✓ Are there any accompanying travellers
- ✓ Any actions taken by the crew
- ✓ Were there any episodes of contamination with body fluids (vomit, diarrhoea, blood etc.) of the aircraft/crew/passengers during the journey



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Immediate Arrangements



If traveller experiences one or more of BVD symptoms and has a travel history to affected areas or has exposure history, PHO activate procedures in **Public Health Contingency Plan**.

- ✓ Ensure availability of required PPE
- ✓ Contact EMS and Designated Health Facility
- ✓ Notify Provincial CDC
- ✓ Notify IHR Focal Points
- ✓ Notify Public Health Emergency Operations Centre
- ✓ Notify PoE stakeholders
- ✓ All necessary forms, incl. passenger locator card and health questionnaire

PHECP covers:

- Parking area of conveyance
- Traveller screening and assessment
- Isolation facility
- Referral and transfer
- PPE
- Disinfection of conveyance
- Communication and escalation

NICD is contacted for tec through the Hotline! 0800 212 552



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Risk Assessment



- PHO and Port Health Nurse/Medical Crew board the conveyance
- PHO verifies health declaration documents and collects passenger manifest
- PHO interviews ill passengers using risk assessment form
- Nurse/medical crew conduct medical assessment.
- If traveller experiences symptoms and has travel exposure, implement additional response measures (e.g. referral or isolation)

Section 1: Port Health notification									
Person notifying Port Health:				Phone number of person notifying Port Health:					
Agency notifying Port Health:		Date of notification to Port Health: mm / dd / yyyy		Time of notification to Port Health (24 hrs): hh: mm					
Type of notification: ☐ Illness ☐ Death				When was Port Health notified? ☐ Prior to boarding conveyance ☐ After disembarking conveyance ☐ While traveler was on a conveyance ☐ Other ☐ After travel completed (person has reached final destination)					
Type of traveler: ☐ Passenger ☐ Crew									
Section 2: Pertinent medical history of ill or deceased person									
Relevant history: present illness, other medical problems, vaccinations, overseas physician diagnosis, etc.:									
Traveler has taken: ☐ Antibiotic/antiviral/antiparasitic(s) in the past week; list with date(s) started: _____ ☐ Fever-reducing medications (e.g. paracetamol, ibuprofen) in the past 12 hrs; list with time of last dose: _____									
Relevant Exposures in the Past 3 Weeks:									
Village/City/State	Province/Country	Arrival Date	Exposure to ill persons?	Exposure to animals?	Other exposures (contaminated food or water, drug ingestion, etc.)?				
			☐ No ☐ Yes	☐ No ☐ Yes	☐ No ☐ Yes				
			☐ No ☐ Yes	☐ No ☐ Yes	☐ No ☐ Yes				
Signs, Symptoms, and Conditions (check all that apply):									
☐ FEVER ($\geq 38^{\circ}\text{C}$) OR feeling feverish/having chills in past 72 hrs Onset date: ____/____/____ Current temperature: ____°C			☐ Persistent Vomiting Onset date: ____/____/____ Number of times in past 24 hrs? ____			☐ Obviously unwell Onset date: ____/____/____			
☐ Persistent cough Onset date: ____/____/____ ☐ With blood ☐ Without blood ☐ Difficulty breathing/shortness of breath Onset date: ____/____/____			☐ Skin Rash Onset date: ____/____/____ Description of skin rash: _____			☐ Other Onset date: ____/____/____			
☐ Persistent Diarrhea Onset date: ____/____/____ Number of times in past 24 hrs: ____			☐ Unusual bleeding Onset date: ____/____/____			For Deceased Persons Date and time of death: ____/____/____ Presumptive Cause of Death: _____ Body released to medical examiner? ☐ Yes ☐ No Medical Examiner Contact Information: _____			
Section 3: General information about the ill or deceased person									
Family name:		First/given name:				Middle name:			
Gender: ☐ Male ☐ Female		Date of birth: ____/____/____		Country of birth:		Age (if date of birth unknown):		Passport country/citizenship:	
Country of residence:		Home address:				City/Province/Country:			
Phone Number:		Emergency Contact Name:				Emergency Contact Phone:			
Section 4: Flight information (current flight on top row, previous/upcoming flights on following rows)									
Domestic or International?	Airline	Flight #	Departure Airport Code	Departure Date	Arrival Airport Code	Arrival Date	Seat #	Flight Duration	
Section 5: Disposition of ill/deceased person (check all that apply)									
☐ Released to continue travel ☐ Advised to seek medical care ☐ Recommended to not travel ☐ Transported to hospital: ☐ Transported to non-hospital location: _____ ☐ Other: _____									

