

**AIRPORT HEALTH ORGANISATION, MANGALORE INTERNATIONAL AIRPORT, KENJAR
POST, BAJPE, MANGALORE , PIN – 574142**

Head of the Organisation : Port Health Officer, Cochin

1.About Airport Health Organisation, Mangalore

Airport Health organisation, Mangalore is a 'Public Authority' established for the detailed execution of the Policies of the Government of India with the status of a 'Subordinate Office' of Directorate General of Health Services under Ministry of Health and Family Welfare, Nirman Bhavan, New Delhi. This Public Authority functions with the funds provided by the Government of India.

The Airport Health Organisation, Mangalore was established in the year 1st December 2018 to ensure prevention of entry of Quarantinable diseases (Diseases subjected to International Health Regulations) into the country under Indian aircraft and Public Health Rules, 1954.

Mangalore International Airport is located in Bajpe, Dakshin Kannada District, Mangalore, Karnataka and is one of the main airports in the country catering to international and domestic air-traffic in Karnataka and is the 2nd largest and 2nd busiest airport in Karnataka. Mangalore International Airport caters to around 6-7 international flights (arrival) and 1200 to 1500 international passengers per day and 24 domestic flights daily.

The airport was named Bajpe Aerodrome, when it opened on 25 December 1951. Mangalore Airport was a customs airport from 2006 to 2016 and was used for limited domestic flights before it was granted the status of International airport. The International flights started in 2006. It is on top of a hill, with [table top runways](#). It is the first airport in Karnataka to have 2 runways.

In July 2019, the central government approved leasing of the airport through public-private partnership (PPP) to the [Adani Enterprises](#) for operations, management and development for the next 50 years.

2.VISION, MISSION AND KEY OBJECTIVES

2.1 VISION:

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.

2.2 OBJECTIVES

1. To ensure appropriate surveillance and response measures at Airport Health Organisation, Mangalore for prevention of entry and transmission of infectious diseases/ PHEIC across international borders via symptomatic crews and passengers arriving from PHEIC affected countries.
2. For early detection, to minimize societal disruptions by providing/ensuring access to appropriate prevention, care and treatment.
3. To protect the visiting crews/ passengers and populations living in PHEIC affected countries.
4. To reduce community morbidity and mortality due to PHEIC.
5. To ensure safe environment for travellers.

3.FUNCTIONS AND DUTIES OF AIRPORT HEALTH ORGANISATION, MANGALORE:

3.1 Surveillance of diseases notified by Government of India.

Disease surveillance at Airport Health Organisation basically includes 2 categories

- A. Disease surveillance on regular basis like surveillance of Yellow Fever disease. As per the standard protocol, all international passengers are screened by Immigration Officers. Passengers coming from Yellow fever infected countries without valid Yellow fever vaccination card are identified.If such passengers are identified by immigration officers, they are referred to Airport Health Organisation Mangalore Pre – immigration office for making decision regarding quarantine.
- B. Disease surveillance when a PHEIC is declared by World Health Organization and Ministry of Health and Family Welfare decides to initiate surveillance.

3.2 Quarantine of passengers

All the passengers who have transited through the Yellow fever endemic country during the last 6 days prior to their arrival in India and if they don't have a valid vaccination certificate, they will have to be quarantined for 6 days. The quarantine starts from the date and the time they have started their travel from the affected country. During this period, they will be monitored for any signs and symptoms of yellow fever disease. If they develop any symptoms, blood sample will be collected and send for testing at authorised laboratory.

3.3 Surveillance of International Aircraft disinfection :

As per the Indian Aircraft and Public Health rule, 1954 all the international flights coming to India should be disinfected. These aircraft will be carrying certificate/ Disinfection canisters to this effect and will be shown to the pre - Immigration office for verification.

3.4 Human remains Clearance :

As per the Indian Aircraft and public health rule Para (4) 1954, aircraft operators/consignee should intimate APHO, Mangalore at least 48 hrs before the HUM is brought to airport. Following documents are required to be presented to Pre - Immigration office of Airport Health Organisation, Mangalore.

- a. Non-Objection Certificate from Indian embassy
- b. Copy of the cancelled passport.
- c. Death certificate clearly showing the cause of death.
- d. Embalming certificate.
- e. Non- contagious certificate.

The documents will be scrutinised and decision taken will be conveyed to the consignee/aircraft operators.

Similarly clearance certificate is issued for on board death cases after examination of the body.

