**Section 5: Response form**

|  |  |
| --- | --- |
| What is your name?  |  |
| What is your email address? |  |
| What is your job title? |  |

|  |
| --- |
| **When responding please state whether you are responding as an individual or representing the views of an organisation:** |
|  |
| ☐ | I am responding as an individual |  |
| ☐ | I am responding on behalf of an organisation |  |
|  |  (name of organisation) |  |

**Please check the box that best describes you as a respondent and the size of your organisation:**

|  |  |
| --- | --- |
| Respondent Type | Size of Organisation |
| ☐ | Classification Society | ☐ | Large business (over 250 staff) |
| ☐ | Government Agency/Department | ☐ | Medium business (50 to 250 staff) |
| ☐ | Individual | ☐ | Micro business (up to 9 staff) |
| ☐ | Legal representative | ☐ | Small business (10 to 49 staff) |
| ☐ | Protection & Indemnity  |  |  |
| ☐ | Seafarer |  |  |
| ☐ | Ship Operator |  |  |
| ☐ | Ship Owner |  |  |
| ☐ | Trade Union  |  |  |
| ☐ | Other |  |  |
|  | (please describe) |  |

**Section 5.1 Consultation Questions**

Q1. Which of the three options do you feel should be implemented and why?

Q2. Do you feel that a coming into force date of the November 2021, gives ship owners, managers, skippers sufficient time to set in place the necessary procedures to meet the change in regulation?

Q3. Under Option 2, we estimate only a percentage of under 500GT merchant ships will be impacted. Outlined as 30% currently meeting SOLAS requirements through PSC, 20% voluntarily applying SOLAS requirements through industry best practice, 20% who are operating domestic routes and which would access enclosed spaces only as part of an ‘onshore’ maintenance programme and the remaining 30% as unknown operation. Which gives an estimate of 70% of merchant ships under 500GT as potentially impacted. Do you agree with the 70% estimation?

Q4: Under Option 3, we estimate that the cost of training for fishing vessels to be £317k on the basis that 50% of fishermen have already had enclosed space training contained within the Basic Health and Safety course for new entrants and in the Safety Awareness course for experienced fishermen. Do you agree with this assumption and if not please explain why and tell us what proportion of fishermen may require more training as a result of the proposed Regulations?

Q5. If you do not feel option 3 is suitable, please give evidence to support this view. What alternative measures or action do you feel could be taken to improve awareness within the Merchant and Fishing Industries on the dangers of enclosed spaces?

Q6. Do you agree that provision should be made for exemptions for vessels under 500GT which fall outside the scope of the SOLAS requirements? If so, do you agree with the conditions placed on such exemptions?

Q7. Do you agree to using the **term** ‘enclosed spaces’ instead of ‘dangerous spaces’ as defined? (see 2.2.2)

Q8. Do you agree to (i) the definition of ‘enclosed space’ as defined within regulation 3 of the proposed Regulation and (ii) to the alteration of the word **‘and’** to **‘or’** within regulation 3 (b)? (see 2.2.3) If you do not agree, please outline why.

Q9. What proportion of UK non-tanker and passenger ships of 500GT to 1000GT do you estimate already carry out enclosed space entry drills?

Q10. What proportion of UK merchant ships do you estimate already carry atmosphere testing equipment which meets the standard? If the proportion varies according to size of vessel, please make clear which vessels you are referring to.

Q11. What proportion of UK shipping companies do you estimate already send seafarers on the recognised enclosed spaces training courses?

Q12. Do you agree with our assessment of the impact of the proposed Regulations? Are there other costs or benefits to be considered?

**Section 5.2**

Do you have any additional comments to add to the response?

**Please return completed response forms to seafarersafety@mcga.gov.uk**

Alternatively, responses may be posted to:

Seafarer Services

Maritime and Coastguard Agency

Bay 2/17

Spring Place

105 Commercial Road

Southampton, SO15 1EG

**MCA CONSULTATION FEEDBACK FORM**

1. Please indicate on which Consultation you are providing feedback:

***……………………………………………………………………………***

|  |  |
| --- | --- |
| 2a. | Please indicate whether you are responding on behalf of: |
|  |[ ]  Yourself as an Individual |
|  |[ ]  A Trade Association |
|  |[ ]  A Company |
|  |[ ]  A Government Organisation |
|  |[ ]  A Trade Union |
|  |[ ]  Other(please specify) |  |

2b. If you are representing a company, please indicate the size of your company:

 ☐ Micro (1-9 employees)

 ☐ Small (10-49 employees)

 ☐ Medium (50-249 employees)

 ☐ Large (250+ employees)

|  |  |
| --- | --- |
|  2c. Please indicate whether you accessed this consultation package through:☐ Post ☐ email ☐ Website |  |
| 3. | Please rate the quality of this consultation regarding accuracy, good English and spelling: |
|  |[ ]  Very good |
|  |[ ]  Good |
|  |[ ]  Average |
|  |[ ]  Poor |
|  |[ ]  Very Poor |

|  |  |
| --- | --- |
| 4. | Please rate the format of the consultation presentation (layout, Annexes etc.): |
|  |[ ]  Very good |
|  |[ ]  Good |
|  |[ ]  Average |
|  |[ ]  Poor |
|  |[ ]  Very Poor |

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| 5. | Please rate the consultation in terms of how clear and concise you felt it was: |
|  |[ ]  Very good |
|  |[ ]  Good |
|  |[ ]  Average |
|  |[ ]  Poor |
|  |[ ]  Very Poor |

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| --- | --- |
| 6. | Did you feel that the consultation was conducted over a sufficient period of time? |
|  |[ ]  Yes |
|  |[ ]  No |

|  |  |
| --- | --- |
| 7. | Were any representative groups, organisations or companies not consulted who you felt should have been? |
|  |[ ]  Yes |
|  |[ ]  No |
|  | If yes, who? |  |

|  |  |
| --- | --- |
| 8. | Please let us have any suggestions for improvement or other comments you wish to make about this consultation below: |
|  |  |

Thank you for your time. Please return this form to:

Consultation Co-ordinator,

Maritime and Coastguard Agency,

Spring Place, Bay 3/26, 105 Commercial Road

Southampton SO15 1EG

Or e-mail it to: consultation.coordinator@mcga.gov.uk

If you are happy to supply your name, in case we need to contact you to discuss your views further, please enter it below (this is optional, and your feedback will still be taken into account if you wish to remain anonymous):

|  |  |
| --- | --- |
| Name  |  |
| Tel. No. |  |

**Please note that the deadline for responses to the Consultation itself**

**does not apply to the return of this form.**