EU SHIPSAN ACT Joint Action

“The impact on maritime transport of health threats due to biological, chemical and radiological agents, including communicable diseases”

Table top exercise

Friday 4th March 2016
Larissa, Greece

Exercise agenda and instructions
1. Location

Laboratory of Hygiene and Epidemiology, University of Thessaly, 22 Papakyriazi str, 41222, Larissa, Greece

2. Background

Recent public health events related to maritime transport and the new legal framework in the EU including Directive 2010/65/EU and Decision 1082/2013, have created a new setting in the way that information is exchanged between the different actors when responding and following up public health events. This table top exercise was decided to be organised after the ad hoc meeting of the joint action CHAFEA officer, the joint action coordinator and the director of the head of unit for surveillance and response support of ECDC, which took place on 11th of November 2015 in Stockholm, in order to clarify the communication routes and to explore the added value of a European database for storing the Maritime Declaration of Health (MDH) submitted in the National Single Window (NSW) (Directive 2010/65/EU).

3. Type of exercise

This is a discussion-based tabletop exercise. Five scenarios of public health events that occurred on cruise ships or cargo ships will be discussed by participants.

4. Aim and objectives

The aim of the table top exercise is to explore the added value of a European database for storing the MDH submitted in the NSW (Directive 2010/65/EU). Each scenario has specific objectives, which can be summarized as follows:

- To map the communication routes when different types of events are reported and followed up by using various communication means, documents and systems at local, national and European levels.
- To clarify the communication routes of the Maritime Declaration of Health (MDH) within each EU MS and how this links with the EU information system (EWRS/EPIS) taken into account the Decision 1082/2013.
- To review the content of health documents including the MDH and the Ship Sanitation Certificate (SSC) in order to ascertain what epidemiological information can be useful to the competent authorities for risk assessment.
- To identify how the epidemiological information from various sources is communicated when responding and following up events.

5. Scenarios summary

Five scenarios have been developed to help participants to achieve the goal of the exercise. The summary of each scenario is given below:
Scenario 1
Fever and rash among travellers on a ship. Information submitted in the MDH by the Captain. Ports of call receive information from the NSW. Clinical specimens collected by two different port health authorities of two countries. Ship itinerary includes EU countries.

Scenario 2
Case of Legionnaires’ disease in a traveller who has disembarked and travelled back to the home country. Information sent by USCDC to ECDC. More than one ports in two different countries involved in the response measures. Ship itinerary includes EU countries.

Scenario 3
Outbreak of gastroenteritis on a cruise ship. MDH submitted through the NSW. Ship itinerary includes EU countries.

Scenario 4
Insect infestation in a cargo ship. MDH submitted by the Captain through the NSW. Fever and myalgia among crew members. Ship itinerary includes EU and non-EU countries.

Scenario 5
A possible case of Ebola virus disease of a passenger who works at a research centre and travels on board a cruise ship entering the EU.

6. Participants and function

Controller
Responsible for exercise project management, including delegation of responsibilities. Instructs the players and is a passive participant in the conduct of the exercise, responsible for injects during the exercise and ensuring that the exercise runs smoothly.

Facilitator
Responsible for keeping participant discussions on track and in line with the exercise objectives. This includes making sure all issues and objectives are explored as thoroughly as possible within the available time.

Evaluator
Develops evaluation criteria, logs exercise activity, evaluates exercise activity, analyses results, writes exercise report.

Players
Participate as players in the exercise. Players will be given the following roles:

- Public health authority at port
- Ministry of Health (MoH) – Coordination of port health authorities
- National Surveillance centre
- National Single Window
- IHR NFP
- EWRS NFP
- ELDSNet NFP
- ECDC EWRS Coordination and EPIS
Function of participants

