

DETAILS OF INSPECTION VIOLATIONS

NO.	LOCATION	REF.	POINTS	CRITICAL	DESCRIPTION
1	POTABLE WATER	03	5	Yes	<p>THE HALOGEN LEVEL IN THE BUNKER LINE WAS MEASURED AT 0.84 MG/L. BUNKERING HAD BEEN IN PROGRESS FOR APPROXIMATELY 1 HOUR.</p> <p>chief engineer : the halogen level in the bunker line were immediately increased to 2,0 mg/l</p> <p>standing order: before bunkering fresh water, halogen test will be carried out and the halogen level in the bunker line will beset to the level of 2,0 mg/l</p>
2	POTABLE WATER	06	0	No	<p>THE VESSEL DID NOT HAVE A COPY OF THE MOST RECENT MICROBIOLOGICAL REPORT FROM EACH PORT WHERE WATER WAS BUNKERED, NOR WAS THE VESSEL CONDUCTING MICROBIOLOGICAL TESTING OF THE SHORE SIDE WATER BEFORE BUNKERING IN THOSE PORTS WHERE A WATER QUALITY REPORT WAS NOT AVAILABLE.</p> <p>chief officer: water bunker order send to port agencies will be combined with request for microbiological report. if the report is not available the microbiological test will be done on board by the nurse.</p>
3	POTABLE WATER	08	0	No	<p>A HALOGEN DEMAND TEST WAS NOT DONE OF THE SHORE WATER BEFORE BUNKERING TO DETERMINE THE QUANTITY OF HALOGEN NEEDED TO ENSURE THE 2.0 MG/L RESIDUAL.</p> <p>chief officer: before bunkering fresh water, halogen test will be carried out and recorded.</p>
4	POTABLE WATER	08	0	No	<p>THE VESSEL WAS TESTING THE REDUCED PRESSURE PRINCIPLE BACKFLOW PREVENTER (RPZ) BUT ONLY RECORDING THE RESULTS AS "OK". PRESSURE MEASUREMENTS ARE REQUIRED.</p> <p>chief engineer: measuring method has been changed immediately. the reduced pressure principle backflow preventer. pressure measuring are carried out now.</p>
5	SWIMMING POOL	10	0	No	<p>THERE WAS NO SHEPHERD'S HOOK AVAILABLE AT THE SWIMMING POOL. ALSO, THE LIFE RING DID NOT HAVE A LENGTH OF LINE AT LEAST 1.5 TIMES THE LENGTH OF THE SWIMMING POOL.</p> <p>chief officer: a life ring with line (the length of the line is 2 times the length of the swimming pool) and a shepherd's hook is fixed next to the swimming pool.</p>
6	SWIMMING POOL	10	0	No	<p>THERE WAS NO WRITTEN DOCUMENTATION OF THE CALIBRATION CHECKS OF THE HALOGEN ANALYZER.</p> <p>THE HALOGEN LEVEL IN THE SWIMMING POOL WAS ABOVE THE ACCURATE DETECTION LEVEL OF THE DIGITAL TEST KIT AND NO OTHER TEST KIT WAS AVAILABLE. THIS MADE CALIBRATION OF THE ANALYZER DIFFICULT.</p> <p>chief engineer: the documentation of the calibration check of halogen analyzer changed. the result of the calibration is documented in additional. a new gauge in addition orders of with measurement range 0 – 4,5 mg/l halogen level.</p>
7	MAIN GALLEY / POT WASH AREA	20	0	No	<p>PROVIDE A SPLASH SHIELD ON THE SIDE OF THE CLEAN POT STORAGE SHELVES BY THE HANDWASHING STATION OR RELOCATE THE SOAP DISPENSER AND WASTE CONTAINER TO THE OTHER SIDE OF THE HANDWASHING SINK TO PREVENT THE POTENTIAL CONTAMINATION OF THE CLEAN POTS AND PANS.</p> <p>chief engineer: a stainless steel splash shield for the clean pot storage shelve by the hand wash sink is on order.</p>
8	POT WASH	22	0	No	

THE SINK MOUNTED THERMOMETER ON THE SANITIZING SINK WAS NOT OPERATIONAL.

chief engineer: a new thermometer for the sanitizing sink is on order.

9 **POT WASH AREA**

22

0

No

THERE WAS NO WAY FOR THE POT WASHERS TO TIME THE 30 SECONDS REQUIRED FOR THE IMMERSION OF THE CLEAN POTS AND PANS IN THE SANITIZING SINK.

a clock is fixed next to the pot wash to time the 30 seconds required for sanitizing process.

10 **BARS - GENERAL**

36

0

No

ADDITIONAL LIGHTING WAS INSTALLED IN THE BAR AREAS BUT THE LEVEL APPEARED TO BE LESS THAN 220 LUX.

the lux are checked by the chief electrician and additional illumination are installed.

11 **CORRECTIVE ACTION STATEMENT**

*

0

No

IN DEVELOPING THE CORRECTIVE ACTION STATEMENT FOR THIS INSPECTION, CRITICAL-ITEM DEFICIENCIES (DESIGNATED WITH YES IN CRITICAL COLUMN (WORTH 3 - 5 POINTS), WHETHER DEBITED OR NOT, SHOULD INCLUDE STANDARD OPERATING PROCEDURES AND MONITORING PROCEDURES IMPLEMENTED TO PREVENT THE RECURRENCE OF THE CRITICAL DEFICIENCY.

PREPARE CORRECTIVE ACTION STATEMENT AS A WORD PROCESSING OR SPREADSHEET FILE WHICH WILL BE SENT TO USPHS / VSP AS AN EMAIL MESSAGE ATTACHMENT. PLEASE EMAIL CORRECTIVE ACTION STATEMENT TO: VSP@CDC.GOV

USE EMAIL MESSAGE SUBJECT LINE: SHIP NAME - CAS - [INSERT INSPECTION DATE] .