OGUK

COVID-19: Safe Working for UKCS Offshore Installations

Guidelines

Issue 4
September 2021

Acknowledgments

In preparing and publishing this document, OGUK gratefully acknowledges the contribution of the Pandemic Steering Group, which includes representation from member companies, the HSE and workforce representatives from trade unions. Thanks also to Public Health Scotland and Step Change in Safety for their support and feedback.

ISBN: 978-1-913078-30-0
PUBLISHED BY OGUK

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List of Abbreviations

Abbreviations	Definitions
ALARP	As Low as Reasonably Practicable
BAU	Business as Usual
BOHS	British Occupational Hygiene Society
CRO	Control Room Operator
FOD	Foreign Object Debris
FRSM	Fluid Resistant Surgical Mask (in the context of helicopter travel, this is for Category C helicopter passengers only)
HPS	Health Protection Scotland (now referred to as Public Health Scotland)
HUET	Helicopter Underwater Escape Training
IMO	International Maritime Organisation
OPEP	Oil Pollution Emergency Plan
PHE	Public Health England
PPE	Personal Protective Equipment
RPE	Respiratory Protective Equipment

1 Introduction

1.1 Background

The offshore oil and gas industry has been working to manage the threat posed by COVID-19 and, as part of the national critical infrastructure, it is required to maintain operations to ensure security of supply for the UK.

From the outset, industry has engaged with regulators, trade unions, governments and public health agencies to ensure that these operations are and continue to be conducted in line with government advice, existing health and safety law and good practice. The situation is dynamic, and any apparent conflict between this guidance and advice from government and public health agencies will be a result of such advice being updated – every effort will be made to ensure that changes are captured as soon as reasonably possible. Government, regulatory and public health advice will always supersede the industry good practice outlined here.

This guideline provides information on how the offshore oil and gas industry has responded to the pandemic, building on lessons learned to outline how safe working has been maintained during the pandemic, and demonstrating how it can increase activity levels safely from the minimum manning implemented by the majority of operators at the start of the epidemic in the UK.

Monitoring of the effectiveness of the industry approach is being undertaken by operators through their internal assurance process, including feedback from workforce and elected safety representatives, and also at industry level, by weekly review of the number of individuals being returned onshore via helicopter flights and feedback from regulatory oversight.

The aim of industry in managing any health and safety risk has always been to reach the "as low as reasonably practicable" threshold (ALARP), and this remains true for non-process risks such as that posed by COVID-19.

The first section of this document outlines risk management approaches and how these will be used by industry in managing COVID-19, then, using the hierarchy of control, following sections provide examples of common considerations and controls to assist with the process of managing risk on board an offshore installation.

It should be noted that this document outlines a sensible and proportionate approach to help the industry manage specific health risks during the coronavirus (COVID-19) outbreak, recognising that government changes are dynamic, and the general pandemic situation changes frequently. It is not exhaustive and is not intended to replace existing obligations for managing wider health, safety and environmental aspects of offshore oil and gas production.

Installation operators continue to maintain management arrangements for health, safety and the environment, particularly the integrity of major accident hazard plant and safety and environmentally critical equipment, including during a security of supply scenario. This includes:

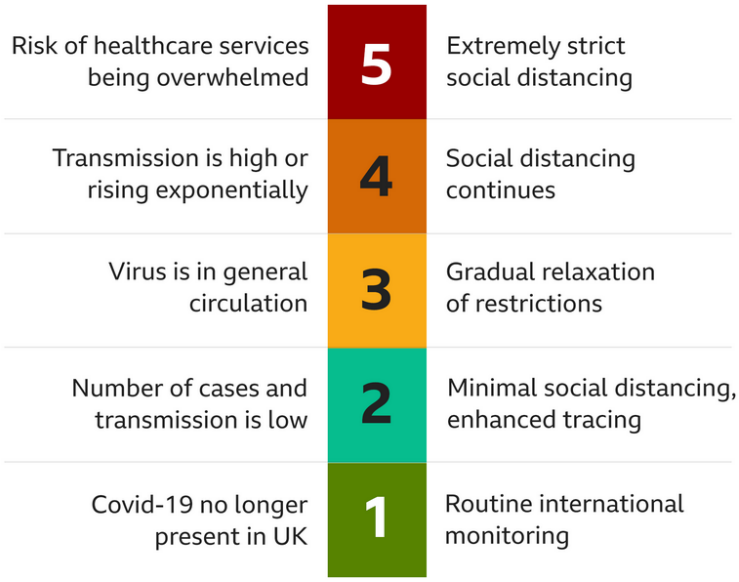
- Complying with each installation's Safety Case and OPEP.
- Ensuring installations have an appropriate number of competent staff to manage health, safety and environmental risks.
- Ensuring health, safety and environmental protection is not unduly compromised.

