

MEDICAL EVACUATION PBRI

OOQ QUARTERLY MEETING

Office of Safety Management

23 MARCH 2023



Bureau of Safety and Environmental Enforcement

Promoting Safety, Protecting the Environment and Conserving Offshore Resources



FATALITY – 7/28 (NON-OPERATIONAL)

- Non-Work Related Fatality - At approximately 06:00 a [REDACTED] employee (galley hand) was found in the bathroom non-responsive with minimal electrical activity indicated on the EKG. The onboard medic and crew initiated CPR and other life saving efforts. At approximately 07:00 the onshore doctor called the time of death. The USGS Sector Mobile was notified and approval was given to send the body onshore. A SARS flight departed the rig around 09:00 and transported the body to Mobile, where the body was released to the Mobile Coroner's Office.



FATALITY – 8/2 (NON-OPERATIONAL)

- Advised of person down in the galley/T.V. area. Upon arrival in the area observed person on the floor being held by his supervisor. A white foam was coming out of his mouth and nose. Placed him on his side in order for the foam to drain. He was breathing and had a faint pulse. It was observed that he then appeared to stop breathing. Unable to find a radial or carotid pulse. CPR was started and AED was retrieved. AED instructions were followed.
- A shock was administered and CPR continued for approximately 50 minutes with no pulse or response.
- Note: Information added on 9-6-2022
- On 8/2/22, the [REDACTED] employee was evacuated from the [REDACTED] and transported by Acadian Air Med emergency flight where arrangements were made with a coroner. On 8/2/22 at 10:29 hours, [REDACTED] received an email that the coroner located in New Iberia, LA has pronounced him deceased.



FATALITY – 8/18 (NON-OPERATIONAL)

- On August 18, 2022, an incident (death of natural causes) resulting in a single fatality occurred on Lease OCS-G [REDACTED], a production platform owned and operated by [REDACTED].
- On the day of the incident Contract Personnel (CP) complained of not feeling well and went to his assigned room. It was noticed that CP did not come down for lunch and other personnel went to check on CP and CP was unresponsive.
- Immediately an AED was used and CPR commenced. One Gulf Emergency Flight was notified and supported personnel until the victim was transported to Galliano and released to Lafourche Parish Coroner.
- BSEE Houma District and USCG were notified promptly of the incident.



FATALITY – 9/7 (NON-OPERATIONAL)

- CI was in galley of the [REDACTED], waiting on weather, with co-workers, when he made an exclamation and collapsed to the floor. Co-workers and contract safety technician immediately ran to his aid. Breathing was sporadic for a minute then ceased and he was unresponsive.
- CPR was started immediately (945), rotating compressions among available crew members. Captain was instructed to go to neighboring platform with heliport SMI 128, to meet helicopter. Safety Tech notified at 1000. OneGulf was contacted at 1009 to arrange medevac flight. [REDACTED] arrived at SMI 128 at approximately 1130. Platform onboard contract paramedic (PharmaSafe) transferred to M/V [REDACTED] to examine CI. Paramedic initiated cardiac protocols and vitals were checked using LifePak and all found to be absent. Paramedic then conferred with his medical control and was advised to discontinue CPR at 1140.



FATALITY – 9/23 (NON-OPERATIONAL)

- At approximately 8:20 AM on September 23rd, platform personnel discovered an unresponsive employee (IP) face down on the deck. IP was rolled onto his back, evaluated, and CPR began. Other personnel were dispatched to retrieve AED and medical supplies, while one went to make notifications. Shortly after, personnel arrived with the AED, and it was applied to the IP. Personnel continued CPR while waiting for medical evacuation helicopter. At approximately 12:00 PM, IP was removed from facility by medical evacuation helicopter and subsequently, formally, pronounced dead.

