



## Ship Sanitation Inspection and Issuance of Ship Sanitation Certificate

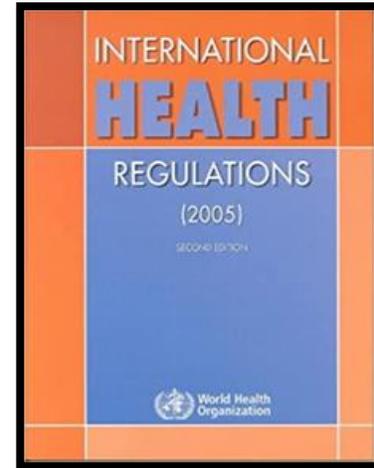
# Issuance of a Ship Sanitation Certificates

# Learning Content

- **Ship Sanitation Certificate and IHR**
- **The WHO Handbook for Issuance of Ship Sanitation Certificates**
- **Control and Exemption Certificate**
- **Completion of Ship Sanitation Certificates**
- **Evidence Report Form**
- **Extension of Ship Sanitation Certificates**

# Ship Sanitation Certificates

- SSC are issued in accordance with to **IHR ‘Article 39’** and **‘Annex-3’**
- It is a useful tool for public health risk assessment on board ships
- SSC provide a **globally standardized inspection process.**
- An instrument to minimize the risk of international spread of disease
- **A common way to communicate among ports** on public health events
- Promote public health protection while avoiding unnecessary interference with international traffic and trade



# Ship Sanitation Certificates

- The SSC applies to **all ships in international voyage** (inland or seaports).
- SSC issued by authorized ports according to their authorization.
- **An obligation for the Master/Captain** to provide a valid SSC on board.
- **A right of a State Party** to require it by default or only when there is a public health risk detected.
- **Valid for 6 months** and may be **extended 1 month**.

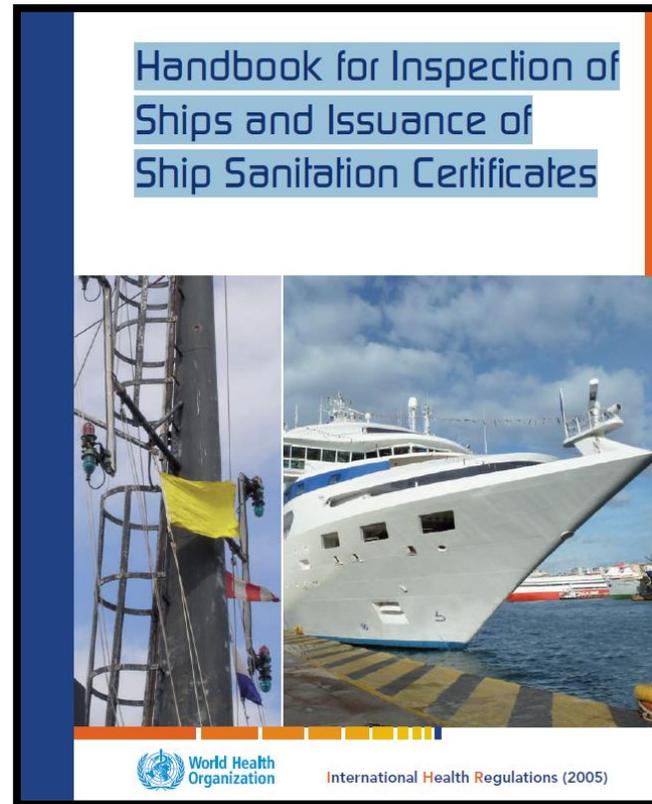




# WHO Handbook

**PART A: INSPECTION SYSTEM  
REQUIREMENTS**

**PART B: CHECK LISTS FOR  
SHIP INSPECTION**



<https://www.who.int/publications/i/item/handbook-for-inspection-of-ships-and-issuance-of-ship-sanitation-certificates>

