



PORT HEALTH SERVICES

STANDARD OPERATING PROCEDURE (SOP)

BOARDING CONVEYANCES

1.1 BOARDING OF SHIPS

BOARDING

Port Health designated Officers shall be part of the Joint Ship Boarding Team coordinated by the NPA and regulated as specified in the NPA Standard Boarding procedure.

Steps taken to board ships on International Voyage are as follows:

- **NPA SIGNAL FOR JOINT BOARDING** (usually written): Port Health Officer obtains notification of location, terminal, berth allocation and time for commencement of Joint Ship Boarding from NPA not later than 24hours before the time for commencement of ship boarding. The notification shall contain information on ETA, the name and nationality of the ship.
- **ASSIGNMENT OF BOARDING OFFICERS**: The Port Health Shift Head assigns and deploys boarding officers to arrive notified location not later than 30minutes before time of commencement for joint ship boarding.
- **EMBARKATION OF SHIP ON ARRIVAL**: Boarding Officers shall as part of the joint boarding team board the ship at the time indicated in NPA notification. Upon arrival of the team at the ship side, the Port health officers in the team shall first board and certify the ship safe before other members of the team board.
 1. The Quarantine Flag hoisted by the ship
 - Yellow (Q) Flag which indicates that the ship is healthy and it is waiting for pratique
 - Double Yellow (Q-Q) Flag which indicates that the ship is suspected. Boarding takes place at Mooring Station along with Medical Team.
 - Yellow Blue (Q-L) Flag. This indicates infection of persons, animals or cargo on board. Boarding also takes place at Mooring Station along with Medical Team.
 2. Placement of Rat Guards. Properly fixed rat guards prevent rats from going in or out of the ship.
- **REVIEW OF DOCUMENTS**: Relevant documents which enhance assessment of public health risks are demanded from the Captain or his representative. These include:
 - i. Maritime Declaration of Health

- ii. Crew list/Passenger list
- iii. Ship Sanitation Control Certificate or Ship Sanitation Control Exemption/Extension Certificate
- iv. Medical chest certificate
- v. Koo boy list
- vi. Stowaway list
- vii. Crew vaccination list
- viii. Provision/store list
- ix. Narcotic list
- x. Medicine list
- xi. Ship particulars (history of the ship)
- xii. Nil list

If the boarding officers are satisfied with the information obtained from the documents, free pratique is granted. Else, verification is made before granting free pratique when satisfied. When free pratique has been granted the quarantine flags will be lowered.

- BOARDING OF SUSPECTED OR INFECTED SHIP: Boarding of suspected ships take place at the mooring station.
- EHO and medical team wear PPE before boarding the ship.
- If there are sick passengers/crews on board, they are attended to as maritime declaration of health is being reviewed by EHO and medical team.
- Medical team will triage passengers/crews on board.
- Investigation of public health risk is carried out.
- EHO disinfests the ship after evacuation.
- Pratique granted after public health risk has been eliminated.
- Data on public health risk including diseases which are potential national and International health importance are recorded in the Log Book
- Notifications of potential PHEIC and or PHENC are made accordingly.

1.2 BOARDING OF AIRCRAFTS

- **NOTIFICATION:** Notification of Expected Time of Arrival (ETA) of an aircraft is obtained from the airline agent.
- **ASSIGNMENT OF BOARDING OFFICERS:** The shift supervisor assigns a team of boarding officers to the aircraft.
- **BOARDING THE AIRCRAFT:** The Port Health Officers (PHO) assigned to the aircraft proceeds to the gate/tarmac 10-15 minutes before the ETA wearing reflective jacket. After landing, the aircraft is embarked.
- **REVIEW OF DOCUMENTS:** The Health Part of Aircraft General Declarations (Gen. Dec.) and passengers manifest supplied by the aircraft are reviewed.
- **GRANTING OF PRATIQUE:** If the boarding officers are satisfied with the situation on board, information in the Gen. Dec., and verify necessary health measures e.g. availability of cans of Aerosol Dispenser used, then free pratique is granted. Else necessary health measures will be carried out before granting pratique.
- **INFECTED AIRCRAFTS:** Suspected or infected aircrafts are diverted to a hangar where Medical team will assess and respond to public health issues before pratique is granted.

