

**Company Malaria Control Program - Sample Implementation Checklist**

<b>Pre-Travel to a Malaria Risk Country</b>					<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>
1	Do company travelers (i.e., resident expatriates, rotational personnel, and business travelers) receive a 'Travelers Notification Letter' (e-mail) from Travel Services (or partner travel agency), when flight reservations are made for travel to a malarial area							
2	Do non-immune company travelers obtain a Malaria Visa prior to departure to a malaria risk country?							
3	Are the malaria A-B-C-D and other malaria-related training videos and blank Attestation forms available for use by all personnel as back-ups to the Malaria Visa computer based training module?							
4	Are employees who are being assigned to a malarial country advised of the risk of malaria prior to accepting an assignment in a malarial area?							
5	Does the Malaria Control Officer (MCO) at the destination (i.e., receiving location) receive an e-mail notification when company travelers have completed the Malaria Visa?							
6	Does the MCO have a process for handling the e-mail notifications regarding expected visits from company travelers?							
7	Do Supervisors from the sending organization receive an e-mail notification when their employees have completed the Malaria Visa?							
8	Do Supervisors have a process for dealing with the e-mail notifications they receive after their employees go through the Malaria Visa program (e.g., if employees answer questions about malaria protection negatively).							
9	Does the sending organization have a process for filing/maintaining completed copies of Attestation forms?							
10	Does the sending organization have a process for tracking non-immune personnel and making sure that the MMP Administrator is notified when these individuals' assignments to malarial areas begin and end to accurately maintain the MMP testing pools.							
11	Does the company business traveler (not being reassigned as a resident expatriate or rotator) have a point of contact at the receiving location?							
12	Do company travelers have access to a company Travel Health Clinic or Preferred Medical Provider prior to travel?							
13	If a company Travel Health Clinic or Preferred Medical Provider is not available at the location where travel will originate, is the contact information for appropriate MOH contacts readily available?							
14	Is a copy of the A-B-C-D program brochure available from the Travel Health Clinic or Preferred Medical Provider?							
15	Are non-immune company travelers counseled prior to travel by their travel health provider regarding the types of chemoprophylaxis available?							
16	Is an adequate supply of chemoprophylaxis medications readily available and provided to non-immune company travelers, or are they provided with a prescription to obtain an adequate supply prior to travel for the required duration (before, during and after travel)							
17	Is mosquito / insect repellent (minimum 20% Deet) provided to company travelers, or are they instructed to purchase and adequate supply prior to traveling to a malaria risk area?							
18	Is Permethrin spray for clothing provided to company travelers prior to traveling to a malaria risk area?							
<b>Arrival in a Malaria Risk Area (destination)</b>					<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>
19	Is a process in place to verify that arriving non-immune company travelers have a valid Malaria Visa?							
20	Are non-immune company travelers who arrive without a valid Malaria Visa referred to Medical or the MCO for training, insect repellent and chemoprophylaxis supplies?							
21	Are non-immune company travelers who arrive without a valid Malaria Visa and who have not signed an Attestation form in the past, required to sign a malaria chemoprophylaxis Attestation form?							
22	Is the company business traveler required to complete a Malaria Arrival Questionnaire?							
23	Do company travelers receive malaria prevention information specific to the receiving location (e.g., site orientation)?							
<b>Departure from a Malarial Risk Area</b>					<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>
24	Are company travelers about to depart from the malarial risk area provided with the Emergency Response System numbers sticker for their passport?							
25	Are non-immune company travelers to falciparum malaria risk areas provided with a Malaria Survival Kit prior to departure?							
26	Is there a process for recording the assigned Malaria Survival Kit serial number and communicating the information to Corporate MOH?							
27	Are departing personnel reminded of the signs and symptoms of malaria so that potential cases of malaria can be diagnosed and treated early and effectively?							
<b>Awareness</b>					<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>
28	Does the site orientation for new hires include specific malaria control information for the location?							

29	Do expatriate and rotating employees and frequent business travelers to malarial areas participate in the full Malaria Visa computer-based training annually?				
30	Are discussions regarding malaria periodically included in safety meetings?				
31	Is training reinforced by display of educational materials and communications regarding the malaria control program?				
32	Are malaria statistics displayed?				
33	Are malaria awareness materials provided for employee dependants?				
<b>Bite Prevention: Personal Protection</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>
34	Is mosquito / insect repellent (minimum 20% Deet) available and provided to personnel as needed?				
35	Is insecticide spray for outer clothing (i.e., Permethrin) available and provided to personnel as needed?				
36	Is laundry treatment of clothing with Permethrin available to personnel?				
37	Are long sleeve shirts/pants worn for working at night (dusk to dawn)?				
38	Are long sleeve shirts/pants strongly recommended by local staff to all personnel when participating in recreational or other non-work related activities from dusk to dawn?				
39	Are insecticide treated bed nets provided in Company provided accommodations where mosquitoes can enter freely?				
<b>Bite Prevention: Vector Control</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>
40	Have local malaria transmission patterns been determined and addressed in the vector control plan?				
41	Are inspections of Company provided accommodations conducted regularly?				
42	Are temporary breeding sites removed through environmental management (draining, flushing) on an ongoing basis?				
43	Is standing water that can not be removed treated with mosquito larvicide?				
44	Do doors seal properly and do windows have screens without tears / holes in Company provided offices and accommodations?				
45	Are cracks or other openings to the outside of Company controlled offices and accommodations caulked or otherwise sealed?				
46	Are company-controlled offices and accommodations treated with indoor residual spraying on a regular basis, using malaria transmission patterns and entomological surveys to determine insecticide type and frequency?				
47	Do all Company provided accommodations display a mosquito inspection sticker?				
48	Is space spraying or fogging utilized for outdoor Company sponsored activities and in the event of malaria epidemics?				
<b>Chemoprophylaxis</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>
49	Are adequate supplies of chemoprophylaxis medications readily available and provided to non-immune personnel in-country as needed?				
50	Is overall coordination between business lines provided to ensure consistent Malaria Management Programme (MMP) implementation?				
51	Does a process exist for the local selection of non-immune company business travelers for Malaria Chemoprophylaxis Compliance Programme testing?				
52	Do pregnant semi-immune employees and dependents have access to appropriate chemoprophylaxis or Intermittent Preventive Treatment (IPT)?				
<b>Diagnosis &amp; Treatment</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>
53	Do employees have access to a company Travel Health Clinic or Preferred Medical Provider (in country) for examination and diagnosis?				
54	Are rapid diagnostic techniques utilized by Preferred Medical Providers?				
55	Do local medical providers measure parasitemia in falciparum risk areas?				
56	Do Preferred Medical Providers follow the treatment protocols approved for the region?				
<b>Verification and Measurement</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>
57	Does the location have a documented Malaria Management Program (MMP)?				
58	Is the location specific MMP and supporting information reviewed as part of the wider EHS management system?				
59	Is management notification regarding malaria cases conducted as per the Incident Severity Classification Matrix?				
60	Are all stewardable malaria cases investigated in consultation with local Safety, Health, & Environment staff and Medical & Occupational Health staff?				
61	Do malaria case investigation procedures focus on root-cause analysis?				
62	Is stewardable malaria case information (e.g., number of cases, non-immune, semi-immune, employees, etc.) captured for analyzing local trends and for supplying required management reports?				