- **Reference material for port health officers**
- **Guidance for:**
  - Performing the inspection
  - Completing the certificates
  - Applying public health measures
- **It can be used along with:**
  - **Guide to Ship Sanitation**
  - **International Medical Guide for Ships**

# Part B: Check lists for Ship Inspection

Evidence found and document reviewed

Control measures and corrective actions

Code of the areas

Code of Areas	Inspection results: evidence found, sample results, documents reviewed	Control measures and corrective actions	Required	Recommended
<b>1.1 Construction</b>				
1.1.1 <input type="checkbox"/>	Surfaces and fixtures not properly sealed or difficult to clean.	Accommodation should be constructed of material that is easily sealed and cleaned.		<input type="checkbox"/>
1.1.2 <input type="checkbox"/>	Accommodation constructed of unsuitable material that creates conditions for potential infestation by vectors.	All accommodation to be kept free from vector entry.		<input type="checkbox"/>
1.1.3 <input type="checkbox"/>	No window available or ventilation system inadequate, which affects the health of occupants.	Adequate ventilation system or properly screened window should be in place, especially in sleeping rooms and mess rooms, to prevent the spread of disease. Adjust ventilation dependent on climate in which ship is sailing.		<input type="checkbox"/>
1.1.4 <input type="checkbox"/>	No heating system.	Provide adequate heating system.		<input type="checkbox"/>
1.1.5 <input type="checkbox"/>	Sleeping rooms for crew or passengers constructed from inferior materials.	Provide separate sleeping rooms constructed of steel or other approved substance; rooms must be watertight and gas-tight.		<input type="checkbox"/>
1.1.6 <input type="checkbox"/>	No toilet facility available for crew members.	Provide toilet facility for crew members, either in their quarters or in a common lavatory outside individual quarters.	<input type="checkbox"/>	
1.1.7 <input type="checkbox"/>	Bathrooms or shower rooms not provided.	Equip sleeping rooms with private or common bathroom, including toilet.		<input type="checkbox"/>

