

Targeting of Ships by Port Health Authorities

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Is there a need for further guidance for Port Health Authorities for targeting ships?

Port Health Authorities perform their duties in ports under multiple national and international laws such as the International Health Regulations or UN Conventions against the illicit traffic of narcotic drugs. Goals and practices of ship inspections according to the laws and conventions differ substantially between countries and even within countries (to tell the truth: often even within one service unit). This is also the case related to internationally binding conventions such as the International Health Regulations 2005. Some countries (such as Turkey) do implement this convention in a way that the granting of “free pratique” (Article 28 IHR 2005) will only take place after an officer has boarded the ship in person and requested further information on health risks. Others will inspect a fraction of all ships calling to their ports based on a risk assessment (such as UK and Germany). Others will only visit and inspect ships upon request of the shipmaster or agent who ask for the issuance of certificates or other services or notification of disease (such as Denmark). To ship owners and –master these differences in targeting ships by Local Port Health Authorities may be a source of confusion, misunderstanding and sometimes frustration.

Is there a right or wrong answer to the question what target rate and what priority of ships is appropriate? This question is of importance to Port Health Services because it is a question of resources in terms of personnel, education and equipment.

Agreement between the Association of Port Health Authorities, UK and the „Arbeitskreis der Küstenländer für Schiffshygiene in Deutschland“

In 2008 the above named national institutions which do aim to create consistency and good practice in delivering services of Port Health Authorities to the Public Health have formally agreed on further collaboration. It was later agreed to exchange views on a risk based assessment of criteria for choosing a ship for inspection. We believe that delivering a common view between UK and Germany on prioritization in ship inspections will be beneficial to the services and clients.

Are there best practice examples for targeting a ship for inspections?

The best known example of harmonized inspection procedures is the Paris MoU system which is designed to target sub-standards ships with the main objective being

their eventual elimination. The Member States have agreed to inspect 25% of the estimated number of individual foreign merchant ships which enter their ports. The Paris MoU is an administrative agreement between the maritime authorities of 24 European countries and Canada. Port State control is carried out by a Port State Control Officer. Every day a number of ships will be selected for a Port State Control inspection throughout the region. To facilitate such selection, the central computer database is consulted by the officers for data on ships particulars and for the reports of previous inspections carried out within the Paris MoU region. If a ship has been inspected within the Paris MoU region during the previous six months and, on that occasion, was found to comply, the ship will in principle be exempted from further inspection, unless there are clear grounds to warrant further investigation. In selecting ships for inspection the Paris MoU Authorities will give priority to:

- Ships visiting a port of a state, the authority of which is a signatory to the memorandum, for the first time or after an absence of 12 months or more
- Ships flying the flag of a state appearing in the table of above-average detentions and delays
- Ships which have been permitted to leave the port of a state, the authority of which is a signatory to the memorandum, on the condition that the deficiencies noted must be rectified within a specified period, upon expiry of such period;
- Ships which have been reported by pilots or port authorities as having deficiencies which may prejudice their safe navigation;
- Ships whose statutory certificates on the ship's construction and equipment, issued in accordance with the relevant instruments and the classification certificates, have been issued by an organization which is not recognized by the authority;
- Ships carrying dangerous or polluting goods, which have failed to report all relevant information concerning the ship's particulars, the ship's movements and the dangerous or polluting goods being carried to the competent authority of the port and coastal state;
- Ships which are in a category for which expanded inspection has been decided; and
- Ships which have been suspended from their class for safety reasons in the course of the preceding six months.

When deficiencies are found during the inspection, the nature of the deficiencies and the corresponding action taken are filled in on the inspection report.

What is the current practice in Germany

Currently German Port Health Authorities do deliver their services to ships under several national laws (such as the national Drinking Water Act or the Krankenfürsorgeverordnung and many others) and international Conventions (such as IHR 2005, EU legislation, Agreement of Brussels, ILO and IMO conventions). Consistency of sanitary inspections, training and quality control is an ongoing

challenge to the German Port Health Authorities. Port Health Authorities in Germany are under the leadership of Medical Doctors. Most Port Health Authorities (with the exception of Hamburg which is part of the state ministry of health) are part of the local health authority which serves the local community. Some Port Health Authorities serve a small volume of ship traffic only. Multiple tasks in the community and understaffing of local health departments often do not allow port health officers in small ports to visit a ship unless there is a request for a certificate or a notification of disease. In Large German Ports such as Kiel, Hamburg, Rostock and Bremerhaven inspectors and Medical Doctors do target ships for inspection based on local risk assessment schemes. New information technology plays an important role in targeting ships. Germany has a tradition of requiring all international ships to declare “free pratique” on the grounds of a Maritime Declaration of Health. Currently the statutory regulation to the IHR 1969 is still in place. According to this act all international ships are asked to deliver the Maritime Declaration of Health and to notify any disease on board. The act also specifies civil penalties if notification is not done or control measures are not observed.

The Association of German Coastal States in Ship Sanitation (Arbeitskreis der Küstenländer für Schiffshygiene) currently develops risk based criteria for ship inspections in Ports which will be designated under IHR 2005. This is to help local health departments to argue for an appropriate number of personnel. A target value for the rates of international ships to be inspected (such as 10-25% of all ships calling a port) is under discussion.

Current Practice of the Hamburg Port Health Center in targeting ships for inspection

In Hamburg, out of approx. 13.000 ships calling to the Port of Hamburg approximately 15-20% of all ships will be visited by an inspector or Medical Doctor of the Port Health Service.

