



Medical Emergency Response and Occupational Health in Oil&Gas sector

Shell Health

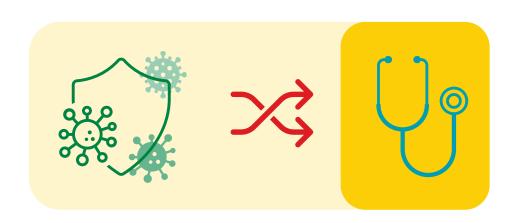
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Session Outline

Oil & Gas Medical Standards

- IOGP & IPIECA Standards
- Overview of Requirement
- Occupational Health Services
 - Occupational Health concept
 - Health Risk Assessment
 - Fitness to work
 - Telemedical service
- Medical Emergency Responses
 - MERP



IOGP - International Association of Oil&Gas Producers (Belgium)



IOGP represents the upstream oil and gas industry before international organizations including the International Maritime Organization, the United Nations Environment Programme (UNEP) Regional Seas Conventions and other groups under the UN umbrella. At the regional level, IOGP is the industry representative to the European Commission and Parliament and the OSPAR Commission for the North East Atlantic. Equally important is IOGP's role in promulgating best practices, particularly in the areas of health, safety, the environment and social responsibility.

The Global Oil and Gas Industry Association for Environmental and Social Issues (UK)



IPIECA is the global oil and gas industry association for environmental and social issues. It develops, shares and promotes good practices and knowledge to help the industry improve its environmental and social performance, and is the industry's principal channel of communication with the United Nations. Through its member-led working groups and executive leadership, IPIECA brings together the collective expertise of oil and gas companies and associations. Its unique position within the industry enables its members to respond effectively to key environmental and social issues.



Managing health for field operations in oil and gas activities

A guide for managers and supervisors in the oil and gas industry







Health 2011

Why? Engagement drives better performance!

Engagement and ratio of incidents per exposure hour

A 10 point increase in employee engagement score is associated with a 30-40% drop in the number of incidents*

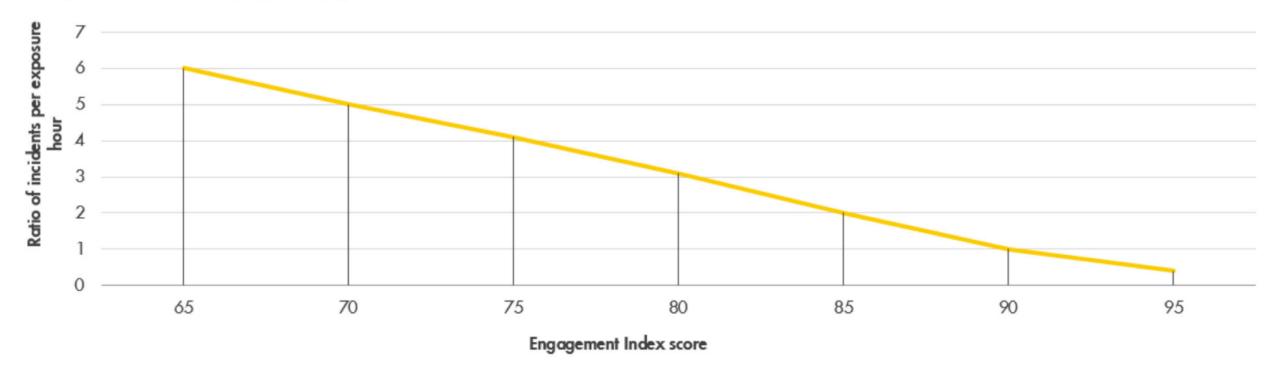


Figure 1: Based on a study at Royal Dutch Shell Higher employee engagement correlates with lower ratio of incidents in the workplace.

Managing Health for Field Operations in Oil & Gas

- Health Management System
- Occupational Health
- Health Risk Assessment
- Industrial Hygiene and Control of workplace exposure
- Medical Emergency Management
- Management of ill health
- Fitness for task assessment and health surveillance
- Health Impact Assessment
- Health reporting and recording
- Public Health interface and promotion of good health





Integrating health projects into a company's corporate social responsibility programme can complement existing government or community health programmes and support local capacity building.

