

East Lothian Council harbour protocol: Notice to Mariners

There are no authorised ports within East Lothian and therefore you are not permitted to disembark.

Authorised Forth ports for crew or passenger disembarkment

You must only disembark at one of the authorised Forth Ports. There are several authorised ports within neighbouring Local Authorities and contact details are listed in Appendix one.

For your additional information

Maritime Declaration of Health

A Maritime Declaration of Health (MDH) is required for all vessels on arrival from a foreign port. A template declaration is provided in Appendix 2.

Notifiable disease

Where there is an outbreak of notifiable infectious disease (see Appendix 3) within the UK you will be required to provide a maritime declaration of health irrespective of whether the vessel is arriving from a foreign port or another UK port. This will apply to all vessels including:

- Cruise Vessels
 - all cruise vessels
- Container and Cargo Vessels
 - where anyone on board the vessel has travelled from outwith UK or if they have been in close contact with confirmed case of COVID-19 infection within the 14 days prior to the vessel arriving in a Scottish Port.
- All other vessels
 - oil industry (such as rigs and associated supply chain)
 - Marine scientific survey operations (including offshore surveys)
 - Pleasure vessels

The information required is the same as that required in the current MDH and should therefore allow Port Authority to establish

- Any persons unwell during the voyage and/ or on arrival, and any sanitary measures taken in response to that illness
- origin of the ship, when it left the origin port, and all ports where the vessel has docked during the 14 days prior to arrival.
- Any crew changes involving people from outwith UK

Action when suspected cases are onboard

The Master of the ship should consider the following as grounds for suspecting the existence of a disease of an infectious nature:

- (a) fever, persisting for several days or accompanied by (i) prostration; (ii) decreased consciousness; (iii) glandular swelling; (iv) jaundice; (v) cough or shortness of breath; (vi) unusual bleeding; or (vii) paralysis.
- (b) With or without fever; (i) any acute skin rash or eruption; (ii) severe vomiting (other than sea sickness); (iii) severe diarrhoea; or (iv) recurrent convulsions.

Where a port operator or ship's agent receives notice that there are ill persons on a vessel:

If the suspected case is a medical emergency, you **must** call 999 for medical assistance and you **must** inform attending services that the case has originated from outwith UK or has had contact with a confirmed case. DO NOT disembark the patient or arrange alternative transport to a hospital until advised to do so. Also ask the Harbour Master to inform the NHS Public Health (local Health Protection Team) and the Port Health Authority (the local authorities).

If the suspected case is not seriously ill you must notify the relevant NHS Health Protection Team on (See Appendix 1). Contact details for the case must be provided with sufficient information to allow the Health Protection Team to determine follow up action. This will include symptoms, duration, contacts and travel history. DO NOT disembark the suspected case.

Further information can be found on the [Health Protection Scotland](#) and [World Health Organization](#) websites.

The contact details for Health Protection Teams and for submitting your Maritime Declaration of Health are in the Appendix.

Note to NHS Public Health receiving contact from a vessel

Should NHS Public Health consider there to be a medical emergency requiring urgent disembarkment at an East Lothian harbour, you must immediately advise East Lothian Council Environmental Health (Switchboard 01620 827 827) and East Lothian Harbour Management (Neil Clark 07880784405 and/or Eamon John 07990804664)

Further Information:

Health Protection Scotland

<https://www.hps.scot.nhs.uk/web-resources-container/covid-19-risk-areas/>

World Health Organization

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019>

Appendix 1:

Contact details for sending Maritime Declaration of Health and for NHS Public Health

Seaports	Port Health Authority Contact Details	NHS Public Health (local Health Protection Team) Contact Details
Grangemouth	Falkirk Council 01324 504982 (office hours) porthealth@falkirk.gov.uk	NHS Forth Valley 01786 457283 (office hours ask for CPHM on Call) 01324 566000 (emergency out of hours – ask for CPHM on call)
Rosyth Crombie (Royal Navy) Braefoot Bay Inverkeithing Burntisland Kirkcaldy Methil	Fife Council, 01592 583228 (office hours) food.advice@fife.gov.uk	NHS Fife 01592 226435 (office hours) 01592 643355 (emergency out of hours – ask for CPHM on call)
Dundee	Dundee City Council Port Health 01382 432424 port.health@dundeecity.gov.uk	NHS Tayside 01382 596 976/987 (office hours ask for CPHM on Call)01382 660 111 Ninewells switchboard (emergency out of hours – ask for CPHM on call)
Leith Granton Newhaven Hound Point South Queensferry	City of Edinburgh Council 0131 469 5751/5794/5934 (office hours) 0131 200 2000 (outwith office hours) environmentalhealth@edinburgh.gov.uk	NHS Lothian 0131 465 5420/5422 (office hours) 0131 242 1000 Edinburgh Royal Infirmary switchboard (emergency out of hours – ask for CPHM on call)

