

# OPITO APPROVED STANDARD ERRV Crew Advanced Medical Aid

# **Training Standard**

Standard Title	Standard Code
ERRV Crew Advanced Medical Aid	6130
ERRV Crew Further Advanced Medical Aid	6135

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AME	NDMENTS				
AME	NDMENT & DATE	PAGES	CHANGES MADE BY	CHECKED BY	APPROVED BY
No	Revision 2 New revision published post full Industry Work Group Review during 2014 and 2015	All	SM	GTC	GSAA
1	May 2016 - Addition of "use (under medical supervision) of intravenous equipment" in Initial and Further programmes	15, 24	SM	SA	IWG

Any amendments made to this standard by OPITO will be recorded above.

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#### Introduction

This document introduces and describes the required knowledge, skills and safety training for ERRV Crew Advanced Medical Aid. The industry recognises that a major objective is to prevent incidents occurring and if they do to control and minimise their effect.

The purpose of this document is to set out the nature, objectives and the framework for the emergency response training and assessment requirements for ERRV Crew Advanced Medical Aiders which will be conducted at an onshore training establishment.

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#### **SECTION A** Advanced Medical Aid Training

#### A.1 Advanced Medical Aid Training Target Group

This programme is designed to meet the emergency response training and assessment requirements for an ERRV's Advanced Medical Aider.

#### A.2 Advanced Medical Aid Training Delegate Pre-requisites

Attendance on this training course is open to delegates who have a valid OPITO Initial Training Shipboard Operations certificate or reassessment to an equivalent standard through OODTP.

#### A.3 Advanced Medical Aid Training Physical and Stressful Demands

All Joining Instructions must contain information which indicates certain aspects of the programme are of a stressful nature. The responsibility for the individual completing the programme without any adverse effects to their present state of health lies with the individual and/or company sponsoring the delegate; where doubt exists regarding the medical fitness of any delegate the establishment should seek the advice of a medical officer.

OPITO-approved Centres are therefore required, as a minimum, to ensure that prior to participating in practical exercises the delegate or candidate provides written confirmation that they deem themselves physically and mentally capable of undertaking all aspects of the training or assessment. Centres must also make the delegate/candidate aware that they must immediately inform the Centre staff if this capability changes – at any time prior to, or during the programme.

Delegates/candidates must be advised that they are required to declare any current or preexisting medical conditions which may be exacerbated by, or impair their ability to complete, the training/assessment programme. Should this be the case, the individual may be required to provide an authentic medical certificate issued since any identified medical condition was diagnosed.

The OPITO-approved Centre shall keep a record of the delegate's/candidate's declaration of fitness in accordance with their document control policy(s) or procedures.

This information, along with summary details of the type of physical activities the delegate/candidate will be asked to perform, will be given to delegates/candidates by the OPITO-approved Centre and, if applicable, to their sponsoring company as part of the joining instructions. The responsibility for declaring any known current or pre-existing medical conditions that could have adverse effects to the individual's state of health while undertaking the training and/or assessment activities lies with the delegate/candidate and/or company sponsoring the delegate.



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Where doubt exists regarding the fitness of any delegate/candidate, the OPITO-approved Centre should direct the individual to consult a medical officer familiar with the nature and extent of the training.

Note: Practical exercises should be designed and delivered solely to meet this standard, and must not place on the delegates any physical or mental demands other than those required to meet the Standard.



#### A.4 Advanced Medical Aid Training Aim and Objectives

The aim and objectives of the Advanced Medical Aider training programme are to equip the delegate with the initial knowledge, understanding and skills required to perform the role of ERRV AMA.

**Note**: This role is separate from the STCW medical function.

#### A.5 Advanced Medical Aid Training Learning Outcomes

The Delegate's learning outcomes are set out below:

To successfully complete this programme, delegates must be able to explain:

- 1. The role and function of the ERRV Advanced Medical Aider (AMA)
- 2. The distinction between the AMA and the STCW medical function
- 3. Basic anatomy and physiology appropriate to the role of AMA
- 4. The principles and priorities of first aid
- 5. The principles of infection and safety precautions in first aid
- 6. The interaction of onboard and external sources of medical aid
- 7. The ongoing monitoring and recording of the condition of casualties
- 8. Preparations for casualty evacuation

To successfully complete this programme, delegates must be able to demonstrate:

- 9. Leadership and team working skills appropriate to the role of AMA
- 10. The communication skills appropriate to the role and responsibility of the AMA
- 11. The use of communications equipment
- 12. Donning appropriate PPE
- 13. The preparation of medical equipment including inspection, serviceability and reporting
- 14. The actions required for the reception of casualties
- 15. The actions required for initial examination and triage for casualties
- 16. The actions to provide the treatment required for casualties consistent with the anticipated scenarios following an offshore incident.
- 17. The use of medical equipment (including AED, oxygen, airway management and fluid replacement)
- 18. The ongoing monitoring and recording of the condition of casualties
- 19. Facilitation and appraisal skills appropriate to the role of AMA

Learning Outcomes 9 through 19 are to be assessed during practical exercises.