FATALITY – 10/21 (NON-OPERATIONAL)



- Employee was assisting production personnel fueling the crane when he suddenly collapsed onto the platform deck and became unresponsive. Personnel on the platform quickly responded and immediately applied an AED to the Employee and began CPR. A medivac aircraft was dispatched for medical support assistance while platform personnel continued to resuscitate the employee. Medivac personnel arrived on location and relieved personnel working on employee. Following an unsuccessful attempt to revive the employee, he was transported to Houma, La. and released to the Terrebonne Parish Coroner's Office.
- NOTE: The cause of the death is unknown at this time. Co-workers on the platform stated the employee was acting normal during breakfast time and during the morning safety meeting. The employee did not complain of any type of illness during the morning time prior to the event occurring.

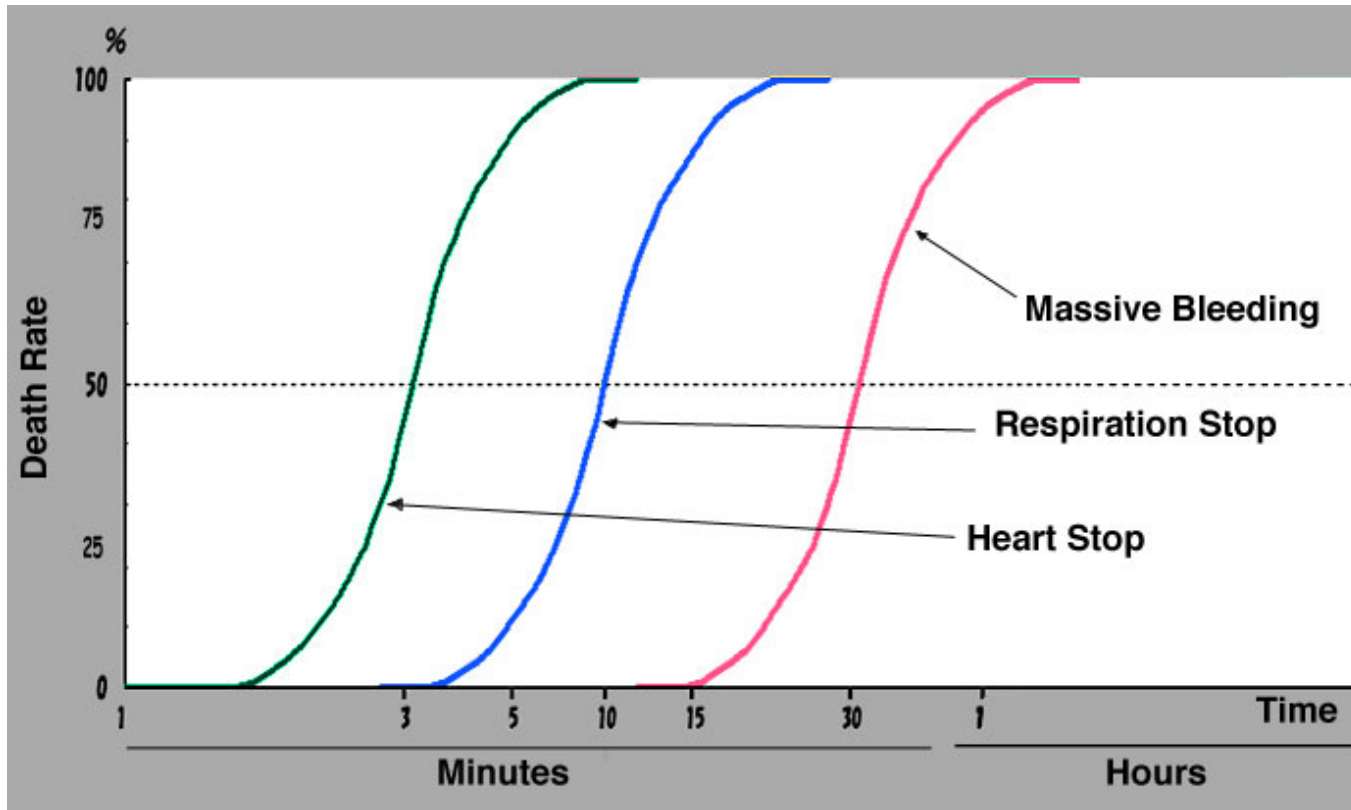
RECENT INFORMATION SHARED WITH BSEE



This past Monday I went out [REDACTED] This is the platform that had the non-work related fatality. Speaking with the PIC about the incident and going over all the details, there were a few things that caught my attention that I'd like to see BSEE step up and make some changes to policies or whatever. The first issue was brought up by the PIC, this was the **lack of actual hands on training for CPR**. He stated that it has been quite a few years since they've actually attended a hands-on CPR training class, and felt at the minimum they should be doing in-person, hands-on training at least every other year. Something that caught my attention when the PIC was talking about carrying the deceased worker up to the heliport, was the **difficulty they had carrying him up the stairs in the Stokes litter**. I feel as though we should require all platforms to not only have the stokes litter, but also a stair evacuation chair. God forbid workers trying to carry a litter up the stairs and drop the IP or deceased into the Gulf or onto a deck below. The last thing and something that I always felt as though is lacking, is the medical training they receive. **A lot of platforms on the shelf don't have an on-board medic**. When you have a day out there where the seas are too rough for a boat and the weather is unfavorable for flight, **what happens when someone becomes seriously injured with no medic on board or able to get to the IP?** I feel as though every platform should have at least one person on-board that has gone through a little more training than just being able to put a bandaid on the injury.



MEDICAL EMERGENCY PBRI REPORT






MEDICAL EMERGENCY PBRI OVERVIEW

- Covered twenty (20) assets (12 production facilities and 8 well operation units)
 - Operated by fifteen (15) unique Operators.
- Inspections between January 16, 2023, and January 27, 2023.
