



IHR implementation at Points of Entry & «designation» under the IHR



**World Health
Organization**

REGIONAL OFFICE FOR
Europe



**Organisation
mondiale de la Santé**

BUREAU RÉGIONAL DE L'
Europe



Weltgesundheitsorganisation

REGIONALBÜRO FÜR
Europa



**Всемирная организация
здравоохранения**

Европейское региональное бюро

*Vasily Esenamanov
Technical Officer
IHR, Monitoring and Evaluation
WHO Regional Office for Europe*

International Health Regulations (IHR)



Purpose (Art. 2)

“to prevent, protect against, control and respond to an international spread of disease, while avoiding unnecessary interference with international traffic and trade”

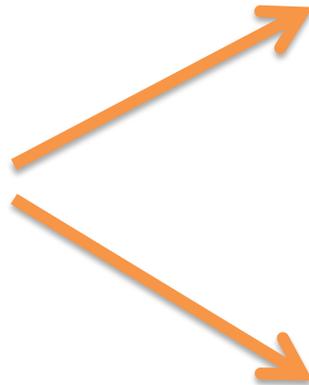
Why Implement IHR at PoE?

- To protect health of:
 - Travellers (crew & passengers)
 - Population (preventing disease spread)
- Contain risks at source with the capacity to detect, respond, and implement initial public health measures
- Maintain conveyances in a sanitary condition, prevent infection and contamination
- Prevent unnecessary restrictions on travel and trade

Designated PoE and authorized ports



**Article 20
(IHR 2005)**



designated



**designated +
authorized (to issue
Ship Sanitation
Certificates)**



General obligations with regard to PoE

- Develop **functional capacities** described in Annex 1B of the IHR (2005)
- Identify “**competent authorities**” in each designated PoE
- Provide based on the WHO request, be able to provide necessary **public health information**
- **Inform WHO about changes** within specific PoE
- Maintain **functional linkages with the National IHR Focal Point (NFP)**

PoE Core Capacities, **ROUTINE**

- Access to Medical Service & Adequate Staff
- Transport of Ill Travelers to Appropriate Facilities
- Inspection of Conveyances
- Control of Vectors & Reservoirs within >400 meters
- Safe Environment
 - Potable water, dining facilities, public washrooms, etc.

PoE Core Capacities, **EMERGENCY**

- Emergency Contingency Plan in place
 - Coordinator & Contact Points
 - National and PoE Specific plans
- Assessment & Care of Ill Travelers or Animals
 - Separate space for Interview & Quarantine
- Application of PH Control Measures
- Entry & Exit Screening
- Provision of transport & specialized equipment for affected travellers

Authorized ports (Art. 20 IHR)

- Authorized to issue internationally recognized **Ship Sanitation Control Exemption Certificates/Ship Sanitation Control Certificates** (Art. 39 and Annex 3)
- + possible extension for both
- Specific capacities for inspecting/
controlling potential public health risks
on ships
- List of ports and all modifications must be send to WHO
(published on WHO website)

Annex 3 A58/55 **SHIP SANITATION CONTROL EXEMPTION CERTIFICATE/SHIP SANITATION CONTROL CERTIFICATE**
This Certificate records the inspection and 1) exemption from control or 2) control measures applied.

Port of	Date	Name of ship or vessel registration vessel	Flag	Registration/IMO No.		
At the time of inspection the holds were <input type="checkbox"/> unladen <input type="checkbox"/> laden with		tonnes of cargo	Name and address of inspecting officer			
SHIP SANITATION CONTROL EXEMPTION CERTIFICATE				SHIP SANITATION CONTROL CERTIFICATE		
Areas, systems, and services inspected	Evidence found ¹	Sample results ²	Documents reviewed ³	Control measures applied	Re-inspection date	Comments regarding conditions found
Cabin						
Stores						
Hold/cargo						
Quarters:						
Crew						
Officers						
Passengers						
Deck						
Drinking water						
Sewage						
Ballast tanks						
Solid and medical waste						
Sludge water						
Engine room						
Medical facilities						
Other areas specified						
Use affected						
<input type="checkbox"/> No evidence of public health ⁴ risk found. Ship/vessel is exempted from control measures. Name and designation of issuing officer				<input type="checkbox"/> Control measures indicated were applied on the date below. Signature and seal		Date

