

CIVIL AVIATION AUTHORITY, BANGLADESH



AVIATION PUBLIC HEALTH INSPECTORS' HANDBOOK

**1st Edition
APRIL 2015**

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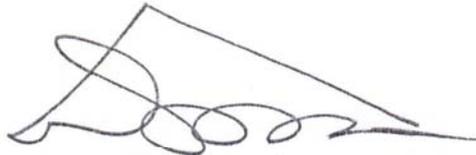
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FOREWORD

As per the World Health Organization (WHO) direction it is the prime responsibility of the contracting State to emphasize on to the health of the travellers and every effort is to be made to improve upon the hygiene and sanitation of the airports through which mass movement of population is undertaken. The Public Health Inspectors' Handbook has been prepared with a view in achieving high standards of hygiene and sanitation, to protect health of the passengers and crew engaged in global and national air transportation. It covers a wide area of inspection items starting from usage of potable water to the food, waste disposal, cabin sanitation, management of medical emergency, cleaning and hygiene of airlines service area with the ultimate goal of assisting all types of airports and aircraft operators.

This handbook outlines the directions, processes and procedures for conducting inspections in the field of public health in aviation. It is basically a guidance material for public health Inspectors. Adherence to the guidance herein is imperative and will ensure that inspection policies and procedures are uniformly applied. To maintain overall effectiveness of the inspection activity, the approach to each organization must be transparent, with a high degree of professionalism, using experience, skills as essential ingredients. The aviation community must view the program as one that is fair and equitable in its application.

The Chairman is pleased to approve this handbook. It shall have immediate effect.



Air Vice Marshal M Sanaul Huq, GUP, ndc, psc
Chairman

Civil Aviation Authority, Bangladesh

Date: 04 April 2015

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LIST OF ABBREVIATION

- ACI – Airport Council International
- ANO – Air Navigation Order
- ATM - Air Transport Management
- CAAB - Civil Aviation Authority of Bangladesh
- CARs - Civil Aviation Rules
- CAP - Corrective Action Plan
- CAT – Corrective Action Taken
- CAPSCA - Collaborative Arrangement for the Prevention and Management of Public Health Events in Civil Aviation
- Doc - Document
- DGHS - Director General of Health Services
- ECR - Environmental Conservation Rules
- FSR – Flight Safety and Regulations
- IHR – International Health Regulations
- IATA - International Air Transport Association
- IEDCR - Institute of Epidemiology, Disease control and Research
- MBBS – Bachelor of Medicine and Bachelor of Surgery
- MPH – Masters in Public Health
- PoE - Point of Entry
- PANS – Procedures of Air Navigation Services
- SARPS – Standards and Recommended Practices
- WHO - World Health Organization

CHAPTER 1

INTRODUCTION

1.1 Introduction

The Directorate of Flight Safety and Regulations of the Civil Aviation Authority, Bangladesh (CAAB) is responsible for the health safety oversight functions of travelling passengers, staff of different agencies engaged to perform their duties at the designated point of entry and of all domestic and International airlines. The Inspector will carryout inspection of the airports, aircrafts and airlines service areas including the transfer points as per Chicago Convention Article 14 , ICAO health related Annexes 6, 9, 11, 14, PANS –ATM (Doc 4444) , International Health Regulations (2005), World Health Organization (WHO) guidelines for hygiene and sanitation 2009 and other public health related documents. The Inspector is also to comply with the laid down policies and procedures of CARs, relevant ANOs, and Advisory Circulars, Manuals, directives and related documents.

1.2 Statutory Authority

Aviation Public Health Inspector is appointed and authorized by the Chairman of CAAB to carry out public health related inspection in light of ICAO standards and recommended practices and WHO guidelines.

1.3 Staff Requirement

Director Flight Safety and Regulations shall make available requisite number of inspectors in the field of public health for effective conduct of inspection.

CHAPTER 2

JOB DESCRIPTION OF INSPECTOR

2.1 Position of Aviation Public Health Inspector

- (a) **Name of the Office:** Civil Aviation Authority, Bangladesh, Dhaka.
- (b) **Title/ Position:** Aviation Public Health Inspector
- (c) **Directorate:** Flight Safety and Regulations
- (d) **Reporting Officer:** Director, Flight Safety and Regulations

2.2 Duties and Responsibilities

The duties and responsibilities of Aviation Public Health inspectors are laid down in the following sub-paragraphs.