2.0 INSPECTION OF CONVEYANCES

2.1 INSPECTION OF SHIPS

PURPOSE: To detect and abate sanitary nuisances found in ship

When approaching the ship to be inspected the health officers should observe the following:

- The presence or absence of rat guard
- Condition and lighting of the gangway
- Air pollution around the ship

PARTS OF THE SHIP INSPECTED

Every part of the ship is inspected however the following areas are key ones:

- Galley
- Stores
- Cabins
- Rest rooms
- Holds

NUISANCES THAT CAN BE FOUND IN SHIP:

- Defective toilet system
- Defective refrigerator
- Poor lightening
- Overcrowding
- Unwholesome food items
- Leakages
- Broken floor
- Overfilled waste bin
- Offensive odour

ORAL INTERVIEW:

- Source/ Port of fresh water supply
- Method of waste disposal
- Cleaning of water tank

After thorough inspection of the sanitary state of the ship and the ship documents, ship sanitation certificate is then issued.

ISSUANCE OF SHIP SANITATION/ EXEMPTION CERTIFICATE:

- Ship Sanitation Control Certificates
- Issued on fumigation of ship

- It last for six months

Ship Sanitation Control Exemption Certificate

- Issued on the expiration of the Ship Sanitation Control Certificate
- Fumigation is not necessary as the ship is still in good sanitary condition
- It last for six months.

2.2 INSPECTION OF AIRCRAFTS

- The Health Officer boards the air craft for inspection and collection of empty cans of aerosol dispenser as evidence of spraying before departure.

Nuisances to be observed in Aircrafts:

- Defective Toilet System
- Infestations (mosquitoes, other pest)
- Defective Lighting
- Defective Cooling System
- Defective Seats
- Defective Oven
- Unwholesome foods/water
- Expired food/Drinks.

2.3 INSPECTION OF VEHICLES

- All vehicles and good crossing the international ground crossing should be inspected by a Health Officer for possible nuisance.
- Port Health Officers checks the passenger manifest.
- The Port Health Officers embarks the vehicle to ascertain the sanitary condition of the vehicle.
- Live animals and food materials imported into the country with vehicles are also inspected to ensure their fitness for consumption.

NUISANCES TO LOOK FOR:

- Overcrowding/overloading.
- Infestation by Rodents/pests.
- Broken seats.
- Vehicles meant for goods used for passengers
- Unwholesome food.

3.0 SCREENING OF PASSENGERS AND CREW

3.1 SCREENING OF CREW ON A SHIP:

- Screen the ICVP validity
- Visually observe for signs and symptoms of diseases
- Clerk to obtain information on probable exposure
- Refer to clinic if sign(s) or symptoms of public health risks are noticed

3.2 SCREENING OF CREW ON AN AIRCRAFT AND AIR TRAVELLERS:

- Screen the ICVP validity
- Visually observe for signs and symptoms of diseases
- Clerk to obtain information on probable exposure
- Refer to clinic if sign(s) or symptoms of public health risks are noticed
- Request for and verify certificate of fitness to travel of pregnant persons
- Request for and verify certificate of fitness to travel of ill travellers

3.3 SCREENING OF CREWS ON VEHICLES AND TRAVELLERS AT GROUND CROSSINGS:

- Screen the ICVP validity
- Visually observe for signs and symptoms of diseases
- Clerk to obtain information on probable exposure
- Refer to clinic if sign(s) or symptoms of public health risks are noticed

4.0 VACCINATION AND ISSUANCE OF CERTIFICATE OF VACCINATION

- The source Vaccine for PHS is National Primary Health Care Development Agency

- Cold Chain System of vaccine storage is maintained at every PHS station/clinic.
- Clients to present themselves for Vaccination in the clinic. Health education is first given on those that are eligible to take the vaccines and those that are not.
- Charges for vaccination shall be openly displayed at all times and at multiple locations within the Port health Clinic.
- Administer vaccine at the appropriate site and dose.
- Properly documented vaccination (s) on the ICVP and the facility's register.
- Data statistics should be forwarded to the statistician and pharmacist monthly.
- Store waste in safety boxes for management by LAWMA or burn.

5.0 CERTIFICATION OF FITNESS OF PREGNANT/ILL PERSONS TO TRAVELL

5.1 ILL PERSONS

- Ill travellers are referred to Port Health Services (PHS) before boarding the aircrafts.
- Travellers come to PH clinic and present their medical report to the doctor.
- The nurse on duty checks the vital signs – blood pressure, temperature, pulse, etc. and records them.
- If the patient is fit enough to embark on the journey medical certificate of fitness is issued at a cost. If not, patients are advised to reschedule their flight.