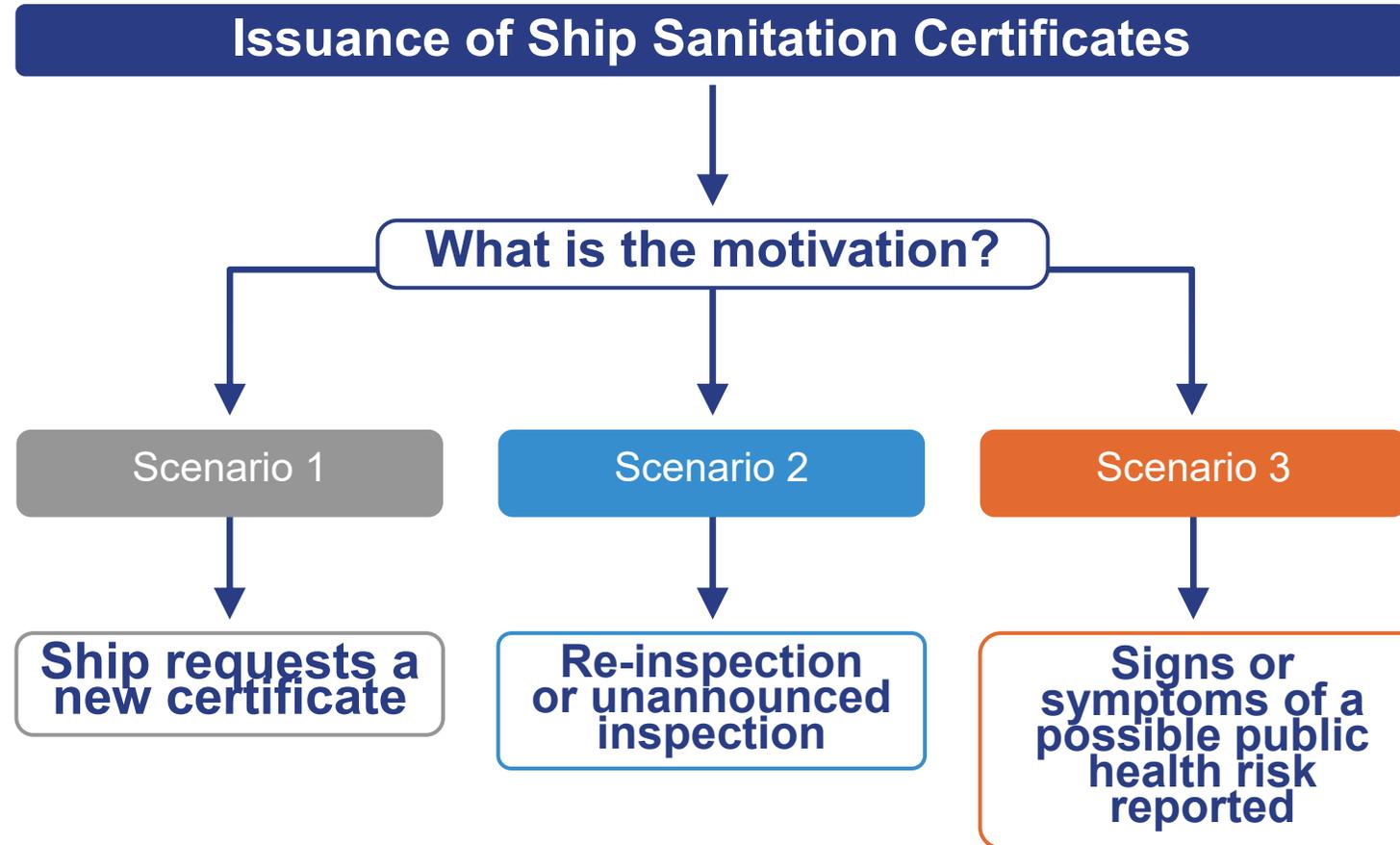
**Recommended**

- Public health best practices
- Preventive measures
- To be followed by the crew

**Required**

- Founded in existing international regulations
- Serious and direct danger
- To be adopted immediately

# Motivation for Issuing SSC





# Ship Sanitation Control Certificate (SSCC)

- Used when **evidence of a public health risk**, including sources of infection and contamination, is detected on board.
- After required **control measures have been satisfactorily completed**.

T.C. SAĞLIK BAKANLIĞI  
TÜRKİYE HÜDÜT VE SAHİLLER SAĞLIK GENEL MÜDÜRLÜĞÜ

REPUBLIC OF TÜRKİYE  
MINISTRY OF HEALTH  
GENERAL DIRECTORATE OF HEALTH  
FOR BORDERS AND COASTS OF TÜRKİYE

GEMİ SAĞLIK KONTROLÜNDEN MUAFİYET SERİFİKASI / GEMİ SAĞLIK KONTROL SERTİFİKASI  
SHIP SANITATION CONTROL EXEMPTION CERTIFICATE / SHIP SANITATION CONTROL CERTIFICATE

Liman / Port of: İSTANBUL Tarih / Date: 14.09.2022  
Bu sertifika, inceleme ve 1) kontrolden muafiyet veya 2) uygulanan kontrol önlemlerinin tutanağıdır.  
(This certificate records the inspection and 1) exemption from control or 2) control measures applied)

Geminin veya İç Su Gemisinin Adı: AREL 5 Bayrağı: TÜRKİYE / TÜRKİYE  
Name of ship or inland navigation vessel: Flag

İncelemenin yapıldığı ambarlar: 0 Ton: Kargo ile doludur/boştur  
At the time of inspection the holds were unladen/loaded Tonnage of Cargo

Gemi Sağlık Kontrolünden Muafiyet Serifikası / Ship Sanitation Control Exemption Certificate  
Gemi Sağlık Kontrol Sertifikası / Ship Sanitation Control Certificate

SEE ATTACHMENT  
A Genel Sıra No: 99000 in attaché belgesi Sıra No: 91  
certificates by the competent authority in the  
Part of Karaköy (Istanbul)  
Kayıt / IMO Numarası: 8511940 2 pages  
Registration / IMO No: 2