Occupational illness is often poorly reported, but should be given the same importance as reporting an accident or incident occurring at the work site.



The identification and control of occupational health hazards in the field is key to maintaining appropriate standards of industrial hygiene.

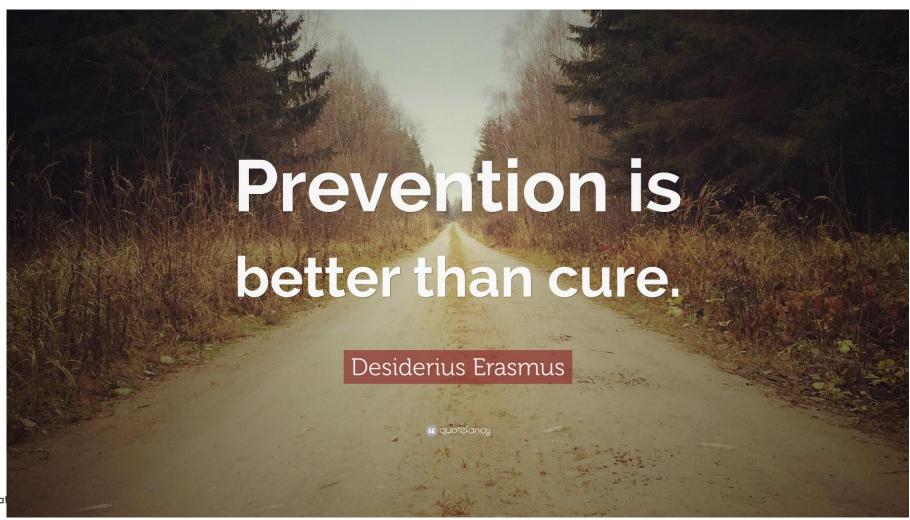




The workforce may consist of a combination of local, national and international staff; management should be sensitive to the diversity and requirements of its workforce and their dependants.

Occupational Health

"Better Prevention, Less Emergency"



Occupational Health

"Better Prevention, Less Emergency"

HRA: Health Risk Assessment

Risk = Hazard x Exposure

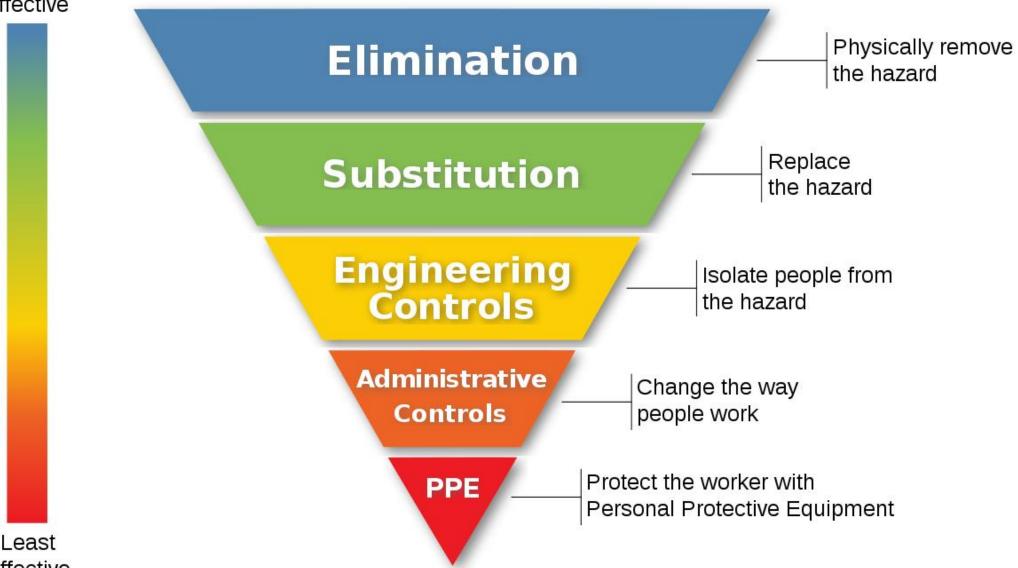
TABLE III. Risk assessment matrix

RISK ASSESSMENT MATRIX								
SEVERITY	Catastrophic (1)	Critical (2)	Marginal (3)	Negligible (4)				
Frequent (A)	High	High	Serious	Medium				
Probable (B)	High	High	Serious	Medium				
Occasional (C)	High	Serious	Medium	Low				
Remote (D)	Serious	Medium	Medium	Low				
Improbable (E)	Medium	Medium	Medium	Low				
Eliminated (F)		Elimi	nated					