<table>
<thead>
<tr>
<th>Participant</th>
<th>Function</th>
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<tbody>
<tr>
<td>Christos Hadjichristodoulou, EU SHIPSAN ACT Joint Action Coordinator, Greece</td>
<td>Facilitator/controller</td>
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<tr>
<td>Barbara Mouchtouri, EU SHIPSAN ACT Joint Action Manager, Greece</td>
<td>Controller</td>
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<tr>
<td>Cinthia Menel Lemos, Project Officer, CHAFEA (via videoconference)</td>
<td>Observer</td>
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<tr>
<td>Maria Cristina Rota, Istituto Superiore di Sanità, Centro Nazionale di Sanità, Sorveglianza e Promozione della Salute, Rome, Italy</td>
<td>Player: national/central level authorities &amp; ELDSNet coordination at ECDC</td>
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<tr>
<td>Dirk Van Reusel, Head of Saniport-Sea port section, Antwerp Port Health Authority, Belgium</td>
<td>Player: local (port level) authorities</td>
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<td>Christina Kapoula, Public Health Inspector, Department of Environmental Hygiene and Sanitary Control, Directorate of Public Health and Social Welfare, Metropolitan Region of Thessaloniki, Region of Central Macedonia, Greece</td>
<td>Player: local (port level) authorities</td>
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<td>Androula Pavli, Doctor, Travel Medicine Office, Hellenic Center for Disease Control and Prevention, Athens, Greece</td>
<td>Player: national/central level authorities</td>
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<tr>
<td>Miguel Davila Cornejo, Head of International Alerts Unit, Ministry of Health, Social Services and Equality, General Directorate for Public Health, Quality and Innovation, Spain</td>
<td>Player: local (port level) authorities &amp; national/central level authorities</td>
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<td>Emmanuel Robesyn, Expert Outbreak Response, ELDSNet, ECDC, Stockholm, Sweden</td>
<td>Observer/ Evaluator</td>
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<tr>
<td>Denis Coulombier, Head of Unit for Surveillance and Response Support, ECDC, Stockholm, Sweden</td>
<td>Observer (&amp; player – EWRS coordination)</td>
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7. Questions that players will be asked to answer

Participants will be given the scenarios in hard copies. Each scenario describes one event day by day. Players after going through the event description of the day will be asked to discuss/respond to the following points:

- What information will be communicated?
- To whom will the information be sent?
- When will the information be communicated?
- What means of communication will be used?
- How much time is it estimated to take for the information to be received by the authority that is responsible for taking action?
- Where is the location of the ship when the information receiver needs to take action?
- If the information will not be shared with others, what will be the public health consequences due to the fact that information was not shared?
- How would the event evolve if an MDH European database existed?

Both unstructured reactions to scenarios and structured discussions have been included in the exercise. Participants will focus on the information sharing and communication routes aspects of the response. The purpose of this exercise is not to discuss the response measures. Participants will be asked to draw their response on a map, indicating the communication route.

At the end of each scenario, the group will discuss with the aim to answer the following points:
• What are the sources of information?
• Who are the players who receive or send or share information?
• What are the communication routes?
• What means of communication are used?
• Does the information reach timely the authorities responsible for implementing/supervising the control measures?
• Who coordinates the response measures?
• Who ensures that the event is followed up?
• Who will decide that an event is closed?
• Who will inform the Captain about the outcome of the disembarked cases and laboratory examination results and how?
• Are there any gaps/shortages that need to be resolved?
• In what aspects a European database for recording the MDH could provide solutions?

8. Evaluation

Participants will be asked to complete an evaluation questionnaire at the end of the exercise. In the questionnaire, they will be asked to indicate what was learned and to evaluate aspects of the exercise structure and conduct.

9. Time schedule

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<thead>
<tr>
<th>Time</th>
<th>Topic</th>
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<tbody>
<tr>
<td>9:00 - 9:15</td>
<td>Introduction <em>(table top exercise purpose, design, objectives ground rules, roles)</em></td>
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<tr>
<td>9:15 - 10:15</td>
<td>Scenario 1</td>
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<td>10:15 - 10:30</td>
<td>Coffee break</td>
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<td>10:30 - 11:30</td>
<td>Scenario 2</td>
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<td>11:30 - 12:30</td>
<td>Scenario 3</td>
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<tr>
<td>12:30 - 13:00</td>
<td>Scenario 4</td>
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<td>13:00 - 14:30</td>
<td>Lunch break</td>
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<td>14:30 - 15:30</td>
<td>Scenario 5</td>
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<td>15:30 - 16:30</td>
<td>Discussion</td>
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<td>16:30 – 16:45</td>
<td>Evaluation</td>
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