- Inspections accounted for greater than 217 hours during the offshore portion (Inspection, Paperwork, and Travel Time), greater than 720 hours during the onshore portion (incident and INC analysis, protocol development, training, and post inspection evaluations) and review of 952 files.
- OSM facilitated five (5) training sessions with Regional and District personnel assigned to conduct the PBRI. The training provided guidance on the inspection protocol and how to access GOMR shared drive information for facility specific documentation. This training was attended by one hundred twenty-two (122) unique people.

PBRI PROTOCOL – UNIQUE TO THIS INSPECTION





BSEE Performance Based Risk Inspection
Inspection Form: Medical Emergency and Response

BSEE Inspector Printed Name: _____ Date Recorded: _____
 BSEE Inspector Printed Name: _____ Date Recorded: _____
 BSEE Inspector Printed Name: _____ Date Recorded: _____

Location (Area Block and Name): _____ Complex ID: _____
 Designated Operator: _____ Operator Representative: _____
 Facility Contractor: _____ Contractor Representative: _____

PIC=Person In Charge OP=Operator Rep

Compliance (C) - PBRI (PB)	No.	Task Mark if Completed	Task Mark if Not Completed	Task Mark if Not Applicable	Additional Documentation Required	BSEE Inspector(s) Task Initials	SEMS Specialist or Inspector	Operator IAME	Task Time Estimate	Procedure / Tasks	Comments Section Note: Deficiency & comments document below
PB	1							OP	10Min	Does the Operator / Contractor make their injury/illness log for 2 years available to BSEE upon request? § 250.1928 Request is to compare reportable evacuations made to BSEE and compare to what was actually evacuated - eg - medical emergency Gather logs at the time of inspection - critical information is time of medical event and time of evacuation / arrival at medical facility onshore	
PB	2							OP	10Min	Does the Operator have adequate first aid supplies available to facility personnel? Is there documentation of inspections conducted on medical supplies? (If on fixed manned platform - see Compliance No. 1) Does Operator require first aid kits on unmanned facilities where construction crews are working? (include emergency eyewash stations) -Gather documentation on the inspections / checklists -Request an inventory list of medical supplies contained in all first aid and emergency response kits. -Randomly verify contents match inventory list -Randomly check expiration dates of medicines or other supplies contained in kits -Ask several individuals in different positions (operator vs. contractor) if they know where all of the first aid kits and eyewash stations are located. This should be part of onboarding and assignment of lifeboat and other emergency items. -Obtain a fire and life saving equipment location plan and ensure the locations (first aid, eye wash, etc) are accurate and up to date	