Most effective

Hierarchy of Controls



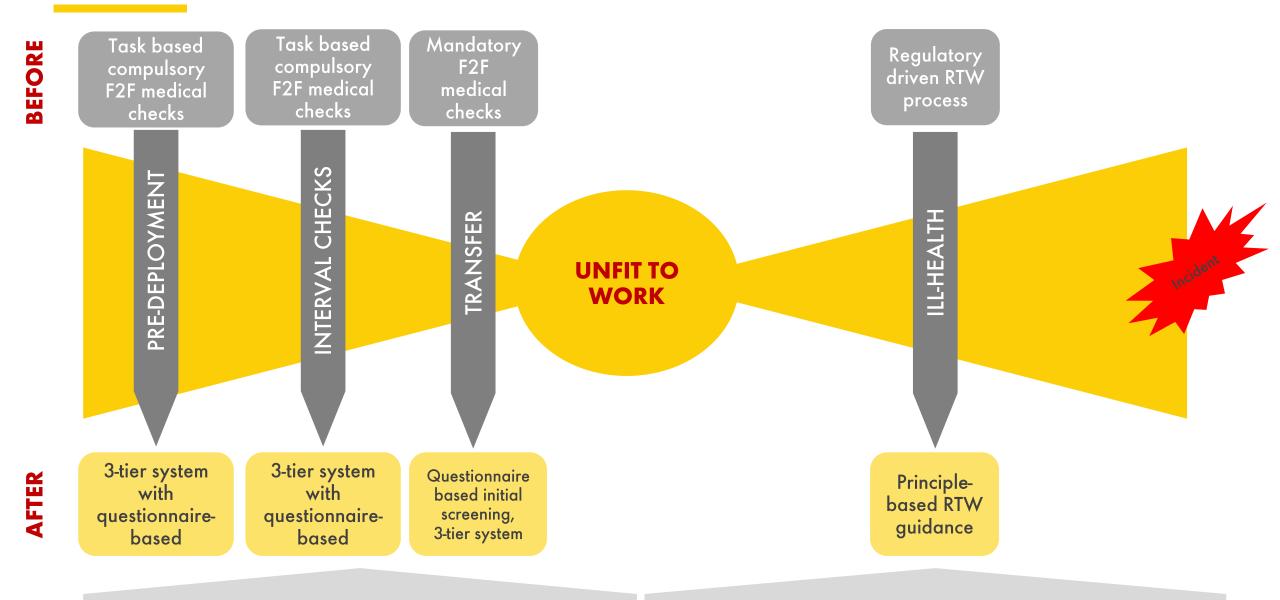
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ALARP: As Low As Reasonably Practicable



For each OHS Hazard Untreated Increasing individual risks and societal concerns Risk Application of cost effective control measures to reduce risk Ongoing action to Risk reduced to a maintain integrity of level that is control measures **ALARP** Cost of further risk treatment grossly disproportionate to the reduction in risk