- (a) Public Health Inspectors shall prepare inspection schedules and conduct periodic inspections at various airports and airlines establishment to ensure the performance and maintenance of said establishment and meet the national requirements and standards stipulated in CARs and other such documents as mentioned in para 1.1
- (b) Inspection reports to be made fairly, truthfully and accurately with due professional care applying diligence and judgment. They shall remain impartial and objective with an evidence-based systematic process to reach reliable conclusions.
- (c) To oversight that airport authority complies with Annex 1.B of International Health Regulations (2005).
- (d) To ensure that specific measures for vector borne diseases as per Annex 5 of International Health Regulations have been taken.
- (e) To ensure that all the establishments within 400 meters from the PoEs are kept vector free.
- (f) To ensure that state keeps sufficient number of International Vaccination Certificates available in the airport health department as per Article 36 and Annex 6 of IHR (2005).
- (g) To ensure that state makes available adequate stocks of public health passenger locator cards for use at all International airports of Bangladesh for distribution to aircraft operators for completion by passengers and crewmembers for contact tracing when a suspected case of communicable disease is carried on board the aircraft.
- (h) To ensure that state develops national public health emergency plans for designated international airports.
- (j) To oversight that cabin crews are having sufficient knowledge to identify and manage a case of communicable disease on board an aircraft as per IATA guidelines and IHR (2005) (By interview during inspection).

- (k) To ensure that safe potable water is supplied at international airports and in the aircraft as per the laid down national standard conforming Environmental Conservation Rules – 97 (ECR 97) and as per Annex 5 of WHO guide to hygiene and sanitation in aviation (2009).
- (l) To ensure that aircraft carrying passengers are hygienically cleaned with approved cleaning products and insecticides as per Annex F of WHO guide to hygiene and sanitation in aviation.
- (m) To ensure that airports and aircrafts are kept in a sanitary condition at all times.
- (n) To oversight that airports are designed and constructed in a manner that facilitates proper cleaning and disinfection (Guidelines 3.2 of guide to hygiene and sanitation in aviation).
- (p) To ensure that proper cleaning equipments and chemicals are available in the international airport for cleaning purpose.
- (q) To oversight that in-flight meal served to the passengers on board a commercial aircraft is prepared under most aseptic condition and delivered to the aircraft with all precautionary measures to avoid contamination.
- (r) Aviation Public Health Inspectors will carry out any other duty as assigned by the Chairman from time to time on surveillance/oversight functions.
- (s) Public Health Inspector is to conduct physical inspection of the designated area to oversight the hygiene and sanitary condition, development of core capacities at the airports as per International Health Regulations (IHR) 2005 and complying with the ICAO health related documents. Facts may be revealed also by conducting interviews with staff of the unit, section or division being inspected and reviewing documentation for the inspection report.

2.3 Qualifications of Public Health Inspectors

Educational Qualifications

- (a) Having MBBS degree from any recognized university.
- (b) Masters in public health (MPH)
- (c) Qualified in Aviation Medicine

Additional Qualifications and Experience

- (a) Working experience on Public Health for at least 10 years.
- (b) Working experience on Aviation Medical Service.
- (c) Capable of working independently without any assistants.
- (d) Personally to win the respect and confidence of the operators.
This would require a reasonable level of tact, understanding, firmness, impartially, integrity and an exemplary personal conduct both in the office and at the operator's premises.

2.4 Areas to be inspected

Public Health Inspectors will carry out inspections at the following offices/Areas:

- (a) All the civil airports (domestic and international) in Bangladesh,
- (b) All the commercial aircrafts,
- (c) All the airlines service area and transfer points,
- (d) All the establishments within 400 meters from the Point of Entry (PoE).

2.5 Regulatory documents

The activities of Public Health Inspectors will be governed by the following rules, regulations and directives:

- (a) Civil Aviation Rules 1984 and any revisions thereafter.
- (b) Air Navigation Order, Part - E
- (c) International Health Regulations (2005)
- (d) WHO guide to hygiene and sanitation in aviation, 3rd edition (2009)
- (e) ICAO Annex 6 (attachment B)
- (f) ICAO Annex 9 (Chapter 8)
- (g) ICAO Annex 11 - Air Traffic Services.
- (h) Procedures for Air Navigation Services – Air Traffic Management (PANS –ATM, Doc 4444)
- (i) ICAO Annex 14
- (j) Doc 9137, Part 1 and Part 7
- (k) IATA Medical Manual and ACI guidelines

- (l) Other ICAO health related documents as applicable.
- (m) Other relevant directives and instructions that may be issued from time to time by the Chairman or the Director, Flight Safety and Regulations.

CHAPTER 3

INSPECTION PROCEDURES

3.1 **Method of Inspection:** The inspection will be conducted as per the following checklists:

- (a) Appendix A: Inspection checklist of airport for evaluating the sanitation status and Implementation of International Health Regulation (IHR) to airports.
- (b) Appendix B: Medical (Cabin) inspection checklist.
- (c) Appendix C: Inspection checklist of aircraft cleaning.
- (d) Appendix D: Inspection checklist of Airlines service areas or transfer point.