5.2 PREGNANCY

Pregnant travelers of gestational age >30 weeks have risks of air travel, therefore, carriers require proof of the gestational age before allowing them board their aircrafts.

- Pregnant travellers are referred to Port Health Services (PHS) before boarding the aircrafts.
- Pregnant travellers come to PH clinic and present their medical report to the doctor.
- The nurse on duty checks the vital signs – blood pressure, temperature, pulse, etc. and records them.
- If the pregnant traveller is fit enough to embark on the journey medical certificate of fitness is issued at a cost. If not, patients are advised to reschedule their flight.

6.0 SCREENING OF ANIMALS

- Screen the International Health Certificate's validity
- Visually observe for signs and symptoms of diseases and vectors

- Clerk the importer/exporter to obtain information on probable exposure
- Refer to veterinary if sign(s) or symptoms of public health risks are noticed
- Write report and complete register

7.0 INSPECTION OF CARGO, CONTAINER AND BAGGAGE

7.1 CARGO

Inspection is carried out by EHO supported by EH Assistants

- Wear appropriate PPE
- Review documents such as certificate of import certificate, material safety datasheet (MSDS) etc.
- Take samples of goods from cargo using sampling protocol
- Do physical examination to confirm integrity of goods and rule out public health risks
- Send sample to laboratory for analysis
- Condemn and issue certificate of condemnation if necessary
- Liaise with relevant agencies required e.g. Customs
- Write report and complete register.

7.2 CONTAINER

Inspection is carried out by EHO supported by EH Assistants

- Wear appropriate PPE
- Observe and log in conformation of container with physical standards
- Observe and log in conformation of container with hygiene standards
- Observe and log in conformation of container with safety standards
- Look for signs of infestation
- Look for evidence of infection or contamination
- If necessary take samples for laboratory analysis
- Write report and complete register.

7.3 BAGGAGE

Inspection is carried out by EHO supported by EH Assistants

- Wear appropriate PPE
- Do physical examination of bags and baggage to rule out public health risks
- Look for signs of infestation
- Look for evidence of infection or contamination
- If necessary take samples for laboratory analysis
- Detain or confiscate luggage if necessary
- Liaise with relevant agencies required e.g. Customs, SSS, Immigrations etc.
- Write report and complete register

8.0 HANDLING OF SPECIAL CARGO

The special cargo relevant to PHS at POE is human remains. Handling is usually undertaken by EHO supported by EH Assistants.

Usually, documents are reviewed to guide for further action that may be necessary. Documents assessed include:

- Certificate of cause of death
- Coroner's or police report
- Certificate of embalmment
- Certificate of encasement

9.0 PEST CONTROL

9.1 PREVENTION AND CONTROL OF RODENTS

Infestation of rats in open and built environments as well as conveyances may lead to serious public health risks including PHEIC. These health measures are taken to combat it:

- Assess level of infestation
- Carry out table top combat exercise
- Apply appropriate measures
- Assess efficacy of method

- Write report and complete register
 - a) PHYSICAL METHODS: Embark on the following physico-mechanical and cultural methods:
 - Proper waste management
 - Weeding and de-vegetation
 - Proper food storage
 - Use of Kick plates on doors and proper fitting of rat guards on vessels
 - Reduce congestion and overcrowding
 - Use traps
 - b) BIOLOGICAL METHODS
 - Use natural predators
 - c) CHEMICAL METHODS
 - Use poisoned baits
 - Fumigate

9.2 PREVENTION AND CONTROL OF INSECT VECTORS

Infestation of insect vectors, especially mosquitoes, cockroaches and houseflies in open and built environments as well as conveyances may also lead to serious public health risks including PHEIC. Therefore:

- Assess level of infestation
- Carry out table top combat exercise
- Apply appropriate measures
- Assess efficacy of method
- Write report and complete register

Use one or more of the following health measures are taken to combat it:

- a) PHYSICAL METHODS: Embark on the following physico-mechanical and cultural methods:
 - Proper waste management
 - Weeding and de-vegetation
 - Proper screening of doors, windows and other openings
 - Clean offices, toilets and kitchen

- Remove water receptacles from surroundings

d) BIOLOGICAL METHODS

- Use natural predators
- Irradiate male insects

e) CHEMICAL METHODS

- Use poisoned baits
- Larvicide
- Use insecticide, aerosol dispenser on aircrafts
- Fumigate
- Carry out aerial spray with insecticide

10.0 REGISTRATION OF FOOD ESTABLISHMENTS

Food establishments at POE, especially those catering to aircrafts at international airports must be registered by Environmental Health Section of PHS.