PBRI DOCUMENT REQUEST LIST

- Given to Company/ Contractor Rep upon arrival
- OSM phone number available
- Streamlines the process



Document Request List
 1/16/23-1/27/23
 BSEE Contact: Jason Mathews
 Mailing Address: 1201 Elmwood Park Blvd., MS GE1073E, New Orleans, LA 70123

Performance Based Risk Inspection - Medical Emergency
 Email: jason.mathews@bsee.gov
 Phone: 504.731.1496

Inspector Name: [Redacted] Inspection Date:
 Facility Name: [Redacted] Operator Name:

*** Please ensure that all documents collected indicate which Facility - Unit associated with. ***

Document to request	Inspector's Comments
POB list/personnel roster for the date of the inspection (list includes positions and company) PB#11	
Injury / Illness logs for the last two years in accordance with § 250.1928 PB#1	
Logs of evacuations in last 6 months that show event and time of evacuation / departure from facility / arrival at medical facility onshore PB#1 and PB#12	
Documentation of inspections of first aid supplies at the subject facility PB#2	
Operator's Emergency Response and Control plan for the subject facility PB#3	
Medical evacuation / emergency drills of the last 6 months PB#4 - If none in the last 6 months, request latest completed	
Latest First Aid / CPR / AED procedure reviews PB#6	
Operator / Contractor Training Requirements on First Aid, CPR, AED, and BBP - PB#7	
If medical representative onboard, request latest certificates - PB# 9	
Documentation of the latest medical evacuation plan drill / review - PB#10	

MEDICAL EMERGENCY PBRI REPORT

- During the PBRI, only two (2) facilities received Incidents of Noncompliance (INCs) for areas of concern identified within the scope of the Medical Evacuation inspection protocol. One of the facilities received seven (7) INCs, and BSEE met with the Operator to address immediate concerns and gaps surrounding offshore safety.