Note: The inspection is to be carried out at least twice in a year (1st time inspection and 2nd time follow up inspection). The report is to be endorsed in the above mentioned checklist for onward submission to the concerned authority for Corrective Action Plan (CAP)/Corrective action taken (CAT).

3.2 **Submission of Report:**

- (a) Inspection report shall be submitted to the Director, Flight Safety and Regulations within 10 (ten) working days of conduct of inspection.
- (b) The inspector shall submit the report with corrective action plan. Upon receiving the report, the Director, Flight Safety and Regulations shall forward it to the Chairman to resolve identified deficiencies or safety shortcomings within the agreed time period.

CHAPTER 4

TRAINING OF PUBLIC HEALTH INSPECTORS

4.1 Inspectors Training

- (a) Training shall be arranged for public health Inspectors to perform assigned duties by the public health experts at the CAPSCA regional office.
- (b) On – site local training is provided by CAPSCA project.
- (c) Practical training is imparted during assistance visit to airport / state by CAPSCA public health experts.
- (d) Public Health inspectors are encouraged to participate in the training events /workshop/seminar etc organized by CAPSCA.
- (e) Refresher course on public health issues for Aviation Medical examiners in the APAC Region.
- (e) Besides, Director (disease control) and Institute of Epidemiology, Disease Control and Research (IEDCR) of Director General of Health Services (DGHS) under Ministry of Health and Family Welfare arranges training from time to time for the prevention of spread of communicable diseases and management of other public health events in aviation.

CHAPTER 5

PERSONAL ETHICS AND CONDUCT

5.1 Ethics

As Inspectors are always in the public eye, they are expected to exercise good judgment and professional behavior at all times while on and off duty.

5.2 Conduct

An Inspector must observe the following rules of conduct:

- (a) Report for work on time and in a condition that will permit performance of assigned duties
- (b) Maintain a professional appearance, as appropriate, during duty hours
- (c) Exercise courtesy and tact in dealing with co-workers, director and others.

CHAPTER 6

INSPECTOR CREDENTIALS

6.1 Public Health Inspector's Authorization Card

- (a) The Card identifies the Inspector as an Authorized Person and shall be empowered by the Chairman of CAAB for the purpose to perform duties and exercise the powers as Inspector
- (b) An Inspector must display his Authorization Card on his outer garments to be permitted entry into airport secured areas, aircrafts and airlines service areas while working in these areas. He shall wear smart official dress while on duty.
- (c) If the Card is lost, stolen, or damaged, the Inspector should report the occurrence immediately to the nearest Police Station and Director, Flight Safety and Regulations.

CHAPTER 7

CERTIFICATION OF DEATH

- 7.1 Certification of death shall be issued by on duty medical officer of Airport Health Department. Procedure relating to certification of death is as follows:
- (a) The on duty medical officer of Airport Health Department shall issue death certificate in case of death of any passenger in the aircraft or in the airport.
 - (b) When reported from the Airlines or Airport operators, on duty medical officer shall examine the dead body and issue death certificate on the prescribed form.

CHAPTER 8

CONCLUSION

The care of health of the international passengers moving by air transport is the responsibility of the Contracting States who are under legal framework of WHO. As per the ICAO SARPS, Public Health Inspectors oversight the health of the passengers, hygiene and sanitation of the Airports and Aircrafts and to identify and manage outbreaks of diseases and other health issues by conducting Public Health surveillance. The public health department put all necessary endeavors to fulfill the ICAO SARPS for healthy environment in the airports and the aircrafts. All stakeholders must cooperate with the public health department to achieve the health safety of the passengers travelling by air and aircrews engaged in air transport.



Appendix- A

**INSPECTION CHECKLIST FOR EVALUATING THE SANITATION STATUS AND
IMPLEMENTATION OF INTERNATIONAL HEALTH REGULATIONS (IHR)
TO AIRPORTS**

- Ref: A. International Health Regulations (IHR-2005), Annex-1.B
 B. ICAO Annex 9 chapter 8. E
 C. ICAO Annex 14 Doc 9137
 D. WHO guide to hygiene and sanitation in Aviation, 3rd edition, 2009)

Name of the Airport :	
Inspection date:	
Name of the Inspector:	
Regulatory Authority :	

**Satisfactory =S Satisfactory with Comments= SC Unsatisfactory= U Not Checked
=NC**

SI NO	DETAILS	S/SC/U/NC	Remarks
Required Core Capacities at Point of Entry (PoE) - at all times			
1	Does designated airport provide appropriate medical services including diagnostic facilities for prompt assessme & care of ill travelers?		
2	Does it provide adequate staff, equipment and premise for care of the affected passengers?		
3	Does it provide access to equipment and personnel for the transport of ill travelers to the designated hospital / medical facilities?		
4	Does it provide trained personnel for inspection of Aircraft?		
5	Does it ensure a safe environment for travelers using PoE facilities including ? 1. potable water supplies 2. Eating establishments 3. Flight catering facilities 4. Public wash rooms 5. Appropriate solid and liquid waste disposal services 6. Other potential risks areas by conducting inspection programme.		