The presumption is that, wherever possible, existing arrangements to manage health, safety and environmental risks will be maintained, along with any specific undertakings made to regulators, including those listed in installation permit conditions or outlined in letters.

In applying this guidance, employers should be mindful of the particular needs of different groups of workers or individuals. It is breaking the law to discriminate, directly or indirectly, against anyone because of a protected characteristic such as age, sex or disability. Employers also have particular responsibilities towards disabled workers and those who are new or expectant mothers.

1.2 State of the pandemic in the UKCS in 2021

The COVID-19 threat level in the UK is defined by the Joint Biosecurity Centre, using five categories:



The Scottish Government COVID-19 strategic intent has adjusted from working;

'to suppress the virus to the lowest possible level and keep it there, while we strive to return to a more normal life for as many people as possible'.

to one where we work;

'to suppress the virus to a level consistent with alleviating its harms while we recover and rebuild for a better future'.

With the alert level at time of writing lowered to level three, and government making plans for removing further restrictions as vaccination coverage rises, many operators are now considering what arrangements will be appropriate to ensure COVID-19 risk is ALARP in the circumstances outlined at the lower end of the alert system. Along with the current alert level given by the JBC, other relevant considerations may include government guidance; the prevalence of infection; population vaccination levels and vaccine efficacy, and treatment options for those experiencing severe illness. Test positivity and frequency of positive tests during premobilisation screening may also be a useful input in determining whether management measures have reduced risk to ALARP.

COVID-19 risk management arrangements have been under continuous review throughout the pandemic, but with the prospect of risk levels decreasing, it may be the case that some barriers are no longer appropriate in ALARP arrangements.

The Pandemic Steering Group formed a group to identify an "end-state" in which industry would have arrived at a new business as usual situation. The end state has been defined as the position where organisations have identified permanent barriers for the reduction of infectious diseases [and have removed all covid-specific barriers], whilst maintaining BAU barriers and the ability to react to an epidemic / pandemic. The PSG recognised that while uniformity may not be possible across different operators and individual installations, where possible, alignment across industry in removing barriers should be sought.

Operators considering the removal of temporary barriers should consider the relative efficacy of controls against infectious disease, the ease of removing and reinstating should circumstances change, the impact on workforce wellbeing, and whether barriers are currently included in legislation or government guidance.

The most effective barriers have always been good ventilation, social distancing, personal hygiene and face coverings and it should be recognised that personal behaviours are the accountability of all those working offshore. As with the original COVID-19 risk assessment process, considerations relevant to such a review will also include workforce engagement: individuals may be confused, anxious or fearful about changes, or impatient for further relaxation. A clear communication strategy and feedback path will be necessary when considering changes to workplace arrangements.

2 Risk Assessment and Workforce Engagement

Risk management is at the core of the offshore oil and gas industry. The existing risk management framework should be used to manage the COVID-19 risk and to ensure that controls implemented do not undermine the existing risk management framework outlined in the installation Safety Case, the written scheme of examination for safety and environmentally critical elements and other documented risk assessments. The form of the COVID-19 risk assessment will be decided by the installation operator, bearing in mind the common risks across all operations, but also the specificities of the work environment and work scopes on individual installations.

SI 971 requirements for elected safety representatives for each installation means that workforce engagement and communication about risk management can use existing arrangements to ensure that the workforce is consulted on managing COVID-19 risk. Engaging the workforce effectively in any process to change working arrangements from the current minimum levels will be essential to successfully identify effective controls and barriers, and assist in reducing the risk to as low as reasonably practicable, as required by existing law. Workforce engagement should include sharing information on the controls that have been considered but not implemented, as well as those that have, and the reasons behind these decisions. As part of the decision-making and ALARP demonstration, the elected safety representatives and the workforce should also be informed of additional risk reduction measures that were considered but ruled out because they were not practicable or did not provide sufficient risk reduction.

The challenge in managing COVID-19 risk has changed during the pandemic. Initially, one of the primary challenges of risk assessment for COVID-19 was the fact that comparatively little was known about the virus, and a significant proportion of the workforce were not familiar with managing infectious disease risk. Over a year later, as more has been learned, that challenge has lessened, while others such as the circulation of new variants and the speed of changes in prevalence have arisen. It is worth noting again, the Scottish Government's shift in strategy to suppression of the virus to a level consistent with the alleviation of harm.

Clear communication about known facts relating to spread, effective countermeasures, and effects on individuals remain an essential element in ensuring that the risk assessment process creates a proportionate and effective response. Sharing this knowledge assists in ensuring appropriate social distancing and infection control measures are included in job specific risk assessment, or at pre-work toolbox talks.