#### A.6 Advanced Medical Aid Training Delegate Performance Assessment

Assessment of delegates will be a summation of the following components:-

- a) Initial assessment
- b) Continuous assessment
- c) Final assessment by an external assessor.

The purpose of the initial assessment is to establish the retention of knowledge and understanding in relation to previous ERRV basic medical aid training. This will be achieved by an oral and or written questionnaire at course commencement.

The purpose of the continuous assessment is to ensure delegates are acquiring the necessary skills, knowledge and understanding of the medical and care aspects being covered. This will be achieved by direct observation of practical work and by oral and written questioning.

The final assessment, will be conducted by an assessor assisted by course instructional staff. It will take the form of direct observation of scenario based exercises supplemented by oral questioning.



#### A.7 Advanced Medical Aid Training Duration and Timing

The optimum 'contact time' for the training and assessment is 38 hours. Contact time does not include course administration, lunch and refreshment breaks.

Theoretical and practical components should be given equal emphasis.

The total contact time per day shall not exceed 8 hours. The total training day shall not exceed 10 hours (the total training day includes contact time, coffee and meal breaks and travel between training sites where applicable).



Modulo 1

Module 5

#### A.8 Advanced Medical Aid Training Programme

The Advanced Medical Aid Training Programme specified below is designed to help delegates achieve the stated learning outcomes specified in <u>Section A.5.</u> The contents in <u>Appendix 1</u> must be covered prior to delivery of the modules.

To make efficient use of time and ensure effective learning, there should, wherever practicable, be an integration of the three phases of explanation, demonstration and practise. Full use should be made of audio aids, visual aids and course handout material.

Prior to the start of each module, the following must be included as part of the introduction by training staff:

(a)	Aim	The main purpose of the module
(b)	Learning Outcomes	What the delegates are expected to learn
(c)	Timetable	Training module duration and timing
(d)	Assessment	How delegates will be assessed and what they will
		be assessed against
(e)	Staff	Who will be delivering the training and roles of
		training support staff.

The Advanced Medical Aid Training Programme comprises the following **modules** and **elements**:

Roles and Responsibilities of the Advanced Medical Aider

<u>wodule i</u>	Roles and Responsibilities of the Advanced Medical Aider
Element 1.1	Duties of the AMA
Element 1.2	Appraisal and facilitation skills required in the role of AMA
Element 1.3	Maintenance and upkeep of ERRV medical equipment and facilities.
Module 2 Element 2.1 Element 2.2	Principles and Priorities of ERRV Medical Aid Anatomy and Physiology as appropriate to the role of the AMA Understanding of anticipated scenarios encountered by the AMA following an offshore incident
Module 3	Preparation for Reception of Casualties
Element 3.1	Responding to Alarms
Element 3.2	Directing crew and appropriate communications
Module 4	Triage and Treatment of Casualties
Element 4.1	Initial reception and receiving casualties onboard
Element 4.2	Initial assessment
Element 4.3	Recognition and treatment of anticipated scenarios encountered by the AMA following an offshore incident
Element 4.4	Casualty monitoring and recording



**Casualty Transfer** 

Element 5.1 Preparing and transferring casualties for transfer from ERRV

#### MODULE 1 Roles and Responsibilities of the Advanced Medical Aider

#### **ELEMENT 1.1** Duties of the AMA

#### Training staff to **explain**:

- 1.1.1. The responsibilities to treat and care for casualties following an offshore incident external to the vessel.
- 1.1.2. Relevant legislation and guidelines (including current ERRV management and survey guidelines)
- 1.1.3. Ships Medical Stores provision and relevant current Merchant Shipping legislation
- 1.1.4. Leadership and coordination of the ERRV medical response

#### ELEMENT 1.2 Appraisal and facilitation skills required in the role of AMA

#### Training staff to **explain**:

- 1.2.1. Coordination, facilitation and documentation of OODTP Basic Medical Aid (BMA) crew training exercises
- 1.2.2. Appraisal of crew following participation in OODTP BMA crew training exercises.

#### Delegates to practice:

1.2.3. Facilitation and appraisal of an element of OODTP BMA crew training exercises

#### **ELEMENT 1.3** Maintenance and upkeep of ERRV medical equipment and facilities

#### Training staff to **explain**:

- 1.3.1. Medical equipment and facilities found onboard an ERRV
- 1.3.2. The maintenance and upkeep required for equipment and facilities appropriate to the role of AMA including:
  - 1) Triage and recording documentation
  - 2) Decontamination showers
  - 3) Survivor accommodation facilities
  - 4) Treatment room and it's associated medical equipment and resources
- 1.3.3. Recording the serviceability of equipment and confirming the status to the master of the vessel.