6	Does it provide a programme and trained personnel for the control of vectors and reservoirs in and around the PoE?		
Required Core Capacities at Point of Entry during Public Health Emergency of International Concern (PHEIC)			
7	Has the State established a public health emergency contingency plan and nominated a Focal Point for point of entry, public health and other agencies?		
8	Does it provide assessment and care for affected travelers or animals by medical and veterinary facilities (for their isolation and treatment)?		
9	Does it provide appropriate space, separate from other travelers, to interview suspect or affected persons?		
10	Does it provide for quarantine of suspect travelers, in facilities away from the point of entry?		
11	Are there measures for derating, disinsecting, disinfecting & decontaminating baggage, cargo, containers, conveyances, goods or postal parcel?		
12	Does it apply entry or exit controls for arriving and departing travelers?		
13	Does it provide access of designated equipment and trained personnel with appropriate personal protection for the transfer of infected travelers?		
Facilities at airport fire station			
14	Are the resuscitation Ambulance facilities available to face airport emergency?		
15	Is casualty care equipment including compresses, bandages, oxygen etc available for management of smoke inhalation casualties and trauma patients?		
16	Are the fire fighters trained on first aid treatment?		
17	Is the airport health department have following facilities?		
(1)	Canopies and their covers		
(2)	Collapsible tables, bags with towels and blankets		
(3)	Large ground sheets		
(4)	Portable basins and stands		
(5)	Stretchers having modifications for mini buses and buses		
(6)	Trailer full of medical equipment (stretchers, boxes of medical stores, cans for water etc)		
18	Did the doctors of airport health department attend any medical emergency during the reported period?		
19	Was it timely and efficiently attended? What was the response		

	time to attend the emergency?		
20	Does it have adequate equipment to handle cases of cardiac arrest and other types of injuries and illnesses?		
21	How many patients were attended by doctors during the reported period and how they were handled?		
22	Did any death of passenger/ airport employee occur during the reported period and how it was handled?		
23	Are there sufficient oxygen and cardio resuscitation (CPR) facilities with trained personnel available?		

ICAO Annex -9 (Facilitation)			
24	Does the State (Airport health department) have International Vaccination Certificates available for the passengers?		
25	Does the State have available adequate stocks of “public health passengers locator card” for distribution to aircraft operators, for completion by passengers and crew when cases of suspected communicable diseases are on board the aircraft?		
Sanitary Condition of the Airport : As Per WHO guide to hygiene and sanitation in aviation			
Public Areas and Rooms			
26	Is the hand washing sign displayed for good hand washing practices by staff and guests?		
27	Does the staff use disposable wipes for cleaning to avoid cross contamination?		
28	Does the staff use proper chemical sanitizing agent?		
29	Are the handrails, handles, telephones, other hand contact areas, elevators and landings in all passenger corridors cleaned and sanitized frequently ?		
30	Are all the public rooms cleaned/sanitized regularly?		
31	Are the carpets cleaned by steam cleaner?		
32	Are the garbage cans cleaned regularly?		
33	Are the soft furnishings cleaned and sanitized?		
Public Washrooms			
34	Is hand washing sign displayed?		
35	Are the door handles, toilet flushes, faucets (water taps), dryers, counters and any other hand contact areas cleaned and sanitized regularly?		
36	Are the hand dryers or disposable paper towels provided		

	for hand drying?		
37	Are disposable paper wipes provided for cleaning to avoid cross contamination?		
Bars and Lounges			
38	Is the hand washing sign displayed at each hand sink?		
39	Does the staff wash hands frequently		
40	Are hand sanitizers provided to staff for good hand washing practices?		
41	Are snacks provided in small individual containers?		
42	Are condiments (salt and pepper) containers that served by staff cleaned frequently (recommended to clean between each customer use)?		
43	Are disposable paper wipes used for cleaning?		
44	Are all tables and chairs cleaned and sanitized after each shift and after closing?		
GENERAL HYGIENE AND SANITATION OF THE AIRPORT			
45	Is the exhaust supplied to the toilets area serviceable?		
46	Is the drainage system all right?		
47	Are the lighting facilities in the airport as well as washroom sufficient?		
48	Is the ceiling of toilets all right?		
49	Are the mosquitoes and flies in the airport under control/?		
50	Are the dryers serviceable?		
51	Is adequate hand washing soap / liquid dispensers available?		
52	Are the waste bins cleaned?		
53	Are the toilets for use by the disabled passengers properly constructed?		
54	Are adequate chemicals and equipment available for cleaning the airport?		
55	Are Proper storage facilities for cleaning items available?		
56	Are sufficient toilet tissues available in the wash rooms?		
57	Are automatic electric Faucets (water taps) with electronic eyes provided in the washrooms?		

