GUIDANCE FOR THE IMPLEMENTATION OF THE 2010 MANILA AMENDMENTS

Medical examination requirements, including colour vision testing

Submitted by the International Maritime Health Association (IMHA)

SUMMARY

Executive summary: This document provides information on the outcome of the Experts' workshop held in Kobe, Japan, from 20 to 21 January 2014 to review the currently available options for colour vision testing and to recommend valid alternatives to those currently listed. The workshop took place following the publication of STCW.7/Circ.20 on Interim guidance on colour vision testing. The workshop reviewed the currently available colour vision tests and their validity, and considered the steps needed to produce more definitive guidance on the criteria to be used for assessing the adequacy of colour vision for navigational lookout duties. The workshop report notes that it is essential to first quantify the risks from deficient colour perception in order to set valid criteria for the issue of certificates of fitness. Progress in meeting other requirements for the issue of medical certificates to seafarers is also summarized.

Strategic direction: 5.2

High-level action: 5.2.2

Planned output: 5.2.2.1

Action to be taken: Paragraph 11

Related documents: STCW.7/Circ.20; STW 44/18 and HTW 1/INF.3

Background

Colour vision tests (table A-I/9)

1 Following the consideration of document STW 44/18 (Canada and the United States), IMO issued circular STCW.7/Circ.20 on Interim guidance on colour vision testing. The promulgation of this guidance delayed the introduction of the methods of confirmatory testing for colour vision in table A-I/9 of the STCW Code pursuant to the 2010 Manila
Amendments, because some of the test methods listed were no longer available or were impractical in some jurisdictions. It was recognized that work was required to specify acceptable test methods to replace those no longer available.

2 In this context, IMHA provides information on the Experts’ workshop held in Kobe, Japan, from 20 to 21 January 2014 to review the currently available options for such testing and to recommend valid alternatives to those referred to in table A-I/9. This review included some of the newer screen-based tests referred to in STCW.7/Circ.20. The workshop identified that further study was required to determine the threshold of colour deficiency below which there was a risk of safety critical errors under the conditions of modern navigational lookout duties. This is because the screen-based tests that are the preferred methods for future use quantify the level of colour perception rather than providing arbitrary pass/fail decisions. With their use, fairer decisions on fitness can be made that reduce the discrimination that can arise from arbitrary test methods, while at the same time maintaining or improving standards of maritime safety.

3 The current criteria in STCW Code, table A-I/9, give reference to the standard CIE 143:2001, the International Recommendations for Colour Vision Requirements for Transport issued by the Commission Internationale de l’Eclairage (CIE) in 2001. In the light of the recommendations from the Kobe workshop, the CIE has set up a technical committee to review and update the recommendations in CIE 143:2001. However, due to various delays, this work has only now commenced. It is anticipated that valid evidence on the safety critical threshold for colour deficiency for navigational lookout duties in present day shipping will be needed by the CIE technical committee. An investigation to determine this threshold would require industry support. The outcomes from this investigation and from the subsequent update of CIE 143:2001 could be expected to be submitted for consideration by the HTW Sub-Committee as the basis for revision of STCW Code, table A-I/9.

Compatibility of medical examination procedures with requirements of the 2010 Manila Amendment to the STCW Code (STCW Code, section A-I/9)

4 Information available through IMHA members suggests that a considerable number of the Parties to the STCW Convention are introducing medical fitness criteria based on the ILO/IMO Guidelines on the Medical Examination of Seafarers, thus ensuring compatibility with the requirements of the 2010 Manila Amendments to the STCW Convention and Code, and the ILO Maritime Labour Convention. A few have adopted minimalist legal requirements, while others have gone beyond the guidelines to maintain linkages with other existing national requirements.

5 Several European states are working towards harmonizing their national systems for the issuance of seafarers’ medical certificates. Fitness criteria and training for medical examiners are being brought together with the aim that certificates issued by all participants will be recognized as fully equivalent.

6 However, there are still many Parties who have yet to take steps to revise medical examination procedures to align them with the requirements of the 2010 Manila Amendments to the STCW Convention and Code, and the Maritime Labour Convention, 2006. These Parties may perhaps require further guidance and maritime health expertise, for instance from members of IMHA, on the appropriate revisions needed to meet the requirements of the STCW Convention, 1978, as amended, taking account of local patterns of disease and national health care systems.

IMHA has produced a Handbook for Seafarer Medical Examiners, which Parties may recommend as a supplement to the guidance on procedures and on fitness criteria they provide to medical practitioners they approve to perform seafarers' medical examinations. The Textbook of Maritime Medicine produced by the Norwegian Centre for Maritime Medicine is a source of training and reference material for seafarer medical examiners.

**Quality assurance of medical certification procedures (STCW Convention, Regulation I/8)**

A few States have established quality assurance systems related to issuance of their national medical certificates and some employers and their insurers audit the quality standards of those clinics that they employ in crew supplying countries. There is also one generally available set of standards for use either by clinics to obtain accreditation or for adoption by maritime authorities and others as part of their quality assurance procedures.

The quality assurance of clinical procedures does not readily lend itself to the sort of approaches used in other areas of quality assurance, as peer review of individual clinical decisions, in addition to assessment of procedures and records, plays an important part in evaluating performance. Maritime health expertise and advice may be needed by Parties to develop frameworks for quality assurance that can be adopted to meet the requirements of the STCW Convention.

IMHA invites the Sub-Committee to note:

1. the progress on implementing medical examination procedures and associated quality assurance requirements, and the benefit of expert maritime health expertise and advice to assist with implementation of the STCW Convention requirements related to seafarers medical examination and certification; and

2. the need for a study to develop a valid colour vision threshold for those undertaking navigational lookout duties, which would enable CIE or other relevant bodies to recommend the test criteria to be used as the basis for the issue of medical certificates compliant with the STCW Convention and MLC, 2006.

**Action requested of the Sub-Committee**

The Sub-Committee is invited to consider the above information, in particular paragraph 10, and decide, as appropriate.