#### MODULE 2 Principles and Priorities of ERRV Medical Aid

#### **ELEMENT 2.1** Anatomy and Physiology as appropriate to the role of the AMA

#### Training staff to **explain**:

2.1.1	Principles of respiration and circulation
2.1.2	Function of circulatory system
2.1.3	Function of respiratory system
2.1.4	Function of muscloskeletal system
2.1.5	Function of nervous system

### ELEMENT 2.2 Understanding of anticipated scenarios encountered by the AMA following an offshore incident

#### Training staff to explain:

- 2.2.1 The basic physiological results of the following conditions:
  - a) Cold and immersion injuries (including drowning, near drowning, secondary drowning, hypothermia, frostbite and contamination)
  - b) Unconsciousness (including causes and levels)
  - c) Major and minor blood loss
  - d) Wounds
  - e) Burns and scalds
  - f) Fractures, dislocations and soft tissue injuries
  - g) Chest and abdominal injuries
  - h) Blast injury
  - i) Spinal injuries
  - j) Sea sickness
  - k) Head injuries
  - I) Crush injuries and suspension trauma
  - m) Cardiac arrest and heart attack
  - n) Shock
  - o) Psychological trauma



#### **MODULE 3** Preparation for Reception of Casualties

#### **ELEMENT 3.1** Responding to Alarms

Training staff to explain:

- 3.1.1 Identifying the nature of the incident
- 3.1.2 Establishing and maintaining effective internal and external communications (including Rescue Craft, Installation/rig medic, ship to shore medical radio link)
- 3.1.3 Donning the appropriate PPE

#### **ELEMENT 3.2** Directing crew and appropriate communications

Training staff to **explain**:

- 3.2.1 Directing the crew in preparation and in duties relevant to the incident
- 3.2.2 Confirming the state of readiness with the crew
- 3.2.3 Confirming the state of readiness with the master

#### **MODULE 4** Triage and Treatment of Casualties

#### **ELEMENT 4.1** Initial reception and receiving casualties onboard

Training staff to explain:

- 4.1.1 Principles and management of the contaminated casualty
- 4.1.2 Transfer and recording procedures

#### **ELEMENT 4.2** Initial assessment

Training staff to **explain** and **demonstrate**, then delegates **to practice**:

- 4.2.1 Triage
- 4.2.2 Primary survey (including record keeping)
- 4.2.3 Secondary survey
- 4.2.4 Directing crew to transfer casualties to the appropriate area



# ELEMENT 4.3 Recognition and treatment of anticipated scenarios encountered by the AMA following an offshore incident

#### Training staff to **explain**:

- 4.3.1 Recognition and treatment (including the use of appropriate ERRV medical equipment) of the following:
  - a) Cold and immersion injuries (including drowning, near drowning, secondary drowning, hypothermia, frostbite and contamination)
  - b) Unconsciousness (including causes and levels)
  - c) Major and minor blood loss
  - d) Wounds
  - e) Burns and scalds
  - f) Fractures, dislocations and soft tissue injuries
  - g) Chest and abdominal injuries
  - h) Blast injury
  - i) Spinal injuries
  - j) Sea sickness
  - k) Head injuries
  - I) Crush injuries and suspension trauma
  - m) Cardiac arrest and heart attack
  - n) Shock
  - o) Psychological trauma
- 4.3.2 Safe administration of medications, oxygen and entonox

#### Training staff to **demonstrate**, then delegates **to practice**:

- 4.3.3 Resuscitation procedures\* covering actions to be taken for a witnessed collapse and a drowning casualty
  - \*Resuscitation procedures must be in accordance with current Resus Council guidance
- 4.3.4 Treatment (including the use of appropriate ERRV medical equipment) of the following:
  - a) Unconscious casualty
  - b) Wounds and bleeding
  - c) Burns and scalds
  - d) Cold water immersion
  - e) Fractures, dislocations and soft tissue injuries
- 4.3.5 Use (under medical supervision) of intraosseous infusion device
- 4.3.6 Use (under medical supervision) of intravenous equipment
- 4.3.7 Use (under medical supervision) of advanced airway management device



#### **ELEMENT 4.4** Casualty monitoring and recording

#### Training staff to explain:

- 4.4.1 Monitoring vital signs
- 4.4.2 Recording the condition of casualties using appropriate documentation
- 4.4.3 Responding to any changes in casualty condition

#### MODULE 5 Casualty Transfer

#### **ELEMENT 5.1** Preparing and transferring casualties for transfer from ERRV

Training staff to **explain** and **demonstrate**, then delegates **to practice**:

5.1.1 Preparing casualties for transfer from ERRV (including procedures for casualty handling for walking and stretcher casualties)

#### Training staff to **explain**:

- 5.1.2 Monitoring procedures for casualties during transfer from the ERRV (including helicopter, FRC/other craft, transfer basket, port of call)
- 5.1.3 Communicating casualty information to the receiving medical unit including updated monitoring, triage and treatment information.