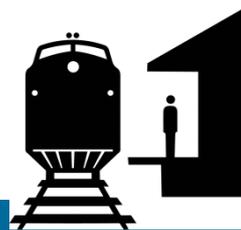
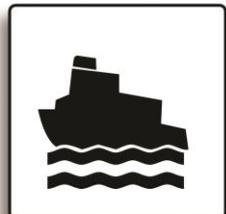
(a) Evidence of infection or contamination, including vectors in all stages of growth, animal reservoirs for vectors, rodents or other species that could carry human disease, microbiological, chemical and other risks to human health signs of unsuitably sanitary measures. (b) Information concerning any human cases (to be included in the Maritime Declaration of Health).
None areas not applicable, by marking N/A.
¹ Results from samples taken on board. Analysis to be provided to ship's master by most expedient means and, if re-inspection is required, to the next appropriate port of call contacting with the re-inspection date specified in this certificate.
² For example medicine or other medical log, ship's log, pest control program, other document.
³ Under the IHR, "public health risk" is the likelihood of an event that may affect adversely the health of human populations, with emphasis on one which may spread internationally or may present a serious and direct danger.
Sanitation Control Exemption Certificates and Sanitation Control Certificates are valid for a maximum of six months, but the validity period may be extended by one month if inspection cannot be carried out at the port and there is no evidence of infection or contamination.

Competent authorities (art. 22)

- Responsible for control and maintenance of luggage, cargo, containers, conveyances, goods, parcels, etc. and to ensure that they are not contaminated/infected
- Perform control on deratting/desinfection and decontamination of the abovementioned
- Removal and safe utilization of the contaminated matter from conveyances
- Provide for duly sanitary and technical conditions, infection control measures and contamination prevention at sites involved in passengers movement
 - Incl. Maritime Declaration (Art. 37 and Annex 8)

How Many PoE should a State Party Designate?

- PoE designation is part of the core requirements for State Parties
- The IHR do not specify a particular number of designated PoE (should be based on individual risk assessment):
 - Minimum one airport & one seaport (depending on the country context)
 - Additional PoE for larger countries and those with high levels of international traffic



Point of Entry Designation



- Considering Factors:
 - ✓ Volume and Frequency of Traffic (travellers/cargo)
 - ✓ Population Density & Epidemiological Situation of PoE
 - ✓ Public Health Risks (from place of origin/route)
 - ✓ Existing PoE Facilities & Capacities to manage PH risk
 - ✓ Potential Joint Designation with Neighboring Country
 - ✓ Public Health Risks associated with the entirety of the conveyance route
- **Quality & Necessity** over Quantity

Ground Crossings

- State Parties with Common Borders:
 - Consider Bilateral/Multilateral agreements concerning international control measures and disease transmission prevention
 - Joint designation of adjacent ground crossings, cross-border collaboration

PoE & national health surveillance

- Airports, Ports, & Ground Crossing initiatives should be integrated into national surveillance, prevention and response activities.
 - inform competent authorities at PoE & assist in adopting preventive measures, investigation, management and follow up of events
 - alert other PoEs which are likely to face the same event
 - provide data to competent authorities for risk assessment of events

Current challenges on IHR implementation at PoE (1)

- Insufficient connection between PoE and NFP (different sectors/different lines of authority)
- Not all States-Parties have designated PoE and defined a competent authority
- There is a need to strengthen coordination between public health surveillance and PoE
- Insufficient intersectoral collaboration and coordination of actions during development and maintenance of routine and emergency capacities at PoE (e.g. public health, transport, customs, immigration, environment, etc.)
- Coordination of activities of WHO and other organizations could be further improved

Current challenges on IHR implementation at PoE (2)

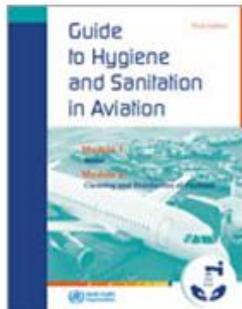
- Insufficient practice of coordinated and regular testing of response plans and joint trainings at PoE
- Public health emergency response plan is not always available in all the designated PoEs
- Insufficient capacity to operationalize international public health recommendations in designated points of entry
- Relevant national legislation and regulation require revision and harmonization between that of different sectors
- Exhaustive list of ports authorized to issue Maritime Declarations is needed