INSPECTOR'S COMMENTS / FINDINGS:		
OVERALL ASSESSMENT		
Satisfactory	Satisfactory with Comments	Unsatisfactory
Date : _____		Inspector's Signature: _____

GP Capt S M Nazmul Anam
Director
Flight Safety and Regulation
CAAB HQ, Kurmitola, Dhaka

**Appendix-B****MEDICAL (CABIN) INSPECTION CHECK LIST**

- Ref: A. ICAO Annex 6, Chapter 6, Attachment-B (Medical Supplies)
B. CAAB, ANO Part –E

Place:	Date and Time:
Operator:	Operator (Chartered/Commercial):
Arriving from:	Flight No:
Departing to :	Flight No:
Aircraft type:	Aircraft Regn No :
Pilot in Command:	First Officer:
Cabin Chief:	Other Cabin Crew:
Inspector / s Name :	

Satisfactory =S Satisfactory with Comments= SC Unsatisfactory = U Not Checked =NC

SL NO	DETAILS	S/SC/U/NC	Remarks
A	FIRST AID KIT (FAK)		
1	Are the First aid kit /s available?		
2	Is the number of first aid kits proportionate to the no of passengers? .		
3	If there is one first aid kit, is its location as close as practicable to an emergency exit?		
4	Are the first aid kits constructed of non flammable material and free of dust and moisture?		
5	Is the red crescent sign displayed prominently and permanently?		
6	Are the words “first aid kit” displayed both in Bengali and English on the kit container?		
7	Are the first aid kits readily accessible to the occupants of the aircraft?		
8	In case of more than one kits, Are they placed in dispersed locations?		
9	Does the first aid kit contain a hand book written both in English and Bengali?		

10	Is there an inventory of contents affixed to the inside of the lid?		
11	Does the first aid kit container have positive seal?		
12	Are the locations of FAK appropriately and conspicuously marked in Bengali and English		
13	Are the contents verified and certified by a medical officer/authorized representative?		
14	Does the certificate affixed on the exterior of the container, exhibit the following information?		
	a. Serial number		
	b. Date of certification		
	c. Expiry date and signature		
	d. Authorization of the person certifying		
B	EMERGENCY MEDICAL KIT (EMK)		
15	Does the aircraft have emergency medical kit?		
16	Is it readily accessible to the crew member?		
17	Is it provided with a positive seal?		
18	Is it provided with a proper inventory of contents?		
19	Does it contain the basic instructions for the use of drugs in the kit?		
20	Is the red crescent mark displayed on the kit container?		
21	Are the words "Emergency Medical Kit" displayed on the kit container both in English and Bengali?		
22	Is stowed securely in a clearly marked location?		
23	Is it constructed of non-flammable material and free from dust and moisture?		
24	Are the contents and serviceability of the contents verified and certified by a medical officer/authorized representative?		
25	Does the certificate affixed on the container have the following information?		
	a. Serial number		
	b. Date of certification		
	c. Expiry date and signature		
	d. Authorization of the person certifying		

C	UNIVERSAL PRECAUTION KIT (UPK)		
26	Does the aircraft have universal precaution kit ?		
27	Is the number of UPK on board adequate? .		
28	Are the kits evenly distributed throughout the passenger cabin?		
29	Are the kits readily accessible to the cabin crew members?		
30	Is the red crescent sign prominently displayed?		
31	Are the words “ Universal Precaution Kit “ displayed both in English and Bengali		
32	Are the contents and serviceability of the contents verified and certified by a medical officer/authorized representative?		
33	Does the certificate affixed to the exterior of the container, have the following information?		
	<ul style="list-style-type: none"> a. Serial number b. Date of certification c. Expiry date and signature d. Authorization of the person certifying 		
D	AED (Automated External Defibrillator)		
34	Does the aircraft have any AED to manage cases of heart attack?		
35	Has any cabin crew got training on the use of AED?		
E	HYGIENE AND SANITATION OF THE AIRCRAFT		
36	Is the general hygienic condition of the aircraft (cockpit/cabin/galleys/toilets) satisfactory?		
37	Does it have any programme available to keep the aircraft regularly and hygienically clean?		
38	Are there appropriate numbers of trained personnel for cleaning available?		
39	Is there appropriate personal protective equipment for use during cleaning available?		
40	Are the adequate cleaning equipment and supplies available?		
41	Are proper disinfectants used for routine cleaning of the aircraft?		
42	Are the facilities available for cleaning aircraft when carrying a patient of communicable disease		