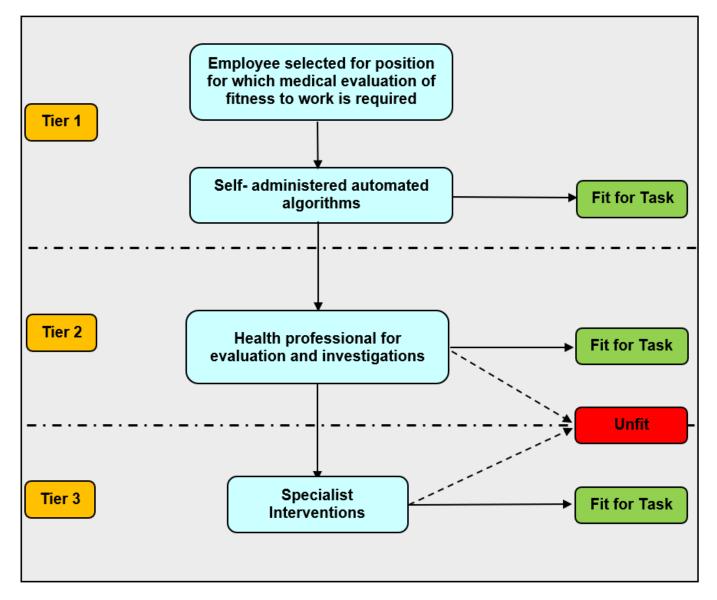
FITNESS TO WORK PRINCIPLE



HEALTH PROMOTION & PROTECTION

GOOD QUALITY EQUITABLE HEALTHCARE ACCESS

OVERVIEW SCREENING PROCESS





Fitness to Work Guide

WHAT'S NEW



Holistic approach to Fitness to Work (Promote / Protect / Access)



3-tier system with questionnaire-based assessment



F2F medical checks when indicated



Reset frequency to every 2 year



CVS score removed



Q1 Form updated



Outcome-focused Fitness to Work KPIs (WIP)



Included Comprehensive guidance on RTW



Included International Transfer Process



Links and Additional supports

- LINK for Guide to Medical Evaluation of FTW Specification
- LINK for Return to Work
- LINK for International Transfers

Question?

Contact: Thanawat Supanitayanon, Kelvin Gee, Folusho Alamina, Rincy Lal

Telemedicine

- Disruption for Healthcare

- Healthcare Resource at risk & Risk from Healthcare
- Worker Health Protection
- Promote Protect Access

COVID Era

- No F2F possible → Telemedical
- Sentinel Study yielded no change in Health outcome
- "Holistically" put effort in all worker health protection
 i.e. Trade testing, supervisor vigilance, psychological
 safety environment i.e. stop work



Image Credit: Ju Jae-young / Shutterstock.com

Medical Emergency Response



Medical Emergency Response Recommended Practice

1st August 2016

Medical Emergency Response Procedure (MERP)

To effectively manage medical emergencies, develop a site-specific (or activity-specific) medical emergency response procedure (MERP) prior to mobilisation. Take into account specific needs of the work activities and the general situation of the country in which these activities are carried out, as well as any collaboration with local authorities. See Appendix A: Medical Emergency Response Procedure (MERP) Example

- Design the MERP in a way that achieves:
 - o Tier 1: First aid treatment, including defibrillation, by a Designated First Aider within 4 minutes
 - o Tier 2: Assessment and stabilisation by a medical Emergency professional within 1 hour
 - o Tier 3: Admission to and care at the nearest Local Hospital within 4 hours
 - Tier 4: Referral to an appropriate Specialist Hospital (casualty specific)
- Obtain Shell Health's advice in designing the MERP.

Take into account the potential for individual and multiple casualties. Consider specific needs of the work activities and the general situation of the country in which these activities are carried out, as well as any collaboration with local authorities.

-	Tier	Ьу	at	Time (after incident)	Equipment/Transpo rt requirements	Training requirements	Skills maintenance requirements
	Tier 0 (Initiation)	Bystander	Site	Immediate	-	 Call for help Make area safe Do's and don'ts (usually one hour on induction, for everyone on site) 	• Annually
	Tier 1 (First aid and Defibrillation)	Designated First Aider (DFA)	Site	4 minutes	 First aid box Automated External Defibrillator (AED) 	 DFA Training (see Appendix F: DFA Competency) 	 DFA skills refresher (Usually every 3 months, for 2 hours)
	Tier 2 (Medical stabilisation)	Medical professional (e.g. Paramedic /Nurse /Doctor)	Ambulance / Clinic / Site Clinic	1 hour	 Trauma Bag Ambulance, and ambulance Equipment Site Clinic Equipment and Supplies 	 Professional medical training Advanced Life Support (ALS) training 	ALS training every 3 years
Cor	Tier 3 (Hospital admission and care)	Emergency physician	Hospital	4 hours	 Ground, sea or air transportation 	-	-

Summary

- Oil & Gas with New Energy Transition
- Industry standards: IOGP and IPIECA
- Fit-for-purpose actions: new approach to Fitness to Work (less is more)
- Focus to do only what is needed (Risk matrix)
- ALARP As low as reasonably practicable
- MERP Tier response 0,1,2,3

