Annual report: ML5 Medical Assessments 2021

Important notice:

The ML5 certificate does not comply with the requirements of the Maritime Labour Convention, or other international conventions and so may not be accepted during vessel inspections outside UK. If you need certificates that are MLC compliant, crew members must have an ENG 1 medical performed by an MCA Approved Doctor, or a recognised equivalent certificate issued by another maritime authority.

The ML5 system

Masters of small commercial vessels and crew members of certain classes of vessel within this group have the option of periodic fitness certification by means of the ML5 system rather than the ENG 1 system of medical examinations for Merchant Navy seafarers performed by doctors who are approved by MCA.

The ML5 form includes information and instructions for both doctor and applicant, and is <u>available online</u>.

Applicants should download the form and may then request any GMC registered doctor with a licence to practice (normally their general practitioner) to complete the form giving information on their health. The ML5 form is designed so that if there are no boxes ticked indicating ill health or disability the doctor may complete a certificate that indicates that the applicant may work on the designated classes of vessel. If one or more of the boxes indicates the presence of illness or disability the medical report must be referred to one of the four Medical Assessors appointed by the MCA, two for RYA and two for Boatmaster applicants. Referral for Boatmasters will be via the MCA Marine office, and for holders of RYA commercial endorsements via the RYA. Some 5 -10% of medical reports are so referred although exact numbers of certificates issued with no referral are not recorded. The Medical Assessor will review the medical report and may then contact the individual and/or their doctor for further information. Based on what is reported and any additional information supplied the Assessor will make a decision on fitness and issue an appropriate certificate.

Data sources

The MCA Assessors summarise their findings at the time of the assessment in a structured way on a database. The results presented here are from this source. Each year a clinical review meeting is held between MCA and the Assessors at which the summary data for the last year is presented and specific case work and policy issues are considered in order to assure the quality of the system.

As this information only relates to the cases referred to Assessors, the overall numbers of RYA and Boatmaster applicants are not available. As a result it is not possible to access total numbers with regards to age, gender and the class of licence or endorsement applied for, and incidence and prevalence rates for different conditions cannot be analysed. As only 5% of applicants are female these have not been analysed separately and the results presented are for both men and women.

Key results for 2021

A total of 639 referrals were made, 259 being applicants for Boatmasters' licenses and 380 for RYA commercial endorsements for Yachtmasters and powerboat operators. This represents a significant increase in both RYA and BML referrals which is no doubt due to the lifting of many pandemic restrictions throughout 2021 compared to 2020.

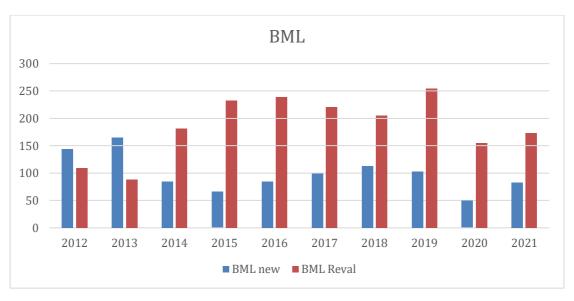
| | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 | 2020 | 2021 |
|-------|------|------|------|------|------|------|------|------|------|------|
| BML | 253 | 253 | 265 | 298 | 323 | 320 | 318 | 357 | 205 | 259 |
| RYA | 414 | 343 | 373 | 388 | 333 | 362 | 392 | 409 | 313 | 380 |
| Total | 667 | 596 | 638 | 686 | 656 | 682 | 710 | 766 | 518 | 639 |

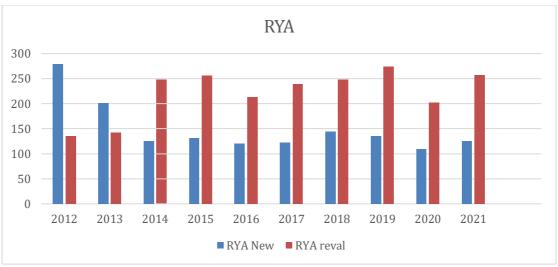


New applications and revalidations are reviewed each year, and from the tables and graphs below it can be seen that despite the drop in numbers, revalidations have continued to outnumber new applications since 2014.

| | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 | 2020 | 2021 |
|-----------|------|------|------|------|------|------|------|------|------|------|
| BML New | 144 | 165 | 84 | 66 | 84 | 99 | 113 | 103 | 50 | 83 |
| BML Reval | 109 | 88 | 181 | 232 | 239 | 221 | 205 | 254 | 155 | 173 |

| | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 | 2020 | 2021 |
|--------------|------|------|------|------|------|------|------|------|------|------|
| RYA New | 279 | 201 | 125 | 132 | 120 | 123 | 144 | 135 | 109 | 125 |
| RYA Reval | 135 | 142 | 248 | 256 | 213 | 239 | 248 | 274 | 202 | 257 |

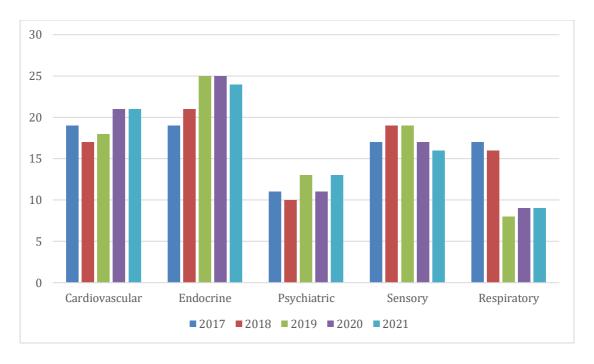




Reason for referral

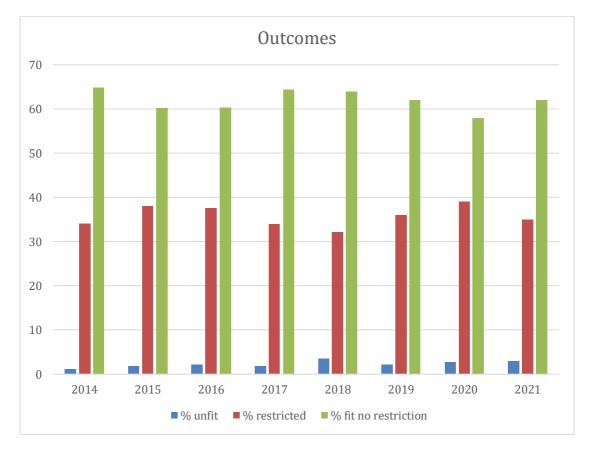
Analysis of the reasons for referral shows that figures are relatively constant, with the highest number of referrals continuing to be related to Endocrine and Metabolic, Cardiovascular and Sensory conditions. The prevalence of Respiratory conditions referred for assessment has reduced since the redesign of the form to avoid referral for more stable asthmatics as noted previously. The number of referrals for Psychiatric conditions showed a slight increase that may reflect the increased prevalence of such disorders within the general population. It should however be borne in mind that many referrals are for more than one reason, and in the more complex cases are for a number of different conditions.

| % | Cardiovascular | Endocrine | Psychiatric | Sensory | Respiratory |
|------|----------------|-----------|-------------|---------|-------------|
| 2016 | 17 | 21 | 10 | 19 | 16 |
| 2017 | 19 | 19 | 11 | 17 | 17 |
| 2018 | 17 | 21 | 10 | 19 | 16 |
| 2019 | 18 | 25 | 13 | 19 | 8 |
| 2020 | 21 | 25 | 11 | 17 | 9 |
| 2021 | 21 | 24 | 13 | 16 | 9 |



Outcomes

The percentage found fit, unfit, or restricted varies slightly year on year, but as demonstrated by the chart below, no specific trends have been identified. 3% were found unfit, 35% were able to obtain a restricted certificate and all others assessed (62%) were found fit without restriction.



As before, the MCA has not been made aware of any significant incidents arising because of health related impairment in those using the ML5 system as the means of certifying fitness to work at sea. This demonstrates the value of this simple method of assessment for those pursuing careers in inland waterways or in certain limited sea areas.

Quality assurance of the system is achieved by discussing different aspects of certification for specific conditions with the assessors, the detail of a number of different cases selected by both the assessors and the Chief Medical Advisor, and also by comparing the number of failures and restrictions for each assessor in order to ensure that decisions are being made fairly.

Dr Sue Stannard Chief Medical Advisor Maritime and Coastguard Agency 2022