3.5 VVIP food surveillance

3.6 Implementation of FSSAI 2006 :

The food outlets inside the terminal will be inspected frequently and their food hygiene practices will be thoroughly scrutinised and monitored.

3.7 Vector Surveillance :

APHO staff with assistance from NCDC, Kozhikode undertakes periodic and regular monitoring of the vector control activity within the airport and 400 metre periphery of the airport.

3.8 Sanitary Inspection :

Health Inspector and Field workers do regular sanitary inspection of the food outlets, Toilets, washrooms etc. Samples of the drinking water are taken by the airport operator under the supervision of the APHO, Mangalore from the water sources for testing and the results are monitored by this office.

3.9 Training :

The Immigration officers and other stakeholders are trained periodically on Yellow Fever and PHEICs .

3.10 Flight Emergencies :

APHO staffs will assist in any flight emergency occurring within the airport.

3.11 Duties related to public Health Emergencies of International Concern (PHEIC)

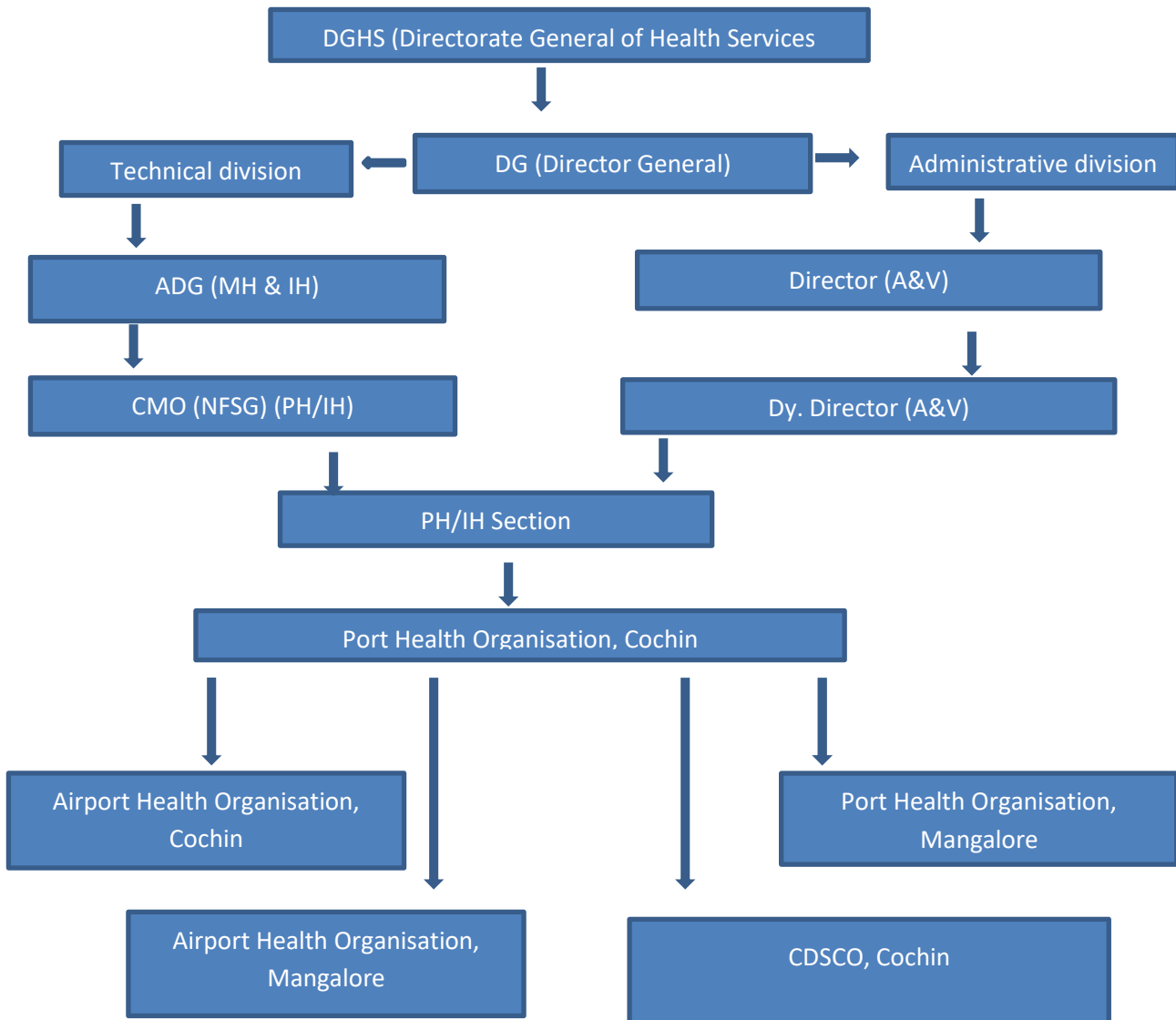
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As per the International Health regulations, Point of Entries should be in preparedness for Chemical, Biological, Radiological and Nuclear emergencies (CBRN). Mangalore International Airport is fully prepared and a public health emergency contingency plan has been prepared by Airport Health organisation, Mangalore.