	on Board?		
F	POTABLE WATER		
43	Is aircraft potable water tested regularly?		
44	Is water in the storage tank of the aircraft tested regularly?		
45	Is the test result preserved?		
46	What is the Source of water supplied in the aircraft ?		
47	Is the water supplied in the aircraft for drinking, food preparation or human contact, up to national standard?		
48	How frequently is the aircraft water tested?		
49	Is the quantity of water supplied in the aircraft sufficient for work and service to passengers and crew ?		
G	MISCELLANEOUS		
50	Is the airsickness bag for each passenger available?		
51	Are the airsickness bags containers cleaned and disinfected regularly?		
52	Are the airsickness bags containers stored in the proper designated place (Toilet compartment)?		
53	Are the biohazard bags available?		

INSPECTOR'S COMMENTS / FINDINGS:		
OVERALL ASSESSMENT		
SATISFACTORY	SATISFACTORY WITH COMMENTS	UNSATISFACTORY
Date : _____ Inspector's Signature: _____		

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 Director
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**Appendix- C****INSPECTION CHECKLIST OF AIRCRAFT CLEANING**

Ref: World Health Organization (WHO) Guide to Hygiene and Sanitation in Aviation, Annex-F, 3rd edition, 2009

Place:	Date and Time:
Operator:	Operator(Chartered/Commercial):
Arriving from:	Flight No:
Departing to :	Flight No:
Aircraft type:	Aircraft Regn No :
Pilot in Command:	First Officer:
Cabin Chief:	Other Cabin Crew:
Inspector / s name :	

Satisfactory =S Satisfactory with Comments= SC Unsatisfactory = U Not Checked =NC

Area	SI No	SERVICES	S/SC/U/NC	Remarks
Flight deck	1	Empty waste boxes and ashtrays		
	2	Clean crew tables and glass holders		
	3	Clean stowage areas and racks		
	4	Wipe seats		
	5	Clean floor/Vacuum carpets		
	6	Clean flight deck windows inside		
	7	Clean door and walls		
Cabin	8	Dispose of waste from closets		
	9	Dispose of litters and newspapers		
	10	Dispose of waste in seat pockets		
	11	Collect and re-stow pillows and blankets (first, business class)		
	12	Fold and re-stow blankets in overhead bins		
	13	Re-stow pillows in overhead bins		
	14	Empty ashtrays		
	15	Clean tray tables and armrests		

	16	Clean cabin crew seat tables		
	17	Clean interphone surfaces		
	18	Clean cabin windows inside		
	19	Vacuum passenger and cabin crew cloth covered seats		
	20	Wipe passenger and cabin crew leather covered seats		
	14	Dispose of waste in overhead bins		
Cabin	15	Clean overhead bins outside and latch handle surfaces		
	16	Clean PVC floors		
	17	Vacuum carpet		
	18	Empty and clean ashtrays		
	19	Vacuum ashtray holders		
	20	Collect and replace blankets		
	21	Collect and replace pillows		
	22	Collect and replace headrest covers Clean passenger seats		
	23	Remove passenger seat cushions and vacuum		
	24	Remove stains from carpets		
	25	Clean seat rails, ceiling, sidewalls, doors, magazine racks		
Galleys	26	Empty waste bins and insert waste bags		
	27	Clean doors, latches, ceiling and ventilation grills		
	28	Clean sinks, faucets and working surfaces		
	29	Clean retractable tables		
	30	Clean ovens inside and outside		
	31	Clean service trolleys		
	32	Clean PVC floors		
Lavatories	33	Empty waste bins and insert waste bags		
	34	Clean toilet bowl and seat		
	35	Clean basin, faucets and surfaces		
	36	Clean mirror		
	37	Clean change table		
	38	Clean wall surfaces and interior and		

		exterior door handles and locks		
	39	Clean PVC floors		
	40	Replenish soap dispenser		
	41	Replenish toiletry items		
Crew rest areas	42	Dispose of waste from closets		
	43	Dispose of litters and newspapers		
	44	Remove sheets, pillows and blankets from each sleeping berth		
	45	Clean surfaces within each sleeping berth		
	46	Place clean sheets on mattresses		
	47	Clean lights, ventilators and interphones		
	48	Empty ashtrays		
	49	Vacuum carpets		
	50	Clean cabin crew seat tables		
	51	Clean cabin windows inside		

INSPECTOR'S COMMENTS / FINDINGS:		
OVERALL ASSESSMENT		
Satisfactory	Satisfactory with Comments	Unsatisfactory
Date : _____ Inspector's Signature: _____		