The registration process entails:

- Receipt of application by food establishment
- Give the proprietor/agent the requirements of a food establishment as a regulated premises and fee(s) payable
- Fix a date to submit proof of requirements
- Review proof of requirements met
- Schedule a visit to confirm meeting of requirements
- Visit, inspect to confirm meeting requirements
- Communicate necessary review if any
- Write report and give certificate after consultation with sectional head or coordinator

11.0 INSPECTION OF FOOD ESTABLISHMENTS

Inspection of food establishment is usually carried out by EHO but doctors, scientists and nurses may support when needed.

- Notify establishment of intention to pay inspection visit stating the time and date, if a routine exercise.

- Review the file of the establishment, noting issues and strategise on the visit and personnel involved
- Embark on inspection visit wearing appropriate PPE and along with necessary materials and logistics such as testing and sampling kits, camera/recorder and jotters
- Present your team at appropriate contact office e.g. proprietor, commercial/marketing/quality assurance manager or PRO.
- Carry out pre inspection briefing and inform of your intention to take photographs, videos, audio recordings or food/water samples if necessary
- Request for a personnel of the establishment to conduct you around during the inspection (the person should be in senior or middle management and competent)
- Inspect the premises and operations based on requirements and for caterers to aviation, Food Safety Plan, Water Safety Plan, HACCP and Good Housekeeping as appropriate
- Ask questions and clarifications where necessary
- Take recordings, pictures, videos and samples as necessary
- Make on-site corrections when and where necessary.
- Issue oral notice where necessary
- Debrief facility contact/management
- Write report and complete register

WHAT TO LOOK FOR DURING TYPICAL INSPECTIONS OF FOOD ESTABLISHMENTS

- Sanitation of approach
- Housekeeping of premises
- Floor for cracks dampness and the quality of the floor.
- Walls for cracks, dampness and painting which should be preferably white.
- Ventilation: adequate ventilation
- Proper lighting
- Insect proofing.
- Ceilings which should be white washed without dampness and cobwebs
- Table and seating arrangement should be free from crevices.
- There must be space under the table.
- Provision of cloak room.
- Provision for sanitary conveniences.
- Provision for effective waste disposal
- Provision for adequate and portable water supply.
- Inspection of the sources of water supply.
- Properly dress (apron and head gear).

- No open sores.
- No running Nose/cough/catarrh.
- Medical screening and examination.
- Use of wholesome and fresh food items.

EQUIPMENT

- Cooking utensils must be adequate: Plates, Cutleries, cooking pots etc.
- Provision of storage facilities - cold room and dry stores
- Food Van must be well kept

12.0 TRAINING OF FOOD HANDLERS

Training of food handlers catalyse compliance of food safety and hygiene by food proprietors and employees for the mutual benefit of all, a very important scheme in food safety and public health.

Training of food handlers is done by EHO in conjunction with doctor and nurses.

The process of training food handlers entails:

- Review of records
- Invite handlers for training
- Elicit background information on food handlers
- Design a programme that reaches majority of handlers and address public health issues
- Provide suitable venue
- Carry out training in comprehensive way and allow questions to be asked
- Test comprehension
- Write report

TRAINING FOCUS

- Who is a food handler
- Importance of food
- Healthy and hazardous food
- Food handling – Farm to Fork
- Food Poisoning
- Prevention and Control of Food poisoning
- HACCP
- Food handlers' personal hygiene and food poisoning

- Hand washing and respiratory etiquette
- Overcooking and Undercooking
- Food Preservation and storage
- Food additives and health
- Food packaging
- Food transportation
- Food handlers test

13.0 SCREENING OF FOOD HANDLERS

- Obtain list of food handlers from register or by survey
- Invite food handler not hitherto registered for registration
- Send notice of food handlers' test to all food handlers.
- Brief the food handlers
- Clerk and conduct physical assessment
- Send food handlers to clinic for clinical assessment
- Send food handlers to designated laboratory
- Review laboratory result and schedule clinical appointment with Port Health doctor or nurse where there is no doctor at the clinic
- Food handlers are sent to designated government health facility where there is no PHS Clinic. Else, a reliable private health facility should be used.
- Any food handler with communicable diseases such as Salmonellosis, Shigellosis, and Tuberculosis etc. will be prevented from food handling until s/he is properly treated and may not transmit the infection.
- Food handlers who are free from communicable diseases or open wounds are issued the certificate of fitness valid for 6-12 months