Free Pratique

All international ships are required to issue a Maritime Declaration of Health. “Free Pratique” is granted by the Immigration Service which visits the ships on the grounds of the Maritime Declaration of Health. If all items of the Maritime Declaration of Health are ticked as “no” the Immigration Officer in lieu of the Port Health Officer will grant a written “free pratique”. If one of the boxes is ticked with “yes” the Port Health Authority will judge on further measures needed and grant “free pratique” with or without further control measures if appropriate.

Occasions to visit a ship

The occasions to visit a ship are given by the catalogue of jobs of the Hamburg Port Health Center as follows:

- 1) Service requested by ship agent, -owner or master, such as Drinking Water Certification, Ship Sanitation Certificates, Medical Chest certification, Medical Sewage certification, Vaccination and Medical Counseling
- 2) Notification of Disease or Death under IHR 2005 and National Infectious Diseases Act
- 3) Communication of Public Health Risk by other Port Health Authority

4) Risk based targeting of ships for routine inspection

All ships for which a service of the Hamburg Port Health Center is requested or a disease or death on board is notified will be visited as soon as possible around the clock (24 h/ 7 d).

In addition it will be decided by the team leader on a daily basis to inspect additional ships based upon availability of personnel and equipment.

Public Health Risk Assessment by the Hamburg Port Health Center

General rule: All ships calling to the Port of Hamburg ought to be inspected, but exemptions can be made on the grounds of a low risk.

It has to be clarified that the term “inspection” may have different meanings in this context. If an issuance of a SSC is needed this will be a comprehensive ship inspection, if a vaccination is asked for, a ship visit will include a checking of the validity of documents and- if needed- further investigations. If no service is ordered by the shipmaster, the inspector or Medical Doctor will visit the ship to check the documents and screen the Medical log book and Maritime Declaration of Health and issue “Free pratique”. Only if there are further indications of a Public Health risks a formal ship inspection will be conducted.

Criteria for risk assessment for “routine visits/inspections” are:

- Age of ship
- Size of ship
- Type of ship (passenger or cargo)

- Previously documented deficiencies
- Notification of disease by shipmaster
- Communication by other Port Health Authorities
- Communication by other sources (ITF, Port State, VSP)

- Ship itinerary („affected area“)
- Facilities with public health risk (Hemodialysis, child-care, Spa...)

A central tool to manage the information concerning the targeting of ships for sanitary inspection is our ship database “HÄDI” which allows – among other functions- to flag ships for inspections upon return of the ship to the Port of Hamburg.

The following ships **may be exempted** from ship inspections by the Hamburg Port Health Center:

- 1) Ships in international traffic** from the Northern, Baltic and Mediterranean Sea and from Northern America and
- 2) Ships in German traffic only**
- 3) Ships in regular traffic**

If there is no evidence of disease or public health risks on board (as known by the Maritime declaration of Health, presence of a valid SS(E)C and others)

If the ship was inspected before by our service and no deficiency is noted in the Database

If Sanitary and Medical Certificates are up to date

If the named areas are currently not affected by disease

The following ships **are given priority** for routine ship inspections by the Hamburg Port Health Center:

- 1) Passenger ships in international traffic
- 2) Ships which have not previously been inspected by the Hamburg Port Health Center
- 3) Ships for which deficiencies were reported previously
- 4) Ships from affected areas
- 5) Ships which did not deliver a Maritime Declaration of Health
- 6) other evidence of risk to public health

Example

On a given day the Inspectors and Medical Doctors may choose ships for inspection as follows:

Mandatory inspections

- Every ship is inspected for which services were ordered such as SSC, Drinking Water Certificates, Vaccinations, Health Counseling, Medical Chest Certificates
- Every Ship is inspected which notified a disease on board

High priority Inspections

- All passenger ships are inspected
- All ships from affected areas are chosen
- All ships which showed deficiencies during previous inspections are re-inspected

Medium priority inspections

- a ship on West Africa route will be visited
- a ship which was not seen by our service before

New Influenza a H1N1 and ship Inspection

In the current situation there is a high priority for information and surveillance of vessels with a risk for the occurrence of disease or an outbreak of Influenza A H1N1 on board. This is estimated by the size and type of the vessel and itinerary. Sometimes other information will change the risk assessment such as the presence of contacts to cases of Influenza A H1N1 on board.

Therefore,

- Passenger ships and
- Ships from areas where sustained transmission of Influenza A H1N1 occurred are inspected with highest priority.

Summary:

Criteria for choosing a ship by Port Health Services are highly variable between Port Health Authorities. There is agreement in the greater part of the Port Health Community that ships with Disease or Death on Board or other Public Health Risks such as contaminated Drinking water or Vermins or any evidence noted on the SSC need to be (re-)inspected. There probably is also agreement on the need to visit Cruise ships for Public Health Surveillance. But there is uncertainty on the assessment of public health risks for ships for which this kind of information is not available.

We need to stimulate the discussion between Port Health Authorities on this issue and to conduct relevant research. This should not only include the question of a risk ranking of ships, but also the conduct of ship visits to grant “free pratique” and the frequency of ship visits.

While there is a lot of uncertainty in this areas, the experience of the Hamburg Port health shows, that the responsible Port Health Officer and Port Medical Doctor is more likely to act in confidence in case of a public health risk on board if his is well acquainted with the ship. Also, it is our experience that these ship visits or “routine inspections” serve as an important tool to disseminate information and health counselling, build trust and detect public health risks on board which have not been notified. The presence of the Port Health Service onboard ships supports a bettering of sanitary standards and medical care. It is a preventative measure in the best sense.

Communicating these arguments to visit ships for control and prevention of public health risks is a necessity to argue for an appropriate level of trained staff and equipment in a given service.

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