Date and signature: 14.09.2022

İncelenen Bölgeler (Sistemler) / (Hizmetler) (Areas, (Systems/Services) Inspected)	Bulunan Kanıtlar 1 (Evidence Found)	Nümunne Sonuçları 2 (Sample Results)	Bakılan Belgeler (Documents Reviewed)	Uygulanan Kontrol Önlemleri (Control Measures Applied)	Tekrar Denetim Tarihi (Re-inspection Date)	Bulunan Durumla İlgili Yorumlar (Comments Regarding Conditions Found)
Gemi Mutfağı (Galley)	NONE	NONE	NONE	NONE	NONE	NONE
Kiler (Pantry)	NONE	NONE	Ship Stores Declaration	NONE	NONE	NONE
Depo(lar) (Storage)	NONE	NONE	Temperature Logs	NONE	NONE	NONE
Ambarlar (Yük) (Holds / Cargo)	NONE	NONE	Cargo Manifest	NONE	NONE	NONE
Yaşam Mahalleri (Quarters)	NONE	NONE	NONE	NONE	NONE	NONE
Mürettebat (Crew)	NONE	NONE	Crew List	NONE	NONE	NONE
Zabitler (Officers)	NONE	NONE	NONE	NONE	NONE	NONE
Yolcular (Passengers)	NOT AVAILABLE	NONE	NONE	NONE	NONE	NONE
Güverte (Deck)	NONE	NONE	NONE	NONE	NONE	NONE
İçme Suyu (Potable water)	YES SEE ATTACHMENT	NONE	NONE	YES SEE ATTACHMENT	14.10.2022	No residual chlorine measured
Atık Su (Sewage)	NONE	NONE	NONE	NONE	NONE	NONE
Balast Tankları (Ballast tanks)	NONE	NONE	Ballast Water Log	NONE	NONE	NONE
Katı ve Tıbbi Atıklar (Solid and medical waste)	NONE	NONE	Garbage Log	NONE	NONE	NONE
Su Birikintisi (Standing water)	NONE	NONE	NONE	NONE	NONE	NONE
Makine Dairesi (Engine room)	NONE	NONE	NONE	NONE	NONE	NONE
Tıbbi Tesisler (Medical facilities)	YES SEE ATTACHMENT	NONE	Medical log/medicine list	YES SEE ATTACHMENT	14.10.2022	Medical chest inadequate
Diğer Belirtilen Alanlar (Other areas inspected)	NONE	NONE	NONE	NONE	NONE	NONE

Uygulanmayan Bölgeleri N/A ile işaretleyiniz. (Indicate when the areas listed are not applicable marking N/A)

Kontrollenmeyen Bölgeler - Gemi Kontrol Önlemlerinden Muafir.  
No evidence found (Ship control or exemption from control measures)  
Düzenleyen Görevlinin Adı ve Ünvanı: Sağlık Müdürlüğü Sağlık Kontrol Birimi SSKA 21311  
Name and designation of the responsible officer: Sağlık Müdürlüğü Sağlık Kontrol Birimi SSKA 21311

İmza ve Mühür, Signature and stamp

Belirtilen kontrol önlemleri aşağıdaki tarihte uygulanmıştır.  
Control measures indicated were applied on the date below  
Tarih: 14.09.2022  
Date

Bu belge <https://belgesozulama.hsgm.gov.tr> adresinden GSI122144694991 belge koduyla veya alttaki karekod okutulurak kontrol edilebilir.  
This document can be verified on <https://belgesozulama.hsgm.gov.tr> with GSI122144694991 document code or by scanning the QR code below.



If necessary, "Evidence Report Form" can be attached.

