Screening at Points of Entry: Pros & Cons
Public Health Event: Affected area

CONTAINMENT

Keep everything and everybody in

2

Keep everything and everybody in

Keep everything and everybody in

Keep everything and everybody in
International Health Regulations (2005)

A global legal framework for public health security

*IHR (2005) came into force on 15 June 2007*

Legally binding for the world’s countries that have agreed to follow the same rules to secure international health.

Courtesy WHO
Purpose of the IHR (2005)

“To prevent, protect against, control and provide a public health response to the international spread of disease in ways that are commensurate with and restricted to public health risks, and which avoid unnecessary interference with international traffic and trade” – Article 2

Courtesy WHO
Article 14, International Convention on Civil Aviation

Basis for Action - health
Basis for Action - health

Article 14, International Convention on Civil Aviation:

‘Each contracting State agrees to take effective measures to prevent the spread by means of air navigation of cholera, typhus (epidemic), smallpox, yellow fever, plague, and such other communicable diseases as the contracting States shall from time to time decide to designate….'
Basis for Action - health

Article 14, International Convention on Civil Aviation:

….and to that end contracting States will keep in close consultation with the agencies concerned with international regulations relating to sanitary measures applicable to aircraft.’
19 ICAO Annexes contain ‘SARPs’ (Standards and Recommended Practices)

- Annex 1 Personnel Licensing
- Annex 2 Rules of the Air
- Annex 3 Meteorological Service for International Air Navigation
- Annex 4 Aeronautical Charts
- Annex 5 Units of Measurement to be Used in Air and Ground Operations
- **Annex 6 Operation of Aircraft** *
- Annex 7 Aircraft Nationality and Registration Marks
- Annex 8 Airworthiness of Aircraft
- **Annex 9 Facilitation** *
- Annex 10 Aeronautical Telecommunications
- **Annex 11 Air Traffic Services**
  - Procedures for Air Navigation Services – Air Traffic Management (PANS-ATM) *
- Annex 12 Search and Rescue
- Annex 13 Aircraft Accident and Incident Investigation
- **Annex 14 Aerodromes** *
- Annex 15 Aeronautical Information Services
- Annex 16 Environmental Protection
- Annex 17 Security: Safeguarding International Civil Aviation Against Acts of Unlawful Interference
- **Annex 18 The Safe Transport of Dangerous Goods by Air**
- **Annex 19 Safety Management System**
Guidance Material

Distilled into.....

State Guidelines : ICAO

Airline Guidelines : IATA

Airport Guidelines : ACI
New SARPs in force
From Nov 2007 & 2009...

Annex 6
Annex 9
Annex 11
Annex 14
PANS – ATM
Annex 18

Audit questions
IHR implementation
Changes to SARPs 2009

• Annex 6 – Operation of Aircraft
  ➢ On board medical supplies
  ➢ Inclusion of a universal precaution kit
    ✓ Managing on board communicable disease event
Changes to SARPs 2007

- Annex 9 - Facilitation
  - States must have a pandemic preparedness plan for aviation
Changes to SARPs 2009

- Annex 11 – Air Traffic Services and PANS-ATM
  - Detailed procedure for utilising ATC for notifying destination of on board public health event
  - Public health emergencies included in contingency planning
Changes to SARPs 2009

• Annex 14 – Aerodromes
  ➢ Public health emergencies included in aerodrome emergency plan
Departing Passengers

(a) **Point of ticket enquiry / trip planning**

- Web based
- Phone booking
- Travel agents
- Airline

? Responsibility

**Advisory Message Not To Travel if ill**
*Educate and Prepare the public:

“Do Not Travel If You Have A Communicable Disease”

*Prime the Travel Industry

Sample Message:

Passengers are advised not to travel if they are ill or suspect that they may have a communicable disease. You may not be allowed to board the flight if it is suspected that you have a communicable disease. If in doubt contact your doctor for advise.
Should I take the flight?

BIRD FLU...

ME??
I FEEL GREAT!
HONESTLY!
JUST FINE.
NOT EVEN A HINT OF A SNIFFLE...
NEVER BEEN BETTER...
Sample Message: Screening for MERS CoV is in place at XXX airport. Passengers with symptoms of flu will not be allowed to enter the airport and will not be checked in or allowed to board any flight. If in doubt please contact your doctor before proceeding with your travel plans.

**If you have been in ............(name of place with outbreak) in the last (?week) please seek your doctor’s advise before making any travel plans.
(b) Travel plans made / Ticket Purchased

• Arrival at airport:

  i) Before entry to airport:

  ii) Appropriate Advisory Signs/Display boards/Messages

? Feasible?

? Responsibility?

• Screening prior to entry to airport (if outbreak has occurred in State) -- ? Questionnaire for symptoms and if coming from outbreak area.