14.0 FITNESS TO IMPORT/EXPORT FOOD

- Review clients application to import/export food
- Request for or take samples of food to be imported/exported
- Do organoleptic inspection of food sample but do not taste focusing on appearance, color, smell, fungal/mucor growth etc.
- Record your observation and send samples to a public analyst
- Match result of laboratory analysis and organoleptic inspection
- Issue certificate of exportability for satisfactory food
- Refer client to food technologist or advise him/her to process it further and re-do analysis

15. WATER SAFETY MONITORING

- Identify water sources
- Conduct inspection visit to water sources
- Take samples from sources and distribution points according to sampling protocol
- Record field parameters in situ
- Send samples to laboratory for analysis
- Log in report of laboratory analysis and field parameters
- Write report
- Advise authority or provide on water safety when necessary

16.0 MEDICAL CARE OF PATIENTS

- Patients come into the clinic and register with the health record – for issuance or sorting out of cards.
- Patients move to the nursing unit for vital signs – blood pressure, pulse, temperature and weight measurement, and these are recorded in the patient's card.
- Patients are taken to the doctor for consultation and proper management.
- Patients should be referred to the Laboratory for confirmation of diagnosis for appropriate treatment.
- After seeing the doctor, patients still go back to the Nurses for directions and counselling.
- Patient is thereby directed to the pharmacist for dispensing of medication.
- Patients are given appointment for follow up if necessary.
- Patients are placed on short term admission (≤ 8 Hrs.) if necessary.

17.0 EMERGENCY RESPONSE

- Head of Port Health Services is notified of an epidemic, disaster or other emergencies in or around the POE. S/he informs the Port Health Officer on Duty.
- The Port Health Officer on duty constitutes an Emergency Response Team to consist of: Doctors, Nurses, Pharmacists, Laboratory Scientists, Environmental Health Officers, Epidemiologists, Ambulance Drivers and others.
- The team moves to the site of the emergency which can be a conveyance carrying the affected passenger(s) wearing appropriate Personal Protective Equipment (PPE). Vaccines, Passengers Contact Card, Sprayers, and other resources are taken along.
- Establish Incident Command Post to quickly assess the number of people threatened, affected, exposed, injured or dead, as well as identify the exposure source and pathway.

- Triaging is done and affected individuals are sent to any designated Quarantine Centre, but in case of a crash or blast or any such emergencies, triaging is done where the badly injured are tagged red, minor injuries – Yellow, No injury – Green, Dead – White. Based on the color code the victims are evacuated to the hospitals, and Yellow-tagged victims are treated on site if need.
- All other emergency procedures are applied as necessary – give oxygen, apply CAB of resuscitation, and stabilize with neck collars as necessary.
- Samples are taken from the isolated victims for further investigation and all the passengers will be vaccinated, if the disease is vaccine preventable, before they are released.
- Other victims are assisted to fill a contact card for their addresses and they are informed about the signs and symptoms to look out for, and to report at the nearest hospital if they notice any of the symptoms.
- Coordinate with other healthcare providers as necessary.
- Record all contacts.

18.0 DEPORTEES, REFUGEES & RETURNEES

18.1 REFUGEES

1. Notification of arrival of refugees by appropriate authorities such as airline, immigrations as well as shipping agents (in the case of sea ports)
2. Screening of refugees on arrival
3. Disinfestation and sanitation of the camp to accommodate the refugee
4. Establishment of a side clinic to tend to the basic health needs of the refugee
5. Maintenance of sanitation throughout their stay in the camp.

18.2 RETURNEE/DEPORTEE

1. Screening on arrival at every point of entry
 - Sort according to severity of illness
2. Provision of an ambulance equipped with first aid materials
3. Referral of patients needing critical medical attention
4. Prompt treatment of those that are not critical and discharge
5. Develop MOU with appropriate MDAs and parastatals.
6. Handover the ones assessed to be traumatized to the social welfare department with a written note/report

19.0 SUPERVISION AND MONITORING

1. Adequate knowledge of the job description of each worker to be supervised

2. Determine the activities to be supervised
3. Set performance standards
4. Develop a checklist
5. Field-test the checklist
6. Organize logistics
7. Conduct the visit.
 - a. Explain the reason for the visit (objectives)
 - b. Administer the checklist without obstructing the normal routines as much as possible
 - c. Give constructive feedback
 - d. Proffer solutions where necessary
8. Document good and unacceptable performance
9. Check and measure progress

20.0 HEALTH PROMOTION AND EDUCATION

- Develop IEC materials on various public health risks including diseases; their occurrence, causation, signs and symptoms, mode of spread, prevention and control; and international concern.
- Disseminate IEC materials to POE community.
- Use IEC materials to buttress travel advice and health information to traveller and members of POE community as appropriate.