# Types of Ship Sanitation Certificates

## EXEMPTION CERTIFICATE

1. **No evidence of a public health risk** is found on board

## CONTROL CERTIFICATE

1. **Evidence of a public health risk** on board ship
2. **Control measures have been satisfactorily completed**

**Public health risk:** A likelihood of an event that may *affect adversely* the health of human populations, with an emphasis on one which **may spread internationally** or **may present a serious and direct danger**".



# Ship Sanitation Control Certificate

## The Second Page of Ship Sanitation Control Certificate

ATTACHMENT TO MODEL SHIP SANITATION CONTROL EXEMPTION CERTIFICATE/SHIP SANITATION CONTROL CERTIFICATE

Areas/facilities/systems inspected	Evidence found	Sample results	Documents reviewed	Control measures applied	Re-inspection date	Comments regarding conditions found
<b>Food</b>	NONE	NONE	Cleaning Schedule	NONE	NONE	NONE
Source	NONE	NONE	NONE	NONE	NONE	NONE
Storage	NONE	NONE	NONE	NONE	NONE	NONE
Preparation	NONE	NONE	NONE	NONE	NONE	NONE
Service	NONE	NONE	NONE	NONE	NONE	NONE
<b>Water</b>	NONE	NONE	NONE	NONE	NONE	NONE
Source	NONE	NONE	NONE	NONE	NONE	NONE
Storage	NONE	NONE	NONE	NONE	NONE	NONE
Distribution	NONE	NONE	NONE	NONE	NONE	NONE
<b>Waste</b>	NONE	NONE	NONE	NONE	NONE	NONE
Holding	NONE	NONE	NONE	NONE	NONE	NONE
Treatment	NONE	NONE	NONE	NONE	NONE	NONE
Disposal	NONE	NONE	Garbage Management Plan	NONE	NONE	NONE
<b>Swimming pools/spas</b>	N/A	N/A	N/A	N/A	N/A	N/A
Equipment	N/A	N/A	N/A	N/A	N/A	N/A
Operation	N/A	N/A	N/A	N/A	N/A	N/A
<b>Medical facilities</b>	NONE	NONE	NONE	NONE	NONE	NONE
Equipment and medical devices	NONE	NONE	NONE	NONE	NONE	NONE
Operation	NONE	NONE	NONE	NONE	NONE	NONE
Medicines	NONE	NONE	NONE	NONE	NONE	NONE
<b>Other areas inspected</b>	NONE	NONE	NONE	NONE	NONE	NONE
(Laundry Room)						

Indicate when the areas listed are not applicable by marking N/A.

# Completion of Ship Sanitation Certificate

- **SSC must be issued only after complete inspection of ships.**
- Strike through the non-applicable certificate in the heading.
- **Choose the applicable table (left for exemption, left and right for control)**
- Complete every box in all the columns.
- Write legibly and use **wording from the checklists** of the Handbook.
- **Sign (identifying the inspecting officer) and stamp the certificate.**
- Ensure that English is at least one of the languages on the certificate.

The image shows a sample of a Ship Sanitation Control Certificate. The form is divided into two main sections: 'SHIP SANITATION CONTROL EXEMPTION CERTIFICATE' and 'SHIP SANITATION CONTROL CERTIFICATE'. It includes a table for recording inspection results, with columns for 'Inspection', 'Exemption', and 'Control'. The table lists various items such as 'Water', 'Food', 'Waste', 'Sanitation', etc. There are also sections for 'Remarks' and 'Signature of Inspecting Officer'.

# Completion of Ship Sanitation Certificate

**Areas not applicable**

• **NA**

**If you inspect an area partially**

• **Partially inspected**

**No evidence of public health risk**

• **None or Nil**

**Evidence of public health risk**

• **Yes-see attachment**

**If sample results are not yet available**

• **Sample results pending**

# Evidence Report Form (ERF)

- **2 key purposes:**
  - Attached to the new SSC you issue, where there is not enough space
  - Attached to an existing valid SSC, where evidence of risks are found and a full inspection is not possible

