PORT HEALTH SERVICES NIGERIA.

Presented at the Second International Civil Aviation Organization (ICAO)/Cooperative Arrangement for the Prevention of Spread of Communicable Disease through Air Travel (CAPSCA) Global Coordination Meeting

Dr. Enitan Ademuson
Head Port Health Services
Federal Ministry of Health Nigeria
October 2011
INTRODUCTION.

- Port Health Services in Nigeria started in 1925, in response to the plague pandemic.
- The Port Health Services is deployed through a division in the Public Health Department of the Federal Ministry of Health.
- The Division has the responsibility of implementing the WHO International Health Regulations, the International Maritime Organisation (IMO) laws on health matters, the International Civil Aviation Organisation (ICAO) laws, the Nigeria Quarantine Act (aircraft and ship), the Public Health Laws of Nigeria and any other relevant laws.
PHS LOCATIONS.

• Five (5) Designated International Airports: -
  – Murtala Mohammed International Airport Lagos.
  – Port Harcourt International Airport, Port Harcourt.
  – Margaret Ekpo International Airport, Calabar
  – Aminu Kano International Airport, - Kano
  – Nnamdi Azikiwe International Airport, Abuja – FCT.

• Five (5) Designated Seaports: -
  – Apapa Port – Lagos
  – Tin Can Island Port, Lagos (TCIP) - Lagos
  – Warri Port – Warri
  – Port Harcourt Port
  – Calabar Port – Calabar

• Land Borders are present in 22 of the 36 states of the federation.
FUNCTIONS OF PORT HEALTH SERVICES

• Disease surveillance
  – Immunization and Issuance of International Health Certificate (Yellow Card).
  – Health response to disasters such as plane crash, bomb explosions, terrorism etc.
  – Boarding and inspection of ships, aircrafts and road vehicles.

• Environmental Health activities e.g. sanitation, pollution control, waste disposal etc.
  – Disinfection, disinsection, deratting, decontamination of conveyances.

• Provision of curative and preventive health care services including referral and laboratory service

• Ad-hoc activities e.g. hajj operations, screening of refugees, deportees etc
Port Health Service Emergency Response Flow Chart
PHS EMERGENCY TEAM

- Doctors
- Nurses
- Environmental Health Officers
- Pharmacist
- Laboratory Scientists
- Ambulance Drivers.
DOCTOR ON DUTY

- Inform the Head of Station
- Mobilize personnel and resources
- Delegate roles to medical personnel
- Provide PPEs
- Take full history of infected passengers including places he/she has been in the past one month.
- Contact relevant agencies at the Por
- Transfer infected passenger to designated hospital.
HEAD OF STATION

• Issuance of Port Health Alert to all relevant agencies: WHO, ICAO, FAAN, State, and other relevant agencies.
• Establish communication link with other hospitals to which infected passenger will be transported.
• Ensure screening of all passengers at arrival and departure by relevant staff.
• Report cases using IDSR 001 to Epidemiology Division of Federal Ministry of Health.
• Establish a public health information hotline to address request for information from the public.
NURSES

- Check Vital Signs to determine the number of passengers affected.
- Ensure triaging (sorting), of affected passengers.
- Separate passengers who were very close to the infected passenger.
- Assist in the collection of samples.
- Collect the contact address of other passengers on the same aircraft who are suspects.
- Vaccinate all passengers, if the disease is vaccine preventable.
- Issuance of International Health Certificate.
HEAD NURSE IN STATION

• Health educates uninfected passengers on signs and symptoms of disease.
• Advise uninfected passengers to report to the nearest hospital as soon as they notice any signs and symptoms.
• Reassure uninfected passengers.
• Assist in filling IDSR forms.
PHARMACIST

- Ensure adequate stock of emergency drugs.
- Ensure adequate supply of PPEs.
- Adequate supply of vaccines where applicable.
ENVIRONMENTAL HEALTH OFFICERS

• Disinfect all surfaces in the aircraft.
• Ensure that all waste from the aircraft is safely disposed.
• Disinfect all luggage and postal parcels.
• Disinfect the ambulance or any other vehicle in which infected case was transported.
• Ensure proper conveyance/transport of fatal cases.
AMBULANCE DRIVERS

- Transport patient to designated hospital or quarantine centre.
- Transport collected samples to designated laboratory.
- Ensure that ambulance is disinfected after transporting infected passenger to hospital.
CHALLENGES

• Absence of Port Health officers at the screening posts and baggage checking at the airports.
• Inadequate Premises and Facilities for the delivery of Port Health Services at the Airports.
• Non availability of adequate Quarantine facilities
• Weak collaboration between PHS and other stakeholders in the implementation of the IHR 2005.
WAY FORWARD

• Improve collaboration between PHS and other stakeholders at the Airports.
• Provision of adequate premises for the PHS to operate at Airports.
• Restoration of Checking Counters for PHS at Airports.
• Capacity Development especially in the area of Emergency Response/Provision of Emergency Response facilities for PHS staff.
• Need for Quarantine Stations
WAY FORWARD CONT'D

• Emphasise the importance of compliance with the requirement of the revised IHR.
  – Intensify awareness of Public Health Emergencies of International Concern (PHEIC).

• Inadequate Premises and Facilities for the delivery of Port Health Services at the Airports.

• Improve feed back communication channel with airline operating agencies.

• Develop and sign a Memorandum of Understanding (MOU) with collaborating agencies.
Thank You