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Appendix D



INSPECTION CHECKLIST OF AIRLINE SERVICE AREA OR TRANSFER POINT

Ref: Guide to hygiene and sanitation in aviation, (Annex D), 3rd edition, 2009

Name of the Airlines:	
Inspection date:	
Name of the Inspector	
Regulatory Authority:	

Satisfactory =S Satisfactory with Comments= SC Unsatisfactory= U Not Checked = NC

SI NO	DETAILS	S/SC/U/NC	REMARKS
WATER PIPING SYSTEM			
1	No cross connections		
2	No backflow connections		
3	Adequate pressure		
HYDRANTS			
4	Location satisfactory		
5	Good maintenance		
6	Quick type coupling		
7	Proper surface drainage		
WATER HOSE			
8	Satisfactory material, smooth, no cracks		
9	Quick type coupling		
10	Satisfactory nozzle guard		
11	Hose properly protected and stored		
12	Hose handled properly, flushed before use		
13	Nozzle different size and shape from waste connections		
WATER TANKS OR TANKS CARTS			
14	Separate from toilet waste tank		
15	Complete drainage possible		

16	Water tanks labeled		
17	Proper transferral of water		
18	Personnel who remove waste do not handle water or food		
19	Soil cans covered during transportation		
20	Sewage removed without spillage		
21	Construction and maintenance of toilet waste carts		
22	Equipment available for flushing aircraft sewage retention tanks (not by direct connection to water supply)		
DISPOSAL OF TOILET WASTE			
23	Disposal facilities removed from food/ drink serving areas		
24	Sewage disposal satisfactory		
25	Can or tank cleaning facilities completely fly proof		
26	Room clean, good repair		
27	Hot water or steam available		
28	Soil cans emptied and cleaned after removal from aircraft		
29	Carts emptied and flushed frequently		
30	Satisfactory storage of clean soil cans		
HANDLING OF AIRCRAFT REFUSE			
31	Refuse handled properly, no spillage		
32	Storage containers satisfactory, covered		
33	Storage containers emptied frequently		
34	Receptacles cleaned		
35	Receptacles stored properly, not with soil cans		
36	Other refuse disposal satisfactory		
37	Airsickness containers properly disposed of		
SANITARY FACILITIES FOR EMPLOYEES			
38	Adequate, convenient toilets, locker rooms and washrooms		
39	Clean, good repair		
40	Hand washing facilities with soap, towels, adequate water		
41	Hand washing sign posted		
42	Drinking water provided is safe, no common cups		

INSPECTOR'S COMMENTS / FINDINGS:		
OVERALL ASSESSMENT		
Satisfactory	Satisfactory with Comments	Unsatisfactory
Date : _____ Inspector's Signature: _____		

GP Capt S M Nazmul Anam
Director
Flight Safety and Regulation
CAAB HQ, Kurmitola, Dhaka

Appendix E**Inspection (From Aviation Public Health Manual)**

All food premises should be inspected regularly and frequently by health authority officers and by airline hygiene officers. The former should have enforcement authority. Where an airline employs specialist officers, the health authority can devote more time to airport food preparation premises, knowing that the airline officer will be monitoring flight catering. The health authority and airline hygiene officers should work in close liaison.

The frequency of inspection will depend on the operating standards found i.e. it will be increased when conditions are unsatisfactory and decreased when they are good. Detailed inspections, in which note is made of all structural defects and faulty methods of food preparation and handling techniques, should be carried out on average at monthly intervals, with revisits as necessary to see that recommendations have been implemented. In addition, frequent ad hoc visits should be made just to check handling practices. Any faults seen can often be rectified immediately, and a few minutes' conversation with food handlers in their working environment.

INSPECTION CHECKLIST OF FLIGHT CATERING SERVICE CENTRE**(Hygiene Officer's Self-inspection Checklist)**

Name of the flight Catering service centre :	
Inspection date:	
Name of the Inspector	
Regulatory Authority:	

I Personal Hygiene

Standard	Yes	No	N/A	Comments	Date corrected
Employees wear proper clothing					
Food handlers wear hair restraints					
Fingernails are short, unpolished and clean					
Jewellery is limited only to watch and plain ring					
Gloves are changed at critical points					
Open sores, cuts or bandages on hands are completely covered while handling food					
Adequate hand washing and drying facilities are available					
Wash hands routinely and thoroughly follow proper hand washing procedures					
No smoking in preparation, service, storage and ware washing areas					

Eat, drink, or chew gum only in designated areas away from work areas					
Disposable tissues are used and disposed of after coughing/blowing nose					
Employees take appropriate action when coughing or sneezing					
Personnel with infections restricted					
Employee illnesses are documented					