Knowledge of the mechanisms by which the virus is spread and its effects is increasing, and government advice is updated regularly to reflect this increasing knowledge. It is therefore important to note that any risk assessment along with the controls and barriers identified will of necessity be dynamic and should be regularly reviewed as both the wider pandemic situation and the level of manning and activity onboard changes. The figure below provides a generic barrier model that can be used to communicate the controls in place. The importance of vaccination against COVID-19 should also be recognised in supporting the health of the identified controls and barriers, as well as being a critical factor in the risk assessment of identified contacts on an offshore asset. A fully vaccinated individual's risk of contracting COVID-19 is likely to be reduced and the consequence of COVID-19 in the event of transmission less severe. Information sharing with the workforce with regards the Government vaccination programme along with facilitation of engagement with it may help increase uptake.

The other element of importance is that the UK Government has expressed a desire that we now have to 'live' with the virus as just another risk in our lives and the virus is here to stay and so the main objectives are now to alleviate all 'harms' associated with the virus, the direct health impact being only just one of those.

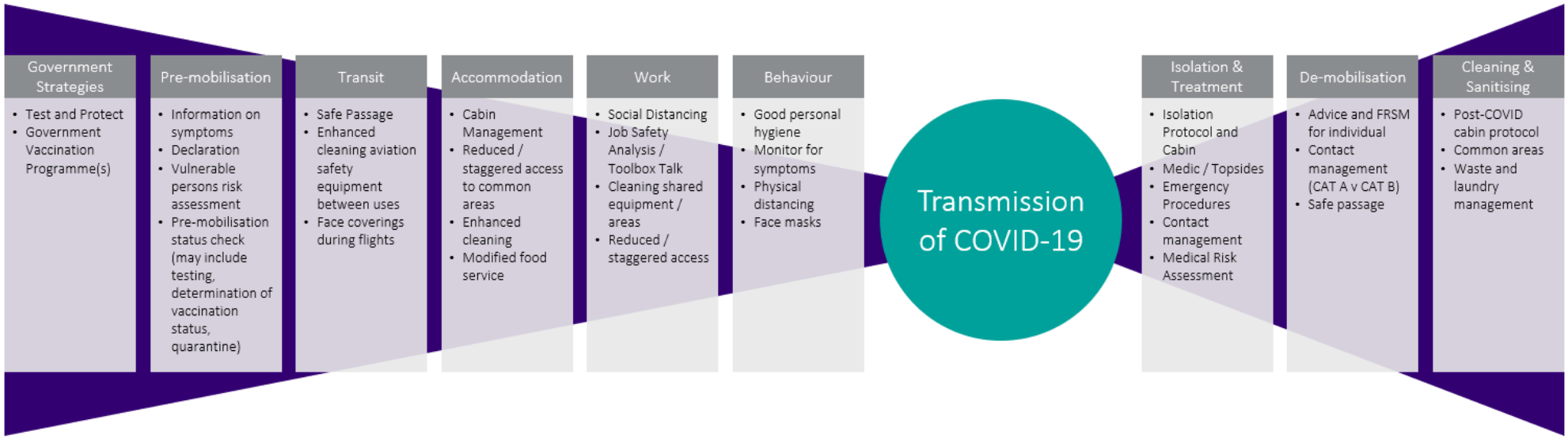
Further Information:

OGUK Managing Health, Safety and Environmental Risk Associated with COVID-19 Pandemic on Offshore Installations

British Occupational Hygiene Society – COVID-19 Hub

HSE: Managing risks and risk assessment at work

Figure 1: COVID-19 Barrier Model



3 Who Should Go To Work

3.1 Pre-mobilisation checks

Pre-mobilisation communication should be carried out with all personnel intending to travel offshore before they mobilise from their home location. The method and content of the communication is determined by operators, however, it should reiterate the importance of following national guidance for the current stage of the pandemic response. Individuals advised to self-isolate as a result of contact tracing by the UK and devolved governments are currently advised to stay at home, unless they are fully vaccinated, with at least two weeks having passed since the completed course of vaccination(s) and have undergone an NHS PCR test result, achieving a negative result (this test is mandatory in Scotland and advised in other UK nations).