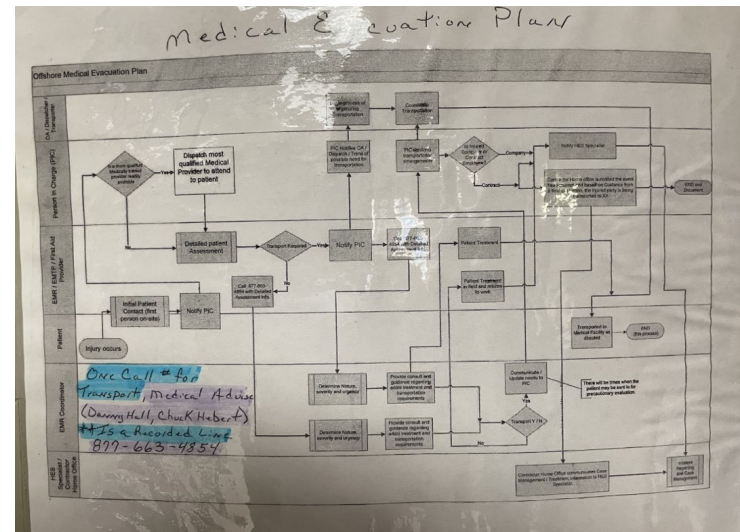


Egress routes not clear and free of obstructions



MEDICAL EMERGENCY PBRI REPORT

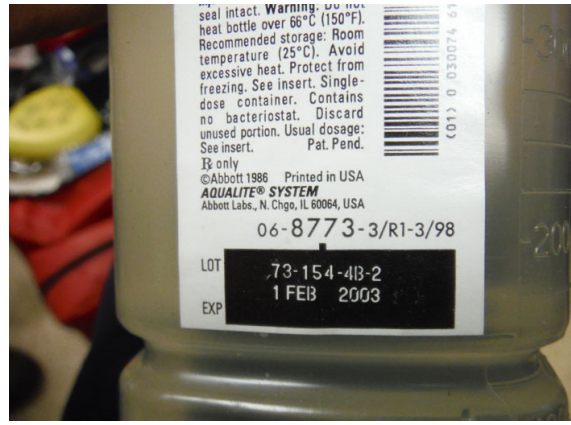
- BSEE concluded industry had a wide range of inconsistency when documenting and recording injuries and illnesses. Of the evacuations evaluated by BSEE, the average time from the incident to arrival at a medical facility was approximately 6.8 hours. Multiple evacuations reviewed were impacted by weather, capabilities of flight crew ordered, and determination of the immediate offshore crew if a medical evacuation was warranted. Lastly, BSEE identified a case where an offshore medic had to be evacuated because they were injured and found to be intoxicated.



Evacuation plan offshore with wrong phone number

MEDICAL EMERGENCY PBRI REPORT

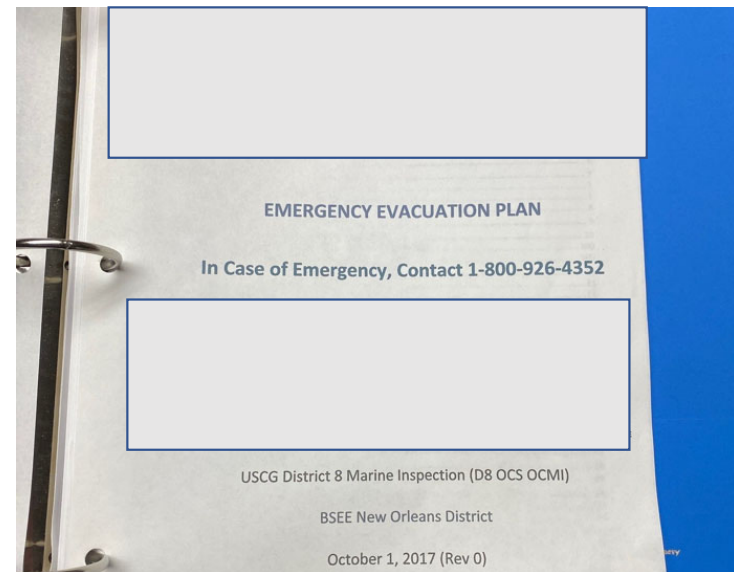
- BSEE concluded multiple operators had no mechanism or process implemented to regularly inspect medical supplies, ensure facility personnel were knowledgeable of first aid kit locations, and adequately supply the number of personnel on location.





MEDICAL EMERGENCY PBRI REPORT

- During the Medical Emergency and Response PBRI, BSEE identified concerning trends with response plans which were outdated, included inaccurate emergency contact information, and were not available to offshore personnel. Additionally, the Person in Charge was often the only person aware of the emergency response plan contents, and it did not take into account if he/she became incapacitated.



Errant emergency contact number in place at facility and outdated Operator

MEDICAL EMERGENCY PBRI REPORT

- BSEE concluded although many Operators had prescriptive plans that required periodic medical emergency drills, multiple Operators did not conduct and/or document the drills. During drills conducted by BSEE during the inspection, there were multiple failures observed which included not aware of who to contact for medical evacuations; contact information that was provided to offer assistance was wrong; limited communications at the facility and with onshore personnel; and helicopters sent during the drill could not land on the subject facility and would have to hoist the litter from the facility which had no rigging to do so.