WHO support to strengthen IHR capacity at PoE

- Provide technical support and advice on capacity building, including guidelines and procedures
- Assessment of existing capacities / expert visits
- **Verification and certification of existing capacities at airports and ports upon request**
- Multisectoral simulation exercises and response testing
- Learning programmes and tools
- Fostering international collaboration in a multisectoral approach, regional and global networks
- Harmonized and coordinated global practices

Published WHO Guidance and Tools related to PoE

Air travel

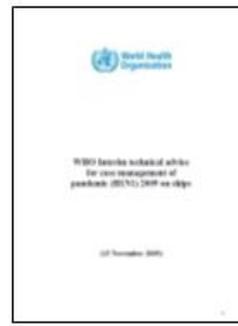
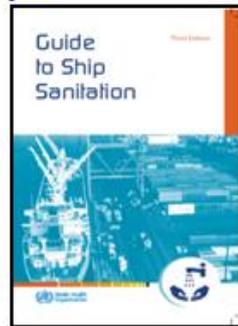
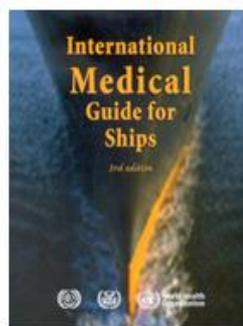
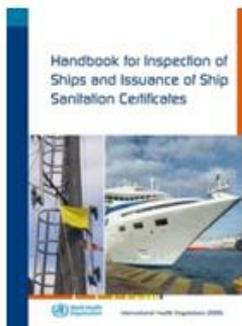


Public health emergency Preparedness & Response



http://www.who.int/ihr/publications/ports_airports/en/

Ports and Ships



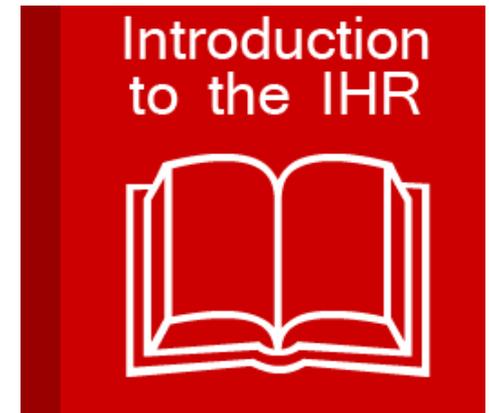
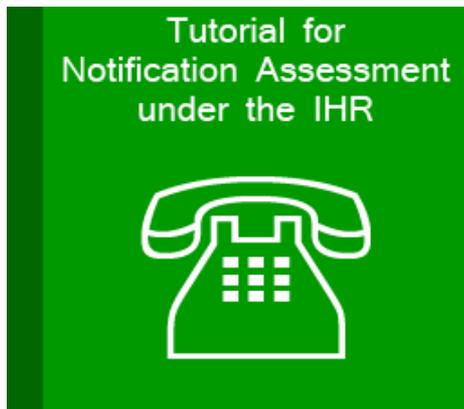
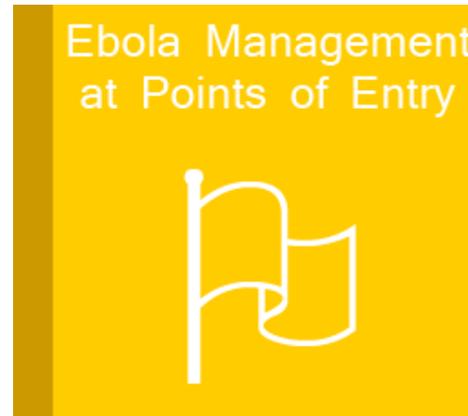
PoE core capacity Assessment and surveillance



WHO Learning Program for Ship Inspection and Issuance of SSC under IHR 2005 and EVD Management at PoE

WHO online training modules on IHR

<https://extranet.who.int/ihr/training>



THANK YOU!

www.euro.who.int/ihr