An additional barrier is in place to identify individuals who have become symptomatic between the time they leave home and the time they reach their mobilisation point. Temperature checks are no longer industry policy, as screening is currently conducted using pre-mobilisation testing, although the requirement for pre-mobilisation testing, and the type of tests used, will undoubtedly come under review as the pandemic landscape continues to change. Individuals who test positive will be given appropriate advice on self-isolation in line with government requirements. Further information on testing can be found in the links below:

IOGP Position Statement on COVID-19 Testing

Scottish Government publication: COVID-19 - employee testing programmes: guidance for employers

NHS PCR testing is available to any individual displaying symptoms consistent with COVID-19, including those who are refused travel offshore as a result of screening. A negative test result and the absence of symptoms for forty-eight hours may, in certain circumstances, permit an individual to return to work before the government required self-isolation (for individuals who have not received their full course of vaccinations at least two weeks prior) or quarantine period is ended, but only under clinical advice and after consultation with the relevant employer and installation operator. OGUK guidance for use by company medical advisors on returning to work following test results is available at the link below.

https://oguk.org.uk/wp-content/uploads/2021/09/Guide-to-action-on-COVID-19-PCR-test-results.pdf

3.2 Higher Risk Groups

At the outset of the pandemic, UK Government advice identified two groups of people who may be at higher risk of developing severe COVID-19 if they become infected, initially termed “vulnerable” and “extremely clinically vulnerable”. Extremely clinically vulnerable individuals were those previously advised to “shield” at home. Government advice to this group is subject to change and can be found in the relevant tier guidance for the country of residence within the UK.

Operators and employers should use the available health information to identify workers who may be at higher risk of developing severe illness if they are infected, and make a risk-based decision regarding their mobilisation, which may include:

- the risk to the individual of developing severe symptoms offshore
- the impact on the teams who may need to look after them offshore if they do get sick
- the impact on business / safety critical roles and appropriate manning levels

OGUK guidance on conducting this assessment notes that normal occupational health processes should be followed, and that information about the specific measures in place on the installation in question should be factored into this decision making. While the assessment should be made by the employer, operators of installations may also decide to restrict mobilisation of certain groups based on their own assessment.

The OGUK guidance can be found here:

https://oguk.org.uk/product/vulnerable-persons-technical-note-apr/

Measures brought into force for the wider population may also impact on an individual's ability or willingness to return to work. These are outside the scope of this guidance and should be managed by the employing company in line with their own company policy.

3.3 Essential Work

Government guidance remains in place that states those who can work remotely should continue to do so, but it has been updated to permit return to office premises and other workplaces. As this restriction is eased, it is reasonable for the offshore worksite to ease restrictions on visitors in line with onshore advice. Operators may choose to continue remote working for activities, or parts of activities, that can be conducted remotely rather than onboard installations – for example, training, assessments, audits and inspections. Installation operators should continue to review work scopes to identify aspects that can be completed without mobilising personnel wherever it is reasonable to do so, but may find the balance of these decisions changes once onshore advice changes.

The essential work restriction introduced during the first lockdown in 2020 was not reintroduced in the 2021 restrictions, and therefore it is not anticipated that this will change in future.

Minimum manning levels as implemented at the start of the pandemic can only ever be a temporary measure. Postponed activities become critical over time, and the balance between COVID-19 risk and major accident hazard risks will change as a consequence. Postponed work scopes should be subject to a comprehensive risk assessment to determine if the work should be undertaken during the COVID-19 pandemic or delayed to a later date. Operations must be conducted in a manner which manages the additional risk posed by COVID-19 to as low and as is reasonably practicable. Installation operators will make risk-based decisions about their own circumstances when deciding what work should go ahead, and which workers will be needed to conduct it. This decision may also take into account such factors as the general prevalence of the virus, international travel requirements, the UK JBC assessment of the threat level, and any findings related to the success of the vaccination programme.

4 Social Distancing Onboard

It is unlikely that any offshore installation will be able to achieve two metre distance between individuals all the time while maintaining safe operations. Social distancing guidance from government recognises this, requiring rather that is maintained wherever possible.

Offshore installations, like the rest of society, have been assessing and identifying changes that can be made to the workplace to maintain social distancing, or to reduce the associated risks of infection when it cannot be eliminated.

Current practice has been shared between installation operators via Step Change in Safety, outlining the types of changes that can be made to work on board the installation. HSE workplace guidance is also relevant to certain aspects of offshore work, so that same simple approaches can be made, following the hierarchy of control. The BOHS document referenced below has classed control measures for COVID-19 into this hierarchy.

Changes to work tasks should be made wherever possible to maintain increased frequency of personal hand hygiene routines and social distancing, but where this is not possible, actions to reduce the risk of infection should be considered, such as ensuring workers are not positioned face to face, the time in close proximity is limited, enhanced cleaning is conducted, etc. as outlined in the guidance documents mentioned below.

For offshore installations, common areas used during non-working hours must also be considered during the risk assessment. Changes may include reducing seating, spacing queues, and scheduling or otherwise reducing access to gyms, tv and smoking rooms (where these are provided).

Food service should also be reviewed to ensure that contact is minimised. The provider of catering and stewarding services should be included in this review.