21.0 PUBLIC HEALTH RELATIONS

1. Establish a functional clinic at all points of entry
2. Obtain suitable and adequate accommodation for screening at all points of entry
 - The accommodation must be accessible to all Port users
3. Deploy qualified personnel to man the clinics and screening posts
4. Participate in stakeholders' security meetings at all points of entry
5. Participate in safety health and environmental sanitation
6. Supply advisory notes on current public health issues to all stakeholders and port users
7. Collaboration/continued advocacy with relevant stakeholders at all points of entry such as customs, Immigration, NDLEA, NAQS

22.0 LEGAL ACTION

Effective discharge of PHS duties sometime warrants legal action. This is recourse to when other means have failed or legal action is the best option in such circumstances. Matters

which may require legal actions are acts or omissions against national or international laws and regulations. Matters which may require prosecution are:

STRUCTURAL NUISANCES

- Dilapidated building
- Leaky roof
- Cracked, broken or slippery floor including pot holes
- Defective drainage
- None, inadequate or filled Sanitary Conveniences

NON STRUCTURAL NUISANCES

- Filthy Environment
- Overgrown weeds, shrubs or hedges that can harbour dangerous vermins or vectors
- Indiscriminate dumping of refuse
- Indiscriminate defaecation
- Poor ventilation or lighting
- Overcrowding or congestion
- Rearing of animals

INFESTATION

- Infestation with pest such as rats or insects, especially vectors of diseases in or around Ports of Entry
- Operating Pest Control Services in a POE without valid registration with PHS

IMPROPER WASTE MANAGEMENT

- Solid waste
- Liquid waste
- Hazardous waste

IMPROPER CONVEYANCES OPERATIONS

- Failure to notify PHS within stipulated 12-24hours.
- Obstruction of PHS from boarding a conveyance.
- Failure to hoist the right Quarantine Flag.

DEALING WITH UNSAFE FOOD OR WATER

- Running of unregistered food establishment

- Failure to register as a food handler and handling food in a food establishment in any POE.
- Offering food for sale in any unapproved place in or around POE
- Offering of unsafe food and water for sale in or around POE
- Contamination of water resource(s) in a POE

PROCEDURE

Detection of Nuisance or Legal Issue: Port Health Officers (mainly Environmental Health Officers) detects a nuisance or issues requiring legal action during inspections or investigation of complaints or reports.

Assessment of Nuisance or Legal Issue Detected: Port Health Officers assesses the nuisance or legal issue to determine its veracity and proper course of action. Appropriate action is then initiated.

Preliminary Action: The first line of action is to communicate the breach or nuisance to the defaulting party. Oral notice is issued to abate the nuisance or comply with provision(s) of Law(s) or Regulation(s) within appropriate time frame. If the nuisance or breach is weighty an abatement notice stipulating the offence and time frame within which it must be abated lest legal proceedings be commenced is issued.

Abatement Notice: Abatement Notice is issued and served on the defaulter or his/her agent as a precursor to legal proceedings after expiry of the period given by the oral notice or when the nuisance or non-compliance with required law or regulation is determined to be considerable.

Initiation of Legal Action: Non-compliance with abatement notice is enough grounds for prosecution. A legal proceeding is initiated accordingly after consultation with the supervisor and Head of Division respectively. The Port Health Officer to prosecute the case approaches a court of proper competence and jurisdiction, usually a Magistrate Court to obtain Court summons to be served on the accused.

Service of Court Summons: The officer serves the court summons on the accused. If the accused cannot be reached or s/he refuses it, the court is approached again for proper service of the summons on the accused through the court bailiff or police.

Trial and Judgement: After proper service of the court summons, the Port Health Officer appears to prosecute or as prosecution witness on the date of trial. If the case is properly prosecuted, a judgment favourable to PHS i.e. conviction of the accused will be obtained.