Evidence Report Form					
This form supports the ship sanitation certificate (SSC), and provides a list of evidence found and control measures to be performed.					
When attached to the SSC, each page of this attachment needs to be signed, stamped and dated by the competent authority. If this document is used as an attachment to a pre-existing SSC, this attachment must be noted in the SSC (e.g. by using a stamp).					
Ship's name and IMO no. or registration:		Name and signature of responsible onboard ship officer:			
Name of Issuing authority:		Actual inspection date (dd/mm/yyyy):			
Date of referred SSC (dd/mm/yyyy):		SSC issued in the port of:			
<b>Indicate areas that <u>have not</u> been inspected:</b>					
<input type="checkbox"/> Quarters	<input type="checkbox"/> Galley, pantry, service area	<input type="checkbox"/> Stores	<input type="checkbox"/> Child-care facilities		
<input type="checkbox"/> Medical care facilities	<input type="checkbox"/> Swimming pools/spas	<input type="checkbox"/> Solid and medical waste	<input type="checkbox"/> Engine room		
<input type="checkbox"/> Potable water	<input type="checkbox"/> Sewage	<input type="checkbox"/> Ballast water	<input type="checkbox"/> Cargo holds		
<input type="checkbox"/> Other (e.g. laundry and washing machine)					
<b>Detected health events on board</b>		<input type="checkbox"/> yes	<input type="checkbox"/> No		
Evidence code	Evidence found (brief description according to WHO checklist; draw a line under each item of evidence to ensure items are clearly separated)	Measure to be applied	Required	Recommended	Measure successfully performed (stamp and signature of re-inspecting authority)
Name of Issuing Inspector:		Signature of Issuing Inspector:		Stamp of Issuing authority:	
				Page..... of.....	
IMO, International Maritime Organization; SSC, ship sanitation certificate; WHO, World Health Organization.					

# Completion of Evidence Report Form

Information of SSC to which ERF is attached  
ERF Must clearly cross reference to the SSC

Use code from the Handbook

Clearly state evidence found

Draw lines between entries

Sign and stamp here

Leave this column empty for the next re-inspection

Where measure successfully completed new Inspecting authority stamps and signs this column

Clearly state control measures

**Evidence Report Form**  
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Ship's name and IMO no. or registration: \_\_\_\_\_ Name and signature of responsible onboard ship officer: \_\_\_\_\_  
 Name of Issuing authority: \_\_\_\_\_ Actual inspection date (dd/mm/yyyy): \_\_\_\_\_  
 Date of referred SSC (dd/mm/yyyy): \_\_\_\_\_ SSC issued in the port of: \_\_\_\_\_

**Indicate areas that have not been inspected:**

<input type="checkbox"/> Quarters	<input type="checkbox"/> Galley, pantry, service area	<input type="checkbox"/> Stores	<input type="checkbox"/> Child-care facilities
<input type="checkbox"/> Medical care facilities	<input type="checkbox"/> Swimming pools/spas	<input type="checkbox"/> Solid and medical waste	<input type="checkbox"/> Engine room
<input type="checkbox"/> Potable water	<input type="checkbox"/> Sewage	<input type="checkbox"/> Ballast water	<input type="checkbox"/> Cargo holds
<input type="checkbox"/> Other (e.g. laundry and washing machine)			

**Detected health events on board**  yes  No

Evidence code	Evidence found (brief description according to WHO checklist; draw a line under each item of evidence to ensure items are clearly separated)	Measure to be applied	Required	Recommended	Measure successfully performed (stamp and signature of re-inspecting authority)
2.3.3 <input type="checkbox"/>	Absent or inappropriate facilities for storing potable water and ice for use in food and drinks.	Ensure appropriate facilities for storage and distribution of an adequate supply of potable water.	<input type="checkbox"/>		

Name of Issuing Inspector: \_\_\_\_\_ Signature of Issuing Inspector: \_\_\_\_\_ Stamp of Issuing authority: \_\_\_\_\_ Page of: \_\_\_\_\_  
 IMO, International Maritime Organization