Further Guidance:

Health Protection Scotland – Guidance for prevention and management of cases of COVID-19 on Offshore Installations

Step Change in Safety – COVID 19 Hub

https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19

https://www.hse.gov.uk/news/working-safely-during-coronavirus-outbreak.htm

5 Managing Visitors and Contractors

As covered in section 3, a key consideration in the management of visitors and contractors is to reduce where possible the number of personnel attending the installation and ensuring only those who need to attend in person are mobilised.

For those who do need to attend in person, existing arrangements for managing visitors and contractors going to offshore installations already provide mechanisms for delivering many key elements relevant to working safely with COVID-19. Mobilisation processes, site inductions and record keeping are standard, and can be used to ensure that COVID-19 related information is communicated and understood.

Installation operators should ensure that expectations and any additional requirements are clearly communicated prior to mobilisation for personnel travelling to installations during the pandemic, and review third party COVID-19 risk management plans where they could impact the risk on the installation. For example, operators may wish to check that any bridging documents between the installation operator and contracting companies covers issues such as responsibility for arranging onward travel for individuals returning to shore to enter self-isolation.

6 Cleaning and Sanitising the Workplace

As with any workplace during the pandemic, enhanced cleaning routines are in place onboard installations to minimise the risk of infection. The changes made should reflect the mechanism by which COVID-19 is known to spread, that is directly via respiratory droplets and aerosols and through transfer of these through contact points and then hands to eyes, mouth and face. Removing the virus from surfaces through cleaning and sanitising provides group protection. This includes personal hand and respiratory hygiene. Effective hand washing or sanitisation before and after contact with surfaces and avoiding touching the face with the hands, will reduce the likelihood of surface contamination, as well as reduce the potential for virus transfer via contaminated surfaces. This is particularly important before and after eating.

The risk assessment should consider the requirement for routine cleaning frequency, enhanced cleaning requirements, cleaning between shifts and between rotations, as well as the arrangements for cleaning following identification of potential cases offshore.

Increased frequency of cleaning points of shared contact will be necessary. These include door handles, work surfaces, chairs and tables, but also equipment that is shared during or across shifts.

Additional cleaning routines may also be required for accommodation where reducing cabin occupancy is not an available option, and for shared sanitary facilities.

COVID-19 cleaning routines should account for any changes in access times for cleaning communal areas and cabins as well as the additional cleaning itself. It is likely that existing assumptions about the ratio of stewarding personnel to POB will be inappropriate given the additional duties required, and any decision to change manning levels should include a review of the additional cleaning this may entail.

Normal disinfectants and equipment are sufficient to conduct cleaning of the workplace environment, although additional supplies may be needed. In addition, as it is possible that individuals will need to enter isolation while offshore, the PHE infection, prevention and control guidance on cleaning non-healthcare settings should be followed to ensure this is done safely.

COVID-19: cleaning in non-healthcare settings outside the home

7 PPE and Face Coverings

PPE is the last stage in the hierarchy of control, and industry's focus should therefore be on other measures which have a collective effect (e.g. social distancing and cleaning) in order to reduce the risk to ALARP. Only where these cannot be satisfactorily implemented should PPE be considered. WHO and current government advice is clear that during the pandemic, medical or surgical masks should be reserved for two groups – those displaying symptoms consistent with COVID-19, and those caring for those individuals. Healthcare workers performing high risk procedures may require RPE. Government advice is to use face coverings, which provide a small benefit in preventing the spread of infection, in situations where individuals may be unable to maintain social distancing from other people, and this is now mandatory in most onshore indoor communal settings. It is important to note that face coverings are deemed effective in reducing the spread of infection by the wearer, not as protection from infection for the wearer.

Operators may wish to consider the use of face coverings as a control measure in activities where social distancing is difficult to maintain. Any such use should take into account the proper donning, removal and conditions of use, and any safety implications arising, for example the suitability of the fabric for work environment, or impact on communications. In addition, consideration should also be given to use of face coverings while moving around in communal areas such as corridors and in other communal areas, as is mandatory in onshore locations in Scotland.

However, the existing requirements for RPE to protect workers from other respiratory hazards in the workplace are not superseded by this advice. Installation operators will therefore need to ensure availability of suitable RPE or FRSM, in general for the following reasonably foreseeable situations:

- "Normal" operations requiring respiratory protection, such as breaking containment, or emergency response duties
- Clinical assessment, treatment and care for individuals becoming symptomatic while onboard: primarily the installation medic and first aiders, if aerosol generating procedures are performed.
- Symptomatic individuals who need to leave isolation, for example during muster, or prior to and during transportation home.