3.12 Any other task assigned by the Ministry from time to time.

4. ORGANISATION CHART

Organisation chart of Airport Health Organisation, Mangalore



5. POWERS AND DUTIES OF OFFICERS AND EMPLOYEES [SECTION4(1)(B)(2)]

5.1 Administrative powers and Financial Powers and Responsibilities

Port health Officer, Cochin is the designated drawing and disbursing officer for the airport Health Organisation, Mangalore

5.2 Medical Officer:

Surveillance of Quarantinable diseases and Public health emergency of International Concern, HUM Clearance ,giving awareness class to other stakeholders at airport like Immigration ,Customs, CISF etc.

5.3 Powers and Duties of other Employees:-

5.4 Subordinate staffs: No independent powers.

Duties as assigned by Medical Officer

- Sanitary supervision for keeping the Airport premises and Airport area free from mosquitoes in their larval and adult stages.
- Inspection of catering establishments within the Airport terminal.
- Screening of International passengers for symptoms of PHEIC at pre-immigration area and their isolation to quarantine/treatment facilities.
- Inspection and clearance of Aircrafts.
- surveillance/quarantine of passengers and crew members,
- clearance of human remains,
- to ensure good sanitation in the airport,
- Provision of safe food,
- Provision of safe drinking water,
- Vector control at Mangalore Airport.
- Prioritize clearance of patients with health emergency and to assist in shifting to designated hospitals.
- Food safety Duties

5.5 Activities During Emergencies :-

- To provide emergency medical aid to crews / passengers
- Disinfection of baggage and conveyances
- Demonstration of various procedural activities during training.
- Other Duties :- Various other need based duties as assigned from time to time by the Medical Officer.

5.6 Rules/Orders under which powers and duty are derived :-

- International Health Regulations 2005
- Indian Aircraft Rules (Public Health Rules) 1954
- Indian Public Health Act
- GFR Rules
- FRSR Rules
- Leave Rules
- Medical Attendance Rules
- Central Civil Services Pay Rules
- CCS Pension Rules
- Establishment Rules
- Receipts and Payments Rules

- Delegation of Financial Powers Rules
- GPF Rules
- LTC Rules
- HBA Rules
- FSSAI Rules & Regulation, 2011

5.7 Related provisions act rules etc.:- The process of decision making and the discharge of functions of this Authority and its employees is in accordance with the following Acts, Rules Regulations as mentioned under Rules and orders.

5.8 Time Limit for taking a decision, if any :- Time limit will vary from one to few days if the decision is to be taken at APHO level, to 7days to one month if the decision has to be taken by the Directorate.

5.9 Channel of supervision and accountability

4 Director General of Health Services ➔ Additional DDG(PH/IH) ➔ Dy. Director(A&V) PHO, Cochin ➔ APHO Mangalore

5.10 Norms for discharge of Functions [Section 4 (1) (b) (4)]

Nature of Functions/services offered :- As mentioned under the heading "Functions and Duties of APHO"

5.11 Process by which these services can be accessed:-

By Submitting Application / through E-mail/ telephone.

5.12 Time-limit for achieving the targets

Varies from one day to a month.

6. Rules, Regulations, Instructions manual and records for discharging functions [section 4(1) (b)(5)]

Discharge of functions of this authorities and its employees in accordance with the following Acts ,rules and regulations;

- Indian public health act 1954.
- Indian aircraft act
- International health regulation
- Food safety and standards act.
- GFR Rules
- FRSR Rules
- Leave Rules
- Medical Attendance Rules
- Central Civil Services Pay Rules
- CCS Pension Rules
- Establishment Rules
- Receipts and Payments Rules
- Delegation of Financial Powers Rules
- GPF Rules
- LTC Rules
- HBA Rules
- FSSAI Rules & Regulation, 2011

7. Documents related to substantive functions :-

- **7.1 Category A:** Nil

- **7.2 Category B-Keep-Permanent:**
 - 1. Non consumable stock Register
 - 2. Copy of Acts, Rules, & Regulations administered by this Public Authority
 - 3. Guidelines & Instructions issued by Higher Authorities.