Response Actions



- If ill traveller is stable, provide information to other travellers and allow them to disembark, except for the contacts.
- Collect information of contacts using passenger locator card.
- Ill traveller transported directly by ambulance to designated health facility.
- PHO communicates details of contacts to provincial CDC and PHEOC.
- PHO supervises cleaning and disinfection of conveyance.



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Identification on Arrival of Conveyance



Event Detection

- Assessment of health declarations
- Crew interviews.

Event Verification

- Thorough interviews with crew with additional questions asked.

Immediate Arrangements

- Notify stakeholders for arrangements.
- Ensure PPE is available before interviewing the crew.
- Alert EMS

Risk Assessment

- Conduct risk assessment/secondary screening.
- If travellers meets suspect case definition, response activities to be implemented in line with PHECP.
- Inform EMS and referral hospital,

Response Actions

- If ill traveller is stable, provide information to other travellers, allow them to disembark, except for the contacts
- Collect information for contacts using PLC and allow disembarkation.
- EMS transfer to designated hospital.
- Communicate with provincial CDC and PHEOC.
- Supervise disinfection of conveyance



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Identification during Screening in PoE Facilities



Event Detection

- Traveller found to have elevated temperature during screening.
- PHO notified by PHO workers of ill traveller.

Event Verification

- Interview of traveller to establish symptoms and event verification questions.

Immediate Arrangements

- Escort traveller to temporary interview area or separate from others.
- Alert stakeholders for arrangements.
- Ensure risk assessment forms available.

Risk Assessment

- If port health clinic is available, refer to clinic.
- If no clinic available at the PoE, PHO conducts secondary screening using risk assessment tool.
- If travellers meets suspect case definition, response activities to be implemented in line with PHECP.
- Inform EMS and referral hospital.

Response Actions

- Traveller to be kept in isolation area/staging area away from other travellers until EMS arrival for transfer to designated health facility.
- Identify possible contacts and collect contact tracing information.
- EMS transfer to designated hospital.
- Communicate with provincial CDC and PHEOC.
- Supervise cleaning and disinfection.



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Monitoring Disinfection of Conveyances



Activity	Yes	No	Remarks
Cleaning personnel are wearing appropriate protective gloves.			
Cleaning wearing eye protection where splashing may occur.			
Biohazard bag available?			
Where biohazardous bag is not available, is the regular refuse bag labelled as "biohazard"			
All areas are cleaned first by removing any solids and soaking up liquid waste.			
Disinfectant is then applied according to the manufacturers procedures and disinfectant label.			
Once area is wet, paper towels are used to soak up the area.			
Paper towels are placed in the biohazard bag.			
If gloves become soiled, they are removed and placed in the biohazard bag.			
After cleaning and disinfection has been completed, personnel wash hands with soap and water			
Seat where suspected traveller was sitting is cleaned and disinfected.			
Adjacent rows to the suspected traveller in the conveyance are cleaned and disinfected.			
Walls and windows of conveyance are cleaned and disinfected.			
In the case of aircrafts, tray tables, light and air controls and overhead compartments are cleaned and disinfected.			
Toilet facilities in conveyances are cleaned and disinfected.			



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After Action Event



- ☐ Follow-up with designated health facility.
- ☐ Ensure all reports are compiled and submitted to the Department.
- ☐ Brief relevant stakeholders.
- ☐ Conduct a review of the response to identify what worked well, what didn't and what needs to be strengthened.