Existing risk assessments and work instructions will identify the level of protection required in the first instance, government guidance is available on the appropriate RPE and other PPE to be used in the second, and symptomatic individuals should, wherever possible, use fluid resistant surgical masks (FRSM) in the third. Risk assessments should ensure that infection risk is considered for disposal of used RPE and face coverings. Further advice on face coverings and RPE can be found in the following documents:

HPS COVID-19 information and guidance for non-health and care settings

UK Gov COVID-19: infection prevention and control (IPC)

The offshore oil and gas industry introduced the wearing of specific "snood" face coverings for workers during transit to and from the installation, as recommended by UK and required by Scottish Government guidance, only after these had been tested in the HUET and assessed as posing a low risk of posing a threat to the aircraft as Foreign Object Debris (FOD).

Increased global demand for PPE has led to pressure on existing supply chains and shortages of certain equipment. Due diligence is always essential when sourcing equipment from new suppliers, but organisations may need to take extra steps to ensure that equipment is in date and appropriately certified. The British Safety Industry Federation website has resources to assist with the authentication of certification.

8 Workforce Management

8.1 Shift patterns and work groups

Limiting contact between different shifts or work groups can assist in preventing the spread of infection, particularly when thinking about access to common facilities and areas. Where teams are conducting tasks where social distancing is not fully implemented, then limiting the contacts those teams have with others will reduce risk. Staggering start and mealtimes should be relatively straightforward but may impact on cleaning routines as access will be more difficult with smaller numbers using spaces over a longer time. Where larger changes are made to working times, such as moving to day/night shift working or increasing the length of trip beyond 21 days, this should be covered in the risk assessment.

Step Change in Safety: OIM Guidance for Offshore Rotas and Rest Periods

If cohorting is used, consideration should be given to ensuring critical roles are covered between different groups (e.g. not all CROs can be in the same group).

Installation operators should note that if an individual develops symptoms while offshore, or is diagnosed with COVID-19 in the forty-eight hours following demobilisation, contact tracing will be needed to identify close contacts the individual has had while on board. Information about cohorts and work groups will be essential to this activity.

Someone offshore may also be identified as a contact following exposure to a confirmed case onshore. This would mean the offshore personnel may be advised to isolate for a period in line with government requirements from most recent exposure, or from symptom onset if the case shared a household with the member of staff.

8.2 Accommodation and Travel

8.2.1 Travel to and from Point of Mobilisation

An OGUK work group produced guidance on travel and accommodation for offshore workers, covering the movement at the commencement of their rotation from their ‘home location’ to ‘initial point for mobilisation pre-rotation’. Please note that this ‘initial point’ may be either a testing centre or a heliport or a quayside.

Government advice on using public transport is subject to change due to local conditions. However, it is assumed that public transport will continue to be available for work purposes.

OGUK guidelines address the safe movement of offshore workers at the conclusion of their work rotation from the ‘point of disembarkation post-rotation’ to return to ‘home location within the UK.

OGUK guidance on travel and accommodation can be found here:

OGUK Safe Passage Programme Guidelines

An exemption for offshore workers from the requirement to quarantine on entering the UK has been granted. Details are given on the government web site:

https://www.gov.uk/government/publications/coronavirus-covid-19-travellers-exempt-from-uk-border-rules/coronavirus-covid-19-travellers-exempt-from-uk-border-rules

https://www.gov.scot/publications/coronavirus-covid-19-international-travel-quarantine/pages/sectoral-exemptions/

An IMO circular on international movement of workers, including offshore energy sector workers is also available, see the suite of circulars No.4204 via https://docs.imo.org/.

8.2.2 Travel to and from Installation

Travel to and from offshore installation is primarily conducted via commercial air transport, on approximately six different types of helicopter airframe. Barriers have been installed between passengers and flight crews, and face coverings (snoods) are provided for use during the flight to minimise the possibility of droplet spread while in the aircraft.

Survival suits and lifejackets are routinely sanitised between uses, as are ear protectors.

Arrangements are also in place for the transfer of individuals who are suspected of having COVID-19, or have been in close contact with suspected cases and do not fall within the self-isolation exemption criteria.

Further Information:

OGUK Technical Note: Movement of Passengers During COVID-19 Pandemic

8.2.3 Accommodation Onboard the Installation

The requirement to ensure manning levels are sufficient to manage major accident hazard risks to ALARP levels is paramount when considering issues affecting offshore operations.

At the start of the COVID-19 pandemic, most installation operators reduced offshore POB to minimum levels, albeit ensuring that operations were safe to continue. This approach is not sustainable for the long term and all operators should consider, among other things, how to manage cabin allocations to permit increased POB levels offshore or to manage shift patterns in a sustained and controlled manner, whilst protecting the health of its offshore workforce.