- **7.3 Category C-10 Years:** Nil

- **7.4 Category C-5 Years:**
 - 1. All personal Files

- **7.5 Category C-3 Years:**
 - 1. Stock Register
 - 2. Training register.

- **7.6 Category C-2 Years:**
 - 1. Consumable stock Register
 - 2. PHEIC screening Cards
 - 3. Flight detail Register
 - 4. GD Document & passenger Manifest
 - 5. Dead Body clearance Register
 - 6. Human Remains documents
 - 7. HR(NOC) Register
 - 8. Despatch Register
 - 9. Vector Surveillance Register
 - 10. VVIP Food supervision Register
 - 11. Water sample Register
 - 12. FSSAI Food outlets inspection Register
 - 13. Flight emergency call register.

- **7.7 Category C-1 Years :**
 - 1. Attendance Register .

8. DIRECTORY

Director General of Health Services

Directorate General of Health Services ,
Ministry of Health & Family Welfare, Nirman Bhavan,
New Delhi – 110108
Phone : 011 23061438

Additional Director General (MH & IH)

Directorate General of Health Services ,
Ministry of Health & Family Welfare, Nirman Bhavan,
New Delhi – 110108
Phone : 011 23061806

CMO (NFSG) (PH/IH)

Directorate General of Health Services ,
Ministry of Health & Family Welfare, Nirman Bhavan,
New Delhi – 110108
Phone : 011 23062167

Director (A&V)

Directorate General of Health Services,
Ministry of Health & Family Welfare, Nirman Bhavan,
New Delhi – 110108
Phone : 011 23061015

Dy. Director (A&V)

Directorate General of Health Services ,
Ministry of Health & Family Welfare, Nirman Bhavan,
New Delhi – 110108
Phone: 011-23063203

8.1 DIRECTORY OF OFFICERS AND EMPLOYEES OF APHO,MANGALORE

S. No.	Name and Designation	Telephone / E-mail
1	Dr. K.A. Shyamini, Sr CMO(SAG) Port Health Officer, Cochin	Phone : 0484 – 2666060 shyamini.ka@gov.in pho.cochin-dghs@gov.in

8.2 MONTHLY REMUNERATION OF OFFICERS AND EMPLOYEES

No regular Doctors and staff have been appointed by Directorate General of Health Service at Airport Health Organisation, Mangalore . 6 contractual staff have been posted.

Sl.No	Designation	In position	Salary
1.	Medical Officer	1	56100
2.	Health Inspector	1	35400
3.	Health Assistant	2	19900
4.	Field Worker	2	18000

8.3 SYSTEM OF COMPENSATION AS PROVIDED IN REGULATION

1. *Ex gratia* lumpsum compensation to families of Central Government

Civilian employees who die in harness

The families of Central Government Civilian employees, who die in harness in the performance of their bona fide official duties under various circumstances, shall be paid the following *ex gratia* lump sum compensation.

Death occurring due to accidents in the course of performance off duties ₹ 25 lakhs

- I. Death occurring in the course of performance of duties attributable to acts of violence by terrorists, anti-social elements, etc. ----- ₹ 25 lakhs

1. Death occurring during (a) enemy action in international war or border skirmishes and (b) action against militants, terrorists, extremists, etc. ----- ₹ 35 lakhs

2. Death occurring while on duty in the specified high altitude, inaccessible border posts, etc., on account of natural disasters, extreme weather conditions ----- ₹ 35 lakhs

The compensation is intended to provide an additional insurance and security to employees, who are required to function under trying circumstances and are exposed do different kinds of risks in the performance of their duties.

8.4 Conditions governing payment of lumpsum compensation.

1. The death of the employee concerned should have occurred in the actual performance of bona fide official duties. In other words, a casual connection should be established between the occurrence of death and Government service.
2. Even, if an employee had died in such circumstances that a medical report could not be secured, the nexus and casual connection with Government service would need be adequately established in determining the entitlements to the *ex gratia* lumpsum payment. All evidence (both direct and circumstantial) shall be taken into account and the benefit of reasonable doubt given to the claimant.
3. The *ex gratia* lumpsum compensation is not admissible if the death of the employees is due to accidents while travelling on duty commercial aircraft, national or private.
4. The *ex gratia* lumpsum compensation is admissible if the death of the employees is due to accidents while travelling on duty by service aircraft without prejudice to the Bond required to be executed by the employees indemnifying the Government against any claims on account of death while travelling by service aircraft.
5. In the case of death of an employees while travelling on duty by Railways due to train accidents, the amount of *ex gratia* lumpsum compensation admissible will be reduced by the compensation, if any, received by the next of kin of the employees from the Railways.