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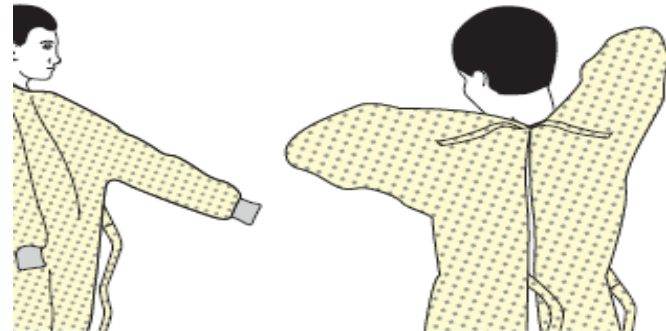
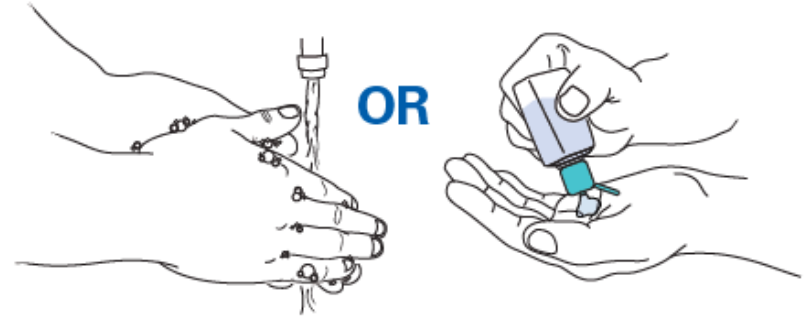
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Key Considerations



Protect yourself!

- Ensure appropriate PPE is worn at all times when interacting with the suspect case.
- Follow correct IPC measures.



Source: US CDC



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Key Considerations

Have the correct forms readily available

Risk assessment form

Passenger locator cards



PUBLIC HEALTH - PASSENGER LOCATOR CARD

Public Health Passenger Locator Card to be completed when public health authorities suspect the presence of a communicable disease. This information you provide will assist the public health authorities to manage the public health event by enabling them to trace passengers who may have been exposed to communicable diseases. The information is intended to be held by the public health authorities in accordance with appropriate law and to be used only for public health purposes.

Flight Information

1. Airline and Flight Number: Airline: _____ Flight Number: _____

2. Date of arrival: DD / MM / YYYY

3. Seat Number: _____

Personal Information

4. Name: _____ (Print Name)

5. Date of Birth: _____ (DD / MM / YYYY)

6. Gender: ☐ Male ☐ Female

7. Nationality: _____

8. Address: _____ (Print Address)

9. Contact Information: _____ (Print Contact Information)

10. Other Information: _____ (Print Other Information)

Section 1: Port Health notification

Person notifying Port Health: _____ Phone number of person notifying Port Health: _____

Agency notifying Port Health: _____ Date of notification to Port Health: _____ Time of notification to Port Health (24 hrs): _____

Type of notification: ☐ Illness ☐ Death

When was Port Health notified? ☐ Prior to boarding conveyance ☐ After disembarking conveyance

Type of traveller: ☐ Passenger ☐ Crew

When was Port Health notified? ☐ Prior to boarding conveyance ☐ After disembarking conveyance

Section 2: Pertinent medical history of ill or deceased person

Relevant history: present illness, other medical problems, vaccinations, overseas physician diagnosis, etc.: _____

Traveller has taken: ☐ Antibiotic/antiviral/antiparasitic(s) in the past week; list with date(s) started: _____

☐ Fever-reducing medications (e.g. acetaminophen, ibuprofen) in the past 12 hrs; list with time of last dose: _____

Relevant Exposures in the Past 3 Weeks:

Village/City/ State	Province/ Country	Arrival Date	Exposure to ill persons?	Exposure to animals?	Other (contaminated food or water, flea infestation, etc)?
			☐ No ☐ Yes	☐ No ☐ Yes	☐ No ☐ Yes

Signs, Symptoms, and Conditions (check all that apply):

☐ FEVER ($\geq 38^{\circ}\text{C}$) OR feeling feverish/having chills in past 72 hrs. Onset date: _____