Appendix 2: Maritime declaration of health template

MARITIME DECLARATION OF HEALTH			
To be completed and submitted to the competent authorities by the masters of ships arriving from foreign ports.			
Submitted at the port of	Date		
Name of ship/inland navigation vessel	Registration/IMO No		
Arriving from	Sailing to		
(Nationality)(Flag of vessel)	Master's Name		
Gross tonnage (ship)			
Tonnage (inland navigation vessel)			
Valid Sanitation Control Exemption/Control Certificate carried on board?			
Issued at	Date		
Re-inspection required?			
Has ship/vessel visited an affected area identified by the World Health Organisation? Port and date of visit			
List ports of call from commencement of voyage with dates of departure, or within past thirty days, whichever is shorter:			
Upon request of the competent authority at the port of arrival, list crew members, passengers or other persons who have joined ship/vessel since international voyage began or within past thirty days, whichever is shorter, including all ports/countries visited in this period (add additional names to the attached schedule):			
(1) Name	joined from: (1)	(2)	(3)
(2) Name	joined from: (1)	(2)	(3)
(3) Name	joined from: (1)	(2)	(3)
Number of crew members on board			
Number of passengers on board			
Health Questions			
(1) Has any person died on board during the voyage otherwise than as a result of accident? If yes, state particulars on attached schedule. Total no. of deaths			
(2) Is there on board or has there been during the international voyage any case of disease which you suspect to be of an infectious nature? NO If yes, state particulars in attached schedule.			
(3) Has the total number of ill passengers during the voyage been greater than normal/expected? How many ill persons?			
(4) Is there any ill person on board now? If yes, state particulars in attached schedule.			
(5) Was a medical practitioner consulted? If yes, state particulars of medical treatment or advice provided in attached schedule.			
(6) Are you aware of any condition on board which may lead to infection or spread of disease? If yes, state particulars in attached schedule.			
(7) Has any sanitary measure (e.g. quarantine, isolation, disinfection or decontamination) been applied on board? If yes, specify type, place and date			
(8) Have any stowaways been found on board? If yes, when did they join the ship (if known)?			
(9) Is there a sick animal or pet on board?			
<p>Note: In the absence of a surgeon, the master should regard the following symptoms as grounds for suspecting the existence of a disease of an infectious nature:</p> <p>(a) fever, persisting for several days or accompanied by (i) prostration; (ii) decreased consciousness; (iii) glandular swelling; (iv) jaundice; (v) cough or shortness of breath; (vi) unusual bleeding; or (vii) paralysis.</p> <p>(b) With or without fever; (i) any acute skin rash or eruption; (ii) severe vomiting (other than sea sickness); (iii) severe diarrhoea; or (iv) recurrent convulsions.</p>			
I hereby declare that the particulars and answers to the questions given in this Declaration of Health (including the schedule) are true and correct to the best of my knowledge and belief.			
Signed _____	Countersigned _____		
<i>Master</i>	<i>Ships Surgeon (if carried)</i>		
Date _____			

MARITIME DECLARATION OF HEALTH

Schedule

Upon request of the competent authority at the port of arrival, list crew members, passengers or other persons who have joined ship/vessel since international voyage began or within past thirty days, whichever is shorter, including all ports/countries visited in this period:

(4) Name	joined from: (1)	(2)	(3)
(5) Name	joined from: (1)	(2)	(3)
(6) Name	joined from: (1)	(2)	(3)
(7) Name	joined from: (1)	(2)	(3)
(8) Name	joined from: (1)	(2)	(3)
(9) Name	joined from: (1)	(2)	(3)
(10) Name	joined from: (1)	(2)	(3)
(11) Name	joined from: (1)	(2)	(3)
(12) Name	joined from: (1)	(2)	(3)
(13) Name	joined from: (1)	(2)	(3)
(14) Name	joined from: (1)	(2)	(3)
(15) Name	joined from: (1)	(2)	(3)
(16) Name	joined from: (1)	(2)	(3)
(17) Name	joined from: (1)	(2)	(3)
(18) Name	joined from: (1)	(2)	(3)
(19) Name	joined from: (1)	(2)	(3)
(20) Name	joined from: (1)	(2)	(3)

ATTACHMENT TO MODEL OF MARITIME DECLARATION OF HEALTH

Name	Class or rating	Age	Sex	Nationality	Port, date joined ship/vessel	Nature of illness	Date of onset of symptoms	Reported to a port medical officer?	Disposal of case*	Drugs, medicines or other treatment given to patient	Comments

* State (1) whether the person recovered, is still ill or died; and (2) whether the person is still on board, was evacuated (including the name of the port or airport), or was buried at sea.

Appendix 3: Notifiable disease (The Public Health etc. (Scotland) Act 2008, Schedule 1)

<i>Anthrax</i>	<i>Pertussis</i>
<i>Botulism</i>	<i>Plague</i>
<i>Brucellosis</i>	<i>Poliomyelitis</i>
<i>Cholera</i>	<i>Rabies</i>
<i>Clinical syndrome due to E.coli 0157 infection</i>	<i>Rubella</i>
<i>Coronavirus disease 2019 (COVID-19)</i>	<i>Severe Acute Respiratory Syndrome (SARS)</i>
<i>Diphtheria</i>	<i>Smallpox</i>
<i>Haemolytic Uraemic Syndrome (HUS)</i>	<i>Tetanus</i>
<i>Haemophilus influenzae type b (Hib)</i>	<i>Tuberculosis (respiratory or non-respiratory)</i>
<i>Measles</i>	<i>Tularemia</i>
<i>Meningococcal disease</i>	<i>Typhoid</i>
<i>Mumps</i>	<i>Viral haemorrhagic fevers</i> <i>West Nile fever</i>
<i>Necrotizing fasciitis</i>	<i>Yellow Fever</i>
<i>Paratyphoid</i>	