From 1-1-2006, there will be no ceiling for grant of *ex gratia* lumpsum compensation paid from Sundry Government sources such as the Prime Minister's Relief Fund, Chief Minister's Relief Fund etc., to the families of deceased Government servants.

8.5 Ex gratia lumpsum compensation is in addition to other benefits.

Admissible in addition to such other benefits as may be admissible under CCS (Extraordinary Pension) Rules, or the Liberalized Pensionary Awards Scheme, CCS (Pension) Rules, 1972, General/ Contributory P.F Rules, Central Government Employees' Group Insurance Scheme.

8.6 Sanctioning Authority. _ Concerned Administrative Ministries in consultation with their Financial Adviser

9. DISCIPLINARY ACTION HAS BEEN PROPOSED/ TAKEN

9.1 Name of the Employees against whom Disciplinary action has been proposed / taken

1. i) Pending for Minor penalty or major penalty proceedings : NIL
2. ii) Finalised for minor penalty or major penalty proceedings : NIL

10.TRANSFER POLICY AND ORDERS

10.1Transfer policies and transfer orders

Transfer policy of Medical Officers, Group B and few categories of Group C employees are governed by the Transfer policy of DGHS, New Delhi.

	surveillances													21
9	Sanitary inspections	4	4	4	4	6	4	4	4	4	4	4	4	46
10	Food establishments inspected	0	0	0	0	4	6	6	6	6	6	6	6	40
11	Head of foreign state	0	0	0	0	0	0	0	0	0	0	0	0	0
12	Water sample collected	0	0	0	0	0	0	0	0	0	0	0	0	0
13	Training activities performed	0	0	0	0	0	0	0	0	0	0	0	0	0
14	Screening of zika virus	0	0	0	0	0	0	0	0	0	0	0	0	0
15	Other specific activities (Polio vaccination)	0	0	0	0	0	0	0	0	0	0	0	0	0
16	Quarantine for PHEIC other than YF	0	1055	3450	3609	0	2905	5965	8548	11753	12970	13725	13073	63980
17	Number of passenger Arrived	0	1055	3450	3609	3423	2905	5965	8548	11753	12970	13725	13073	67403
18	Number of crew	0	28	280	166	172	152	336	472	498	560	680	680	3344

	arrived													
19	Domestic tour (Indian VVIP)	0	0	0	0	0	0	0	0	0	0	0	0	0
20	International tour (Indian VVIP)	0	0	0	0	0	0	0	0	0	0	0	0	0
21	Quarantine of passenger other than YF	0	1055	3450	3609	3423	2905	5965	8548	11753	12970	13725	13073	67403
22	Polio Vaccination	0	0	0	0	0	0	0	0	0	0	0	0	0
23	Non scheduled flights	0	0	0	49	58	48	91	120	160	172	173	188	871
24	Number of entomological survey undertaken	0	0	0	0	0	0	0	21	0	0	20	21	41
25	Training activities courses / number trained	0	0	0	0	0	0	0	0	0	0	0	0	0
26	Travelor reported to APHO	0	1055	3450	3609	3423	2905	5965	8548	11753	12970	13725	13073	67403

12. REPLIES TO QUESTIONS ASKED IN THE PARLIAMENT

- **DETAILS OF QUESTIONS ASKED AND REPLIES GIVEN:NIL**

13. BUDGET AND PROGRAMME

1. **Total Budget Allocated to APHO, Mangalore.**
2. **Budget for each agency and plan & programmes**
3. **Proposed expenditures**
4. **Revised budget for each agency, if any**

Head	Year	Head	B.E	R.E	F.E	Expenditure
APHO, Mangalore	2018- 19	---	5,00,000/-	5,00,000/-	5,20,000/-	4,97,115/-
APHO, Mangalore	2019- 20	---	70,50,000/-	27,00,000/-	21,05,017/-	19,60,852/-
APHO, Mangalore	2020- 2021	----	21,00,000/-	28,00,000/-	26,30,000/-	25,57,319/-

5. Report on disbursements made and place where the related reports are available.

The report on disbursements made is available in PFMS portal.