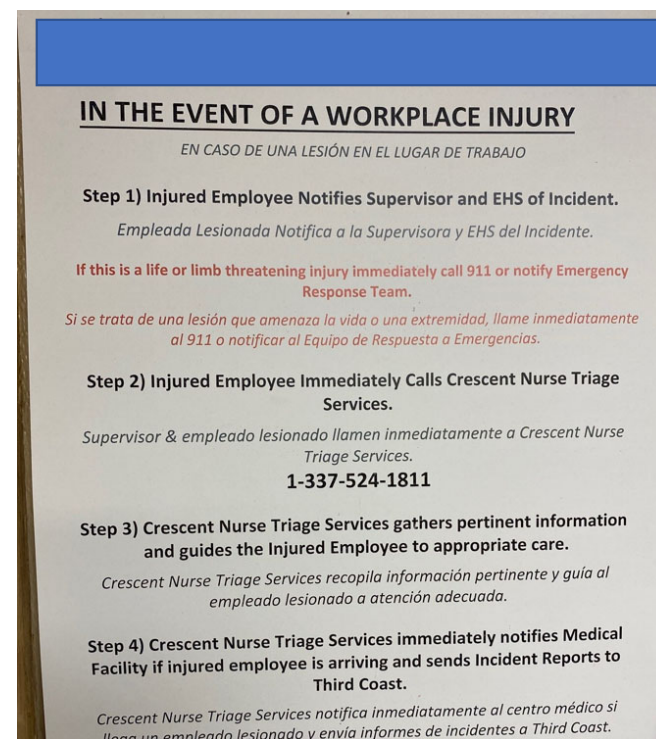


Stokes litter that had no available rigging to be lifted other than riding on a personnel basket



MEDICAL EMERGENCY PBRI REPORT

- BSEE concluded fourteen (14) of the twenty (20) manned-platform included in the Medical Emergency PBRI did not have a medic onboard or at near-by facilities. Of the facilities that had onboard medics, many of them were Emergency Medical Responders who could treat cardiac arrest, diabetes, stroke, heat stroke, seizure, breathing difficulties, and dehydration; however, they cannot provide treatment for of sutures and tracheostomy - among others. Most deep-water operators have begun to administer Tissue Plasminogen Activator to allow higher percentage of survival in remote locations that require three to four hours of travel to a hospital.



Poster without critical information on how to contact the “Emergency Response Team”

MEDICAL EMERGENCY PBRI REPORT

- BSEE determined all but one facility in the Medical Emergency had an Automated External Defibrillator (AEDs) on board, but some facilities did not have the AEDs in easily accessible locations, inspection checklists that followed manufacturer's recommendations, or personnel who could use the equipment outside of the onboard medic.



Expired AED pads found during PBRI



MEDICAL EMERGENCY PBRI REPORT

- BSEE determined there is only one sole-source medical emergency evacuation contractor located in Galliano, Louisiana and not every operator has a contract implemented with the company. The majority of the shelf Operators inspected rely on One Gulf which has limitations due to their coverage of inland incidents and medical flight management. Through the PBRI process, it was determined Operators do evaluate their helicopter contractors, and some recent audits indicated safety management system concerns with multiple providers in the GOM.

An advertisement for "24 HR OFFSHORE AMBULANCE SERVICE" by One Gulf. The top section features a green banner with the words "EMERGENCY OFFSHORE EMERGENCY" in white. Below this, there are two images: on the left, a medical team inside a helicopter; on the right, a helicopter with "AIR MED" written on its side. The main text is in a bold, red, italicized font: "24 HR OFFSHORE AMBULANCE SERVICE". Below this, a list of services is provided: "Our Helicopters Are Equipped With" followed by "Night Vision Goggles", "Dual Pilot IFR - Weather Radar", "Satellite Tracking & Communication", "H-TAWS + the Latest Navigation & Safety Technology", "Advanced Critical Care Life Support", "Cardiac Monitors", "12 Lead EKG Capable", "Defibrillator with Pacing Capability", and "Ventilators & IV Pumps". A red ribbon graphic on the right says "SINCE 198". At the bottom, there is a photo of a control room with the text "NREMT Paramedics & RN/NREMT Crews" and "Fully Licensed & Insured". The phone number "877 - ONE - GULF" is displayed in large white letters on a black background, with "877 - 663 - 4853" below it on a red background.



MEDICAL EMERGENCY PBRI REPORT

- BSEE determined there were multiple incidents throughout the GOM BSEE inspection program in the last five (5) years that resulted in medical treatment or evacuation.



BSEE initiated drill during the Medical Emergency PBRI



BSEE Website:
www.bsee.gov



[@BSEEGov](https://twitter.com/BSEEGov)



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