Changes to accommodation arrangements are based on operational requirements applicable to the individual installation at the time, as determined by the duty holder and according to a suitable and sufficient risk assessment.

It is recommended that operators periodically reassess their arrangements, taking into account both the UK COVID-19 threat level and each of their installations' specific situation using a hierarchical approach to the risk assessment process. Operators wishing to move through the cabin occupancy levels should be able to demonstrate both the necessity of the planned work scopes the up manning will enable, and that it has not been possible to adequately liquidate the work scopes with single cabin occupancy arrangements. Each move through the hierarchy will retain the lower-level controls and require additional mitigation appropriate to the higher level. The justification required for moving to

pre-COVID-19 cabin occupancy arrangements will be commensurate with both the COVID-19 threat level and the installation's major accident hazard ALARP status.

Any risk assessment should also take account of the health status of personnel and may also include consideration of the COVID-19 status of the domestic location of origin of cabin occupants.

As with all other aspects of COVID-19 assessment of risk and resulting arrangements, the workforce should be engaged with and consulted on the introduction of any new or revised arrangements. It may be productive to request suggestions from the workforce on how sharing arrangements could work as part of this process.

Level 1 – Single Occupancy Arrangements
Offers the highest level of protection against transmission of an infectious disease when compared to other arrangements. Should be considered as the default where cabin numbers permit or where critical roles may require segregation. Should also be considered if an individual is deemed to be at a greater risk in the event of COVID-19 transmission (see higher risk people advice).

Level 2 – Sharing of Cabins Based on Day/Night Occupation
Protection achieved by keeping individuals apart even though they share the same cabin, by having one-person exclusive occupation on the day and night shift, including limiting access to any shared bathroom during the assigned period of occupancy. Does not require 'cohorting' arrangements, but will require enhanced cleaning routines, restrictions on who can occupy the cabin and during which periods, no sharing of toiletries and greater control of personal items (e.g. left in an individual's own locker)

Level 3 – Double Occupancy (Cohorting)
Two individuals in a cohort occupy the same cabin at the same time (either on days or nights). Protective measures could include further enhancement of cleaning routines (see section 6) and limiting contact between individuals in different cohorts. Systems should be in place to ensure physical distancing can be maintained in the cabin, such as rota planning to ensure only one person is moving around the cabin at any one time.

Level 4 – Double Occupancy (No Cohorting)
Sharing arrangement usually involving ad-hoc members of the workforce or short-term visitors for whom cohorting is not appropriate. Further risk assessment with careful consideration for cleaning requirements (frequency, level of cleaning) and sharing protocols should be undertaken prior to implementation of this sharing arrangement. Use of screening tests or isolation periods prior to double occupancy is recommended.

Triple occupancy should be considered only in circumstances as defined in the installation's approved safety case and in line with the requirements of the HSE Operations Notice 82. This type of occupancy level will be implemented with controls in line with level 3 or level 4 above, depending on whether the "double occupants" are in a cohort. Experience has shown that where cabins are shared, or split across day and night shifts, then common leisure areas are likely to be more heavily used. The maximum capacity available for such common areas, whilst being able to maintain social distancing, will be a limiting factor on sharing unless alternative areas can be found. A welfare impact assessment will demonstrate that facility factors, including cleaning and hygiene capabilities, have been evaluated and managed.

Cohorting is a recognised control measure to reduce the likelihood of infection spread between groups, but with increased risk to those within the cohort from other cohort members. Measures to reduce the likelihood of an outbreak of COVID-19 within a cohort should be demonstrably ALARP. Approaches to this include maintaining social distancing wherever possible, and demonstrating the prevalence of virus within the cohort is minimised, e.g. by allowing for the average five-day incubation period of the virus to elapse before joining a cohort, or to undergo regular health monitoring and screening testing. Due to the increased risk of infection occurring, personnel joining the installation for a period of less than the five-day average symptom onset period should not be included in a new cohort but may continue in a pre-existing cohort. If an individual within a cohort tests positive, then all members of that cohort may be assessed as close contacts and may be required to self-isolate depending on their vaccination status and risk assessment (see HPS guidance for prevention and management of cases of COVID-19 on Offshore Installations – link to be included once published), so consideration should be given to operational impacts of such an event affecting safety critical roles may have on a particular installation.

COVID-19 screening testing provides an additional measure to identify potential COVID-19 carriers and enable rapid isolation from the rest of the offshore population, as well as monitoring and treatment as appropriate. It should be noted that if an individual tests negative for the virus, this means they are at low risk of having COVID-19 at that moment in time. It does not mean they are necessarily negative for COVID-19 nor that they are no longer at risk of catching it in future. However, it is recognised by the Pandemic Steering Group that a COVID-19 screening testing programme, or a five-day non-exposure period before sharing commences, would form part of demonstrating ALARP levels of risk mitigation required for moving to level 3 and 4 arrangements.