# Evidence Report Form (ERF)

T.C. SAĞLIK BAKANLIĞI  
TÜRKİYE HUDUT VE SAHİLLER SAĞLIK GENEL MÜDÜRLÜĞÜ

REPUBLIC OF TÜRKİYE  
MINISTRY OF HEALTH  
GENERAL DIRECTORATE OF HEALTH  
FOR BORDERS AND COASTS OF TÜRKİYE

**Kanıt Rapor Formu** Bu form Gemi Sağlık Sertifikasını tamamlayıcı niteliktedir, bulguları ve alınacak kontrol tedbirlerini içerir.  
**Evidence Report Form** This form supports the Ship Sanitation Certificate (SSC) and provides a list of evidence found and control measures to be performed.

Geminin adı ve IMO numarası veya kaydı: **AREL 5**  
(Ship's name and IMO no. or registration)

Gemideki yetkili gemi memurunun ismi ve imzası:  
(Name and signature of responsible onboard ship officer)

Düzenleyen makâmın adı (Name of issuing authority):  
**KARAKOY SAHİL SAĞLIK DENETLEME MERKEZİ**  
KARAKOY HEALTH CONTROL CENTER

Denetim tarihi (gg/aa/yyyy): 14.09.2022  
(Actual inspection date (dd/mm/yyyy))

Atıfta bulunulan GSS tarihi (gg/aa/yyyy): **14.09.2022 / 14 Sep 2022**  
(Date of referred SSC (dd/mm/yyyy))

GSS'nin düzenlendiği liman ismi (SSC issued in the port of):  
KARAKOY (ISTANBUL) PORT

Denetim yapılmayan alanları belirtiniz (Indicate areas that have not been inspected):

<input type="checkbox"/> Yaşam alanları (Quarters)	<input type="checkbox"/> Mutfak, kiler, servis alanı (Galley, pantry, service area)	<input type="checkbox"/> Depolar (Stores)	<input checked="" type="checkbox"/> Çocuk bakım üniteleri (Child-care facilities)
<input type="checkbox"/> Tıbbi bakım tesisleri (Medical care facilities)	<input checked="" type="checkbox"/> Havuzlar/spalar (Swimming pools/spas)	<input type="checkbox"/> Katı ve tıbbi atık (Solid and medical waste)	<input type="checkbox"/> Makine dairesi (Engine room)
<input type="checkbox"/> İçme suyu (Potable water)	<input type="checkbox"/> Pissu (Sewage)	<input type="checkbox"/> Balast suyu (Ballast water)	<input type="checkbox"/> Yük ambarları (Cargo holds)
<input type="checkbox"/> Diğer (örn. çamaşırhane vb) (Other e.g. laundry and washing machine)			

Gemide tespit edilen sağlık olayları (Detected health events on board):

<input checked="" type="checkbox"/> Evet (Yes)	<input type="checkbox"/> Hayır (No)
--	-------------------------------------

Kanıt Kodu (Evidence Code)	Bulunan kanıtlar (DSÖ'nün kontrol listelerine göre kısa bir açıklama) (Evidence found (brief description according to WHO checklist))	Uygulanacak tedbir (Measure to be applied)	Gerekli (Required)	Önerilen (Recommended)	Başarılı bir şekilde uygulanan tedbir (tekrar denetim yapan makâmın kaşe ve imzası) (Measure successfully performed (stamp and signature of re-inspecting authority))
5.3.1	Size, type and storage of medical chest inadequate to diagnose, treat and control public health risks on board.	Supply adequate medications and/or equipment according to IMGS (3rd ed.) or flag-state requirements and MFAG if dangerous goods are on board.	<input checked="" type="checkbox"/>		
9.8.5.	There is no chlorine in the system during chlorination.	Free chlorine level should be between 0.5 mg/l and 1.0 mg/l during disinfection (consider national standards) and at the point of delivery, the minimum should be 0.2 mg/l.		<input checked="" type="checkbox"/>	

Düzenleyen Denetmenin Adı (Name of issuing inspector): **Yahya ALAWESE**  
Sağlık Memuru (Health Inspector) Sicil: 21311

Düzenleyen Denetmenin İmzası (Signature of issuing inspector)

Düzenleyen Makâmın Kaşesi (Stamp of issuing authority)

Sayfa No: 1 (Page of)

Evidence Report Form

This form supports the ship sanitation certificate (SSC), and provides a list of evidence found and control measures to be performed. When attached to the SSC, each page of this attachment needs to be signed, stamped and dated by the competent authority. If this document is used as an attachment to a pre-existing SSC, this attachment must be noted in the SSC (e.g. by using a stamp).