☐ Persistent Vomiting Onset date: _____

☐ Obviously unwell Onset date: _____

☐ Current temperature: _____ $^{\circ}\text{C}$

☐ Number of times in past 24 hrs: _____

☐ Other Onset date: _____

☐ Persistent cough Onset date: _____

☐ Skin Rash Onset date: _____

☐ Description of skin rash: _____

☐ Unusual bleeding Onset date: _____

☐ For Deceased Persons Only: Date and time of death: _____

☐ Presumptive Cause of Death: _____

☐ Body released to medical examiner? ☐ Yes ☐ No

☐ Medical Examiner: _____

Section 3: General information about the ill or deceased person

Last paternal name: _____ First given name: _____ Middle name: _____

Gender: ☐ Male ☐ Female Date of birth: _____ Age (if date of birth unknown): _____ Country of birth: _____ Passport country/citizenship: _____

Country of residence: _____ Home address: _____ City/Province/Country: _____

Phone Number: _____ Emergency Contact Name: _____ Emergency Contact Phone: _____

Section 4: Flight information (Current Flight on Top Row, Previous/Upcoming Flights on Following Rows)

Domestic or International?	Airline	Flight #	Departure Airport Code	Departure Date	Arrival Airport Code	Arrival Date	Seat #	Flight Duration

Section 5: Disposition of ill/deceased person (Check all that apply)

☐ Released to continue travel ☐ Advised to seek medical care ☐ Recommended to not travel

☐ Transported to hospital ☐ Transported to non-hospital location ☐ Other: _____



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Death on board



- Port Health Official Inform EMS
- Inform stakeholders
- Interview crew and any accompanying passenger for more detailed information.
- Based on information if we suspect a potential EVD case, then we identify the contacts and document details passenger locator form.
- Restrict all physical access to the body until dedicated EMS boards and body is removed.
- After removal of the deceased, alert the conveyance operator on cleaning and disinfection.



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Designated Hospitals



Province	Hospitals
Eastern Cape	Frere Provincial Tertiary Hospital
	Nelson Mandela Academic Hospital
	Livingston Provincial Tertiary Hospital
Free State	Pelonomi Provincial Tertiary Hospital
	Universitas Academic Hospital
Gauteng	Charlotte Maxeke Academic Hospital
	Steve Biko Academic Hospital
	Helen Joseph Provincial Tertiary Hospital
KwaZulu Natal	Ngwelezane Provincial Tertiary Hospital
	Greys Provincial Tertiary Hospital
	Pixley Ka Seme Regional Hospital
	Manguzi District Hospital
Limpopo	Pietersburg Provincial Tertiary Hospital
	Mankweng Provincial Tertiary Hospital
	Messina District Hospital
Mpumalanga	Rob Ferreira Provincial Tertiary Hospital
	Witbank Provincial Tertiary Hospital
	Ermelo Regional Hospital
North West	Klerksdorp Tshepong Provincial Tertiary Hospital
NC	Robert Mangaliso Sobukwe Provincial Tertiary Hospital
WC	Tygerberg Central Hospital



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Way Forward



- PoE are required to enhance the implementation of a multi-layered screening approach
- Hold awareness sessions with PoE stakeholders and strengthen communication.
- Provide travellers with clear information on the signs and symptoms of Ebola Virus Disease.
- Ensure that Coordination, communication and notification procedures in place and actively implemented, including the immediate reporting of any public health event of concern to the IHR Focal Point.
- Ensure PHECP are maintained and regularly tested, including through simulation or desktop exercises where possible.
- Actively participate in Provincial and District outbreak response structures.
- Ensure adequate supplies of personal protective equipment for officials and adherence to IPC measures.
- Keep updated with situational reports and other developments related to the outbreak.



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REFERENCES



- National Department of Health. 2015. National Guidelines for Recognition & Management of Viral Haemorrhagic Fevers
- National Health Act 61 of 2003. Government Gazette. <https://www.gov.za/documents/national-health-actRegulation R363>
- Department of Health. (2013). Regulations relating to the management of human remains (Government Notice No. R363 of 22 May 2013). Government Gazette, 36473. <https://lawlibrary.org.za/akn/za/act/gn/2013/r363>



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Thank you.



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