Positive

No Entry. Refer to secondary screening

Negative

Proceed to Check-in

PPE for staff & suspect passengers
ii) At Check-in:

• Appropriate Advisory Signs/Display boards/ Voice Messages over airport Public Address system

If Screening has not been done:

• ? Screening prior to entry to airside (if outbreak has occurred in State)

? Questionnaire:

• for symptoms and

• if coming from outbreak area.

Appropriate PPE for Check-in staff and suspect passengers
In Flight Screening?

Role of cabin crew

Procedure for handling an ill passenger

Role of the Pilot in Command
Screening at Arrival
How and where do you do the screening
- In the aircraft
- After disembarkation

Who does the screening

What do you screen for
- Contact tracing

What to do with the contacts
If you pick up a “positive” during screening – what next?

Secondary screening – where?

Hospital?

Isolation

Quarantine?
What is the role of temperature screening in relation to the clinical features of disease?

Incubation period of X days

Infectious XX days before onset of symptoms

Situation may change as more epidemiological data is accumulated.

Key Role For **WHO** & **CDC** ------ to screen or not to screen
Arriving Aircraft With Suspect Case/s On Board

- Measures for suspect case/s
- Measures for other passengers
- Measures for Crew
- Disinfection of aircraft
- Baggage
- Ramp workers
- Others

- Segregation from suspect case
- Advisory information
- Possible Quarantine

National Health Authority

- Secondary Screening
- Designated Ambulance/s
- Designated Hospital/s
Airport Workers & Airline Workers

- Protection of airport workers
- Preventive strategies for airport workers
  - What happens when airport worker/s fall ill with prevailing PHE
  - Contingency plans

- Education & Basic Hygiene Measures
- “Front Line” staff -- for priority in vaccination programs
- Screening measures prior to reporting for work
？To Screen

？Or Not To Screen
Options for Interventions at International Points of Entry

Reference:

Suggested framework for assessment and decision making – Responding to Pandemic H1N1 2009: Options for interventions at International Points of Entry: WHO Regional Office for the Western Pacific interim option paper, 20 May 2009
Public Health Measures Available (Theoretically) - at an international border -

1. Travel and screening (prevention, detection)
   - Health advice and alerts to travellers
   - Health declaration form
   - Temperature screening
   - On-board identification of suspected travellers
   - International travel advisory, restriction, border closure?

2. Management of symptomatic & exposed travellers
   - Symptomatic travellers (isolation & treatment...)
   - Exposed travellers (quarantine?...)

[Image]
• Public health measures in response to pandemic influenza
• Options for public health intervention at international points of entry (POE)
Options: Key considerations

- International border health measures should be implemented under the framework of the new International Health Regulations
- Decision on public health measures based on assessed risks
- Public health measures should be evidence-based whenever possible
- Countries should balance the benefits against the costs and potential consequences
- Desirability of harmonization of interventions at international POE
- Planning, coordination and communication is essential
## Comparative risk of outbreaks

<table>
<thead>
<tr>
<th>Severity of Disease (Morbidity &amp; Mortality)</th>
<th>Transmissibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>High</td>
<td>Low → High</td>
</tr>
<tr>
<td>High</td>
<td>H5N1</td>
</tr>
<tr>
<td>High</td>
<td>SARS</td>
</tr>
<tr>
<td>Low</td>
<td>1918 Pandemic</td>
</tr>
<tr>
<td>Low</td>
<td>Pandemic (H1N1) 2009</td>
</tr>
<tr>
<td>Low</td>
<td>Seasonal Flu</td>
</tr>
</tbody>
</table>
### Possible strategies based on risk category

<table>
<thead>
<tr>
<th>Transmissibility</th>
<th>Low</th>
<th>High</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Severity of Disease (Morbidity &amp; Mortality)</strong></td>
<td>Aiming at preventing disease importation and containing the virus</td>
<td>Aiming at reducing transmission and mitigating impact with focus on vulnerable population</td>
</tr>
<tr>
<td>Low</td>
<td>Routine public health measures without additional aggressive interventions</td>
<td></td>
</tr>
</tbody>
</table>
Matching cost and consequences of interventions with risk level (example)
The presentation concerning traveller screening on “Biodiaspora” suggested that:

- **Exit screening** at airports with greatest traffic levels is most effective, least disruptive but places further burden on the source country.

- **Entry screening in cities receiving direct flights** from a source area is a second but less desirable option.

- **Entry screening in cities not receiving direct flights** from a source area are highly inefficient and can be disruptive.
SOME IMPORTANT ATTRIBUTES OF SCREENING TOOLS

- Sensitivity
- Specificity
- Cost effectiveness
What is the single most important measure to prevent transmission of infectious disease??

Hand hygiene
Thank you for your kind attention!