II. Utensils and Equipment

Standard	Yes	No	N/A	Comments	Date corrected
All small equipment and utensils, including cutting boards and can openers, are thoroughly cleaned between uses					
Small equipment and utensils are air dried					
Work surfaces are clean to sight and touch					
Work surfaces are washed and sanitized between uses					
Thermometers are washed and sanitized between each use					
Drawers and racks are clean					
Small equipment is inverted, covered, or otherwise protected from dust or contamination when stored					

III. Cleaning and Sanitizing

Standard	Yes	No	N/A	Comments	Date corrected
Three-compartment sink is properly set up for Ware washing (wash, rinse and sanitize)					
Cleaning procedures are in place for utensils, equipment and premises					
Chlorine test kit or thermometer is used to check sanitizing rinse					
If heat sanitizing is used, utensils should be immersed in boiling water					

If using chemical sanitizer, proper dilution should be ensured					
Cleaning chemicals and equipment are stored properly					
The utensils are allowed to air dry					
Adequate clean wiping cloths are provided					
Cleaned tableware and utensils are properly stored					

IV. Waste Disposal

Standard	Yes	No	N/A	Comments	Date corrected
Adequate waste disposal bins are provided					
Waste disposal bins are washed and sanitised					
Waste disposal bins are emptied as necessary					
Cartons and waste are removed from food preparation area					
Waste storage area is insect- or rodent-proofed					
Proper storage is available for brooms, mops and other cleaning utensils outside food preparation area					

V. Pest Control

Standard	Yes	No	N/A	Comments	Date corrected
Screens are put on open windows and doors and properly maintained					
A pest control program is in place					
No evidence of pests is present					

INSPECTOR'S COMMENTS / FINDINGS:		
INSPECTOR'S RECOMMENDATION:		
OVERALL ASSESSMENT		
Satisfactory	Satisfactory with Comments	Unsatisfactory
Date : _____ Inspector's Signature: _____		

Gp Capt S M Nazmul Anam
Director
Flight Safety and Regulations
CAAB HQ, Kurmitola, Dhaka

Appendix F

INSPECTION CHECKLIST FOR FOOD PREPARATION, STORAGE AND TRANSPORTATION:

Name of the flight catering service centre:	
Inspection date:	
Name of the Inspector	
Regulatory Authority:	

Stage	Control limits	Yes	No	N/A	Comments	Date corrected
Receiving	Inspect incoming food and supplies immediately upon receipt					
	All foods and supplies are promptly moved to proper storage areas					
	Receiving area is clean and free of food debris, boxes or other refuse					
	Chilled and frozen products are arriving at correct temperature					
	Products are supplied by approved suppliers					
Dry Storage	Storage area is dry and well ventilated					
	All foods are labeled with name and (expiry / delivery) date					
	FIFO (First-in-first-out) is used					
	There are no bulging or leaking canned goods in storage					
	Opened bulk-food supplies are stored in containers with tight-fitting lids					
	Food is protected from contamination					
	All surfaces and floors are clean					
Food Handling	Chemicals and cleaning supplies are stored away from food and other food-related supplies					
	Frozen foods are thawed under refrigeration or in cold running water					
	Food is kept under appropriate temperature (i.e. cold foods at 4°C or below and hot foods at 63°C or above)					

	Food is tasted using proper method					
	Food is prevented from cross-contamination					
	Food is handled with clean utensils or clean hands					
	Avoid touching parts of utensils that directly contact food					
	Proper cooling procedures have been practiced					
Cold Storage	Thermometers are conspicuous and accurate					
	Proper temperatures are maintained: 4°C or below for chillers and -18°C or below for freezers					
	All foods are stored off the floor.					
	Food is arranged in a way to allow air circulation					
	Cooked foods are stored above or separately from raw foods					
	Proper chilling procedures have been practiced					
	All foods are properly wrapped, labeled and dated					
	FIFO (First-in-first-out) is used					
	Units are clean					
Hot Holding	Units are clean					
	Temperature of food being held is 63°C or above					
	Food is heated to 75°C before placing in hot holding					
	Food is protected from contamination					
Display	Display of ready-to-eat and non ready-to-eat foods is separated					
	Different sets of utensils are used to handle ready-to-eat and non ready-to-eat foods					
	Hot foods are kept at 63°C or above					
	Cold foods (e.g. raw oysters, sashimi and salad) are kept at 4°C or below					
Transport	Transport containers and carts are regularly cleaned and sanitized					

	Proper temperatures are maintained during transport: at 4°C or below for cold foods and above 63°C for hot foods					
	Transport carts and containers for food are covered					
	Transport vehicles are clean					

INSPECTOR'S COMMENTS / FINDINGS:

INSPECTOR'S RECOMMENDATION:

OVERALL ASSESSMENT

Satisfactory

Satisfactory with Comments

Unsatisfactory

Date : _____ Inspector's Signature: _____

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