 Ebola – what should Sea Ports be doing?

As you are well aware, there is currently an outbreak of Ebola Virus Disease occurring in West Africa. This is already the largest known outbreak of this disease. It was first reported in March 2014 in Guinea and since late May has involved principally three countries: Guinea, Liberia and Sierra Leone.

Ebola is a severe, often fatal viral infection, spread person to person by direct contact with blood and body fluids of infected people. It is not transmited through the air, nor is it spread through routine social contact (such as shaking hands) with asymptomatic individuals. Infection occurs because of direct contact with the bodily fluids (faeces, urine, saliva, semen etc.) of an infected person. Infection gains access via broken skin or mucous membranes of healthy individuals.

The incubation period of Ebola ranges from 2 to 21 days, with most symptoms appearing between 9 and 11 days following exposure, and so whilst unlikely to arrive in the UK by ship, it is not impossible that a person infected in Guinea, Liberia or Sierra Leone could arrive in the UK. An individual infected with Ebola is unlikely to arrive with symptoms that began prior to departure as exit screening is in place in the infected countries in West Africa. However, an infected person may arrive in the UK with symptoms that developed in transit, or they may arrive before developing any symptoms. To date, no cases of Ebola have arrived in the UK apart from one repatriated case who survived the disease, and **the current risk to the UK is LOW. Our job is to help keep it that way.**

As the Ebola situation is dynamic, these guidelines are likely to be modified as and when required.

**Port Health Authorities should:**

* In conjunction with port Harbour Masters, contact all persons coming into contact with shipping and raise awareness concerning Ebola. Pilots, agents and stevedores in particular should be reminded of reporting procedures for ill persons with potentially infectious disease.
* Require a ‘Maritime Declaration of Health’ from all vessels which have been in West Africa (including bunkering/supplies) during the 30 days before entering a UK port.

If illness is reported, additional information will be required relating to

* Ports of call in the 21 days prior to the onset of symptoms (if greater than 30 days);
* Any death on board and details of how bodies are stored;
* Number of persons ill and their symptoms;
* Date and time of onset of symptoms;
* Details of trained medical crew and medical facilities available on board;
* Medical assistance required;
* Details of ill crew member/passenger travel and contacts outside of current crew/passengers, in the 21 days prior to symptom onset;
* Any crew or passenger changes, including changes 21 days prior to the onset of symptoms;
* Crew changes arranged for the UK port;
* Animals on board and their health status within the last 21 days.
* Consider, in conjunction with the Port Medical Officer/Local Public Health Consultant, invoking the powers under the Public Health (Ships) Regulations 2007, with respect to the isolation or detention of the vessel or passengers:
* Apply the accompanying algorithm to ascertain the degree of risk;
* If Ebola is suspected, immediately contact the Port Medical Officer/Local Public Health Consultant who will take the lead and instigate the control plan, and notify Port Operations and Pilots.

If there is Ebola or suspected Ebola on a ship, Port Health Officers must immediately notify the Port Medical Officer/Local Public Health Consultant for advice on the course of action to be taken. Port Health Officers should not board the ship until contact has been made with the Port Medical Officer/Local Public Health Consultant.

**Port Requirements (Points of Entry)**

All Points of Entry must be ready to deal with an Ebola case on arrival. The following should be in place:

* Point of entry team (medical) to assist travellers and ensure correct isolation if required.
* Facilities for the safe isolation and risk assessment of suspected cases. This should consist of a dedicated room or area and should have dedicated toilet facilities.

Port Health Authorities should have representation on Local Resilience Forums and be involved in all multi-agency discussions.

**Ebola Assessment**

Algorithm to inform the initial assessment of passengers by Port Health/Medical staff.

**Does the person appear unwell? Symptoms to look out for include fever (e.g. pale skin, sweating or shivering) and weakness (e.g. unable to stand unsupported).**

If **no**, continue as normal

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If **yes,** ask these questions

**Has the person arrived from Guinea, Liberia or Sierra Leone or have they spent any time in these countries within the past 21 days?**

If **yes**, ask these questions

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**While in that country/countries, has this person:**

* **Come into contact with a person known/suspected to have Ebola?**
* **Cared for anyone with a severe illness, or who has died of an unknown cause?**
* **Attended any funerals or had any contact with any dead bodies?**
* **Visited any traditional healers or been admitted to hospital?**

If **no**, continue

as normal

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**Ensure minimum contact with person and their belongings.**

**Ask the person to wait in the designated room.**

**Contact the local Infection Prevention and Control Team at the PHE/PHA for advice**

**Tel: \*\*Provide local contact number\*\***

If **yes to any of these**

**questions**