It should be noted that in the event of an individual developing symptoms while offshore or being diagnosed with COVID-19 in the forty-eight hours following demobilisation, contact tracing will be needed to identify close contacts that the individual has had while on board. Information about cabin sharing will be essential to this activity, as level 3 and 4 arrangements will increase the likelihood of individuals to be assessed as close contacts. This would mean, for example, that personnel in the same safety critical role should not be allocated to level 3 or 4 arrangements together.

8.3 Communication and Training

Where new ways of working have been implemented, training and exercises may be required to ensure these are understood and implemented. Examples may include socially distanced mustering during emergency response exercises, and additional precautions for first-aiders.

Communication with personnel should include reminders about the symptoms of COVID-19, and what to do in the event of developing them. Clear instructions on where to go to avoid contact with other personnel, and how to contact the installation medic by phone should be available to all personnel.

The best controls to prevent the spread of COVID-19 are perhaps the hardest to implement. Changing personal behaviours is essential, and as with improving safety culture, changing personal hygiene behaviours will take time and effort.

Repeated and regular communication of facts about the virus, including the way the virus is spread, the symptoms it can cause, the action to be taken if any develop, and the behaviours needed to prevent it will be needed to ensure that behavioural change is implemented and maintained.

8.4 Managing a Case of COVID-19 Offshore

Arrangements should be made on board for the isolation of individuals, including accommodation, provision of medical supervision, meals, and roles in emergency procedures such as musters and drills, until such time as the individual can be removed from isolation or returned onshore to isolate at home.

When an individual is to isolate at home, clear instruction should be given, in line with current government advice, about what they should do, and how they will make the journey home from the heliport. See section 8.2.1 above for further information.

As described in the OGUK document on movement of passengers, close contacts of anyone testing positive for or developing symptoms of COVID-19 onboard must be identified.

Those who can provide evidence of being fully vaccinated, with at least two weeks having passed since the completion of the vaccination course, may be exempt from self-isolation so long as they have tested negative for COVID-19 and have satisfied any operator specific risk assessment criteria (which should include the requirement for a COVID-19 test).

For those who have not been fully vaccinated at least two weeks prior to contact, a risk-based decision should be made on whether they can remain offshore and continue to work under close monitoring, should isolate on board or return home to isolate there. This will also need to be done in the case of contacts of a confirmed case who develops symptoms of COVID-19 within 48 hours of demobilisation.

It should also be recognised that personal behaviours are the accountability of all those working offshore, and personnel should report to the medic without delay any change or development of symptoms.

While the likelihood of an outbreak onboard is minimised by the control measures in place, installation operators should manage any outbreak in line with current industry / PHS / PHE guidance to manage cases offshore (subject to regular review).

Guidance on this can be found in the document:

Public Health Scotland – Guidance for prevention and management of cases of COVID-19 on Offshore Installations

9 Further Guidance

Government Resources

Public Health Scotland – Guidance for prevention and management of cases of COVID-19 on Offshore Installations

https://www.gov.uk/government/publications/coronavirus-covid-19-travellers-exempt-from-uk-border-rules/coronavirus-covid-19-travellers-exempt-from-uk-border-rules

https://www.gov.scot/publications/coronavirus-covid-19-international-travel-quarantine/pages/sectoral-exemption

https://www.gov.scot/collections/coronavirus-covid-19-guidance/#businessesandemployers

https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19

https://www.hse.gov.uk/news/working-safely-during-coronavirus-outbreak.htm

Infection Prevention and Control

British Occupational Hygiene Society – COVID-19 Hub

https://www.hse.gov.uk/risk/controlling-risks.htm

https://www.hps.scot.nhs.uk/a-to-z-of-topics/covid-19/

Guidance for non-healthcare settings - COVID-19 health protection guidance - COVID-19 - Our areas of work - Public Health Scotland

UK Gov: COVID-19: infection prevention and control (IPC)

UK Gov: COVID-19: cleaning in non-healthcare settings outside the home

Offshore Oil and Gas Sector Resources

https://oguk.org.uk/covid-19/

https://www.stepchangeinsafety.net/workgroups/covid-19/

https://www.stepchangeinsafety.net/resources/oim-guidance-for-offshore-rotas-and-rest-periods/

Other Resources

http://www.bsif.co.uk/wp-content/uploads/2019/03/Certificate-checklist.pdf

oguk.org.uk/guidelines

OGUK Guidelines
Member companies dedicate specialist resources and technical expertise in developing these guidelines with OGUK with a commitment to work together, continually reviewing and improving the performance of all offshore operations.

Guidelines are free for our members and can be purchased by non-members.

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