Ship's name and IMO no. or registration: **Rotterdam IMO no. 3333333**

Name and signature of responsible on board ship officer:  
**Bransilav Ivanovic, Master B. Ivanovic**

Name of issuing authority: **Lumphini Port Health Authority, Thailand**

Actual inspection date (dd/mm/yyyy): **13/05/2022 (13<sup>th</sup> May 2022)**

Date of referred SSC (dd/mm/yyyy): **13/05/2022 (13<sup>th</sup> May 2022)**

SSC issued in the port of: **Lumphini, Thailand (THLUM)**

Indicate areas that have not been inspected:

<input type="checkbox"/> Quarters	<input type="checkbox"/> Galley, pantry, service area	<input type="checkbox"/> Stores	<input checked="" type="checkbox"/> Child-care facilities N/A
<input type="checkbox"/> Medical care facilities	<input checked="" type="checkbox"/> Swimming pools/spas N/A	<input type="checkbox"/> Solid and medical waste	<input type="checkbox"/> Engine room
<input type="checkbox"/> Potable water	<input type="checkbox"/> Sewage	<input type="checkbox"/> Ballast water	<input type="checkbox"/> Cargo holds
<input type="checkbox"/> Other (e.g. laundry and washing machine)			

Detected health events on board  Yes  No

Evidence code	Evidence found (brief description according to WHO checklist; draw a line under each item of evidence to ensure items are clearly separated)	Measure to be applied	Required	Recommended	Measure successfully performed (stamp and signature of re-inspecting authority)
2.2.1	<u>There was no soap present at the Galley Wash Hand basin.</u>	Provide Soap at the Galley Wash Hand Basin.	<input checked="" type="checkbox"/>		
9.1.3	<u>No Water Safety Plan was available.</u>	Implement a Water Safety Plan, including all critical procedures influencing potable water quality (e.g. bunker procedure, ship water system)	<input checked="" type="checkbox"/>		
13.1.1	<u>2 rat guards were missing.</u>	Place 2 rodent proof guards on the relevant mooring lines to prevent rodents from boarding the ships.	<input checked="" type="checkbox"/>		

Name of issuing inspector: **M.C. Walker**

Signature of issuing inspector: **M.C Walker**

Stamp of issuing authority:

Page 1 of 1

# Extension of SSC

**Validity of SSC can be extended for up to a maximum of 30 days**

- **When inspection or control measures cannot be carried out** and if there is no evidence of infection or contamination.
- Allows a ship to reach a port at which the inspection can be performed.
- **Only valid certificates can be extended.**
- Extension start from the expiry date of the existing certificate
- **Using of an ‘extension stamp’ on SSC**

<b>EXTENSION</b>
The validity of this certificate has been extended till ___/___/____ (dd/mm/yyyy) (max. 30 days after expiry date) by the competent authority in the <b>Port of XXXXXXXXXX.</b>
Date and signature: _____

# Inspection - Lessons Learned

- **Invalid Ship Sanitation Certificates**
  - Unauthorized ports/companies issue SSC
  - Extension of expired SSC
  - Old deratting certificate (IHR 1969) still being issued
  - Using different model of SSC (Annex 3)
- **Lack of necessary information on SSC**
  - Type of SSC not specified
  - Missing stamp, ERF, name of port, ship information, date of issuance
- **Lack of knowledge about IHR, ship inspection and SSC**

THANK YOU