All exercises in the AMA training programme should incorporate aspects of Rescue, Recovery, Care and Transfer as appropriate.

**Note**: Team working to be used where appropriate.



#### **SECTION B** Further Medical Aid Training

#### B.1 Further Advanced Medical Aid Training Target Group

This programme is designed to meet the updating, further practice and assessment requirements for an Advanced Medical Aider. It should be undertaken within 2 years of qualification as an Advanced Medical Aider and at periods not exceeding 2 years thereafter.

#### **B.2** Further Advanced Medical Aid Training Delegate Pre-requisites

Attendance on this programme is open to delegates who are in possession of a valid ERRV Crew Advanced Medical Aid certificate and who have a valid OPITO Initial Training Shipboard Operations certificate or reassessment for the Rescue Care element through OODTP.

# B.3 Further Advanced Medical Aid Training Physical & Stressful Demands

All Joining Instructions must contain information which indicates certain aspects of the programme are of a stressful nature. The responsibility for the individual completing the programme without any adverse effects to their present state of health lies with the individual and/or company sponsoring the delegate; where doubt exists regarding the medical fitness of any delegate the establishment should seek the advice of a medical officer.

OPITO-approved Centres are therefore required, as a minimum, to ensure that prior to participating in practical exercises the delegate or candidate provides written confirmation that they deem themselves physically and mentally capable of undertaking all aspects of the training or assessment. Centres must also make the delegate/candidate aware that they must immediately inform the Centre staff if this capability changes – at any time prior to, or during the programme.

Delegates/candidates must be advised that they are required to declare any current or preexisting medical conditions which may be exacerbated by, or impair their ability to complete, the training/assessment programme. Should this be the case, the individual may be required to provide an authentic medical certificate issued since any identified medical condition was diagnosed.

The OPITO-approved Centre shall keep a record of the delegate's/candidate's declaration of fitness in accordance with their document control policy(s) or procedures.

This information, along with summary details of the type of physical activities the delegate/candidate will be asked to perform, will be given to delegates/candidates by the OPITO-approved Centre and, if applicable, to their sponsoring company as part of the joining instructions. The responsibility for declaring any known current or pre-existing medical conditions that could have adverse effects to the individual's state of health while



undertaking the training and/or assessment activities lies with the delegate/candidate and/or company sponsoring the delegate.

Where doubt exists regarding the fitness of any delegate/candidate, the OPITO-approved Centre should direct the individual to consult a medical officer familiar with the nature and extent of the training.

Note: Practical exercises should be designed and delivered solely to meet this standard, and must not place on the delegates any physical or mental demands other than those required to meet the Standard.

#### B.4 Further Advanced Medical Aid Training Aim and Objectives

The aim and objectives of the Further Advanced Medical Aider training programme are to ensure the delegate maintains the knowledge, understanding and skills required to perform the role of ERRV AMA.

**Note**: This role is separate from the STCW medical function.



#### **B.5** Further Advanced Medical Aid Training Learning Outcomes

The delegate's learning outcomes are set out below:

To successfully complete this programme, delegates must be able to explain:

- 1. The distinction between the AMA and the STCW medical function
- 2. Basic anatomy and physiology appropriate to the role of AMA
- 3. The principles and priorities of first aid
- 4. The principles of infection and safety precautions in first aid
- 5. The interaction of onboard and external sources of medical aid
- 6. The ongoing monitoring and recording of the condition of casualties
- 7. Preparations for casualty evacuation

To successfully complete this programme, delegates must be able to demonstrate:

- 8. Leadership and team working skills appropriate to the role of AMA
- 9. The communication skills appropriate to the role and responsibility of the AMA
- 10. The use of communications equipment
- 11. Donning appropriate PPE
- 12. The preparation of medical equipment including inspection, serviceability and reporting
- 13. The actions required for the reception of casualties
- 14. The actions required for initial examination and triage for casualties
- 15. The actions to provide the treatment (including relevant change in medical practice) required for casualties consistent with the anticipated scenarios following an offshore incident.
- 16. The use of medical equipment (including AED, oxygen, airway management and fluid replacement)
- 17. The ongoing monitoring and recording of the condition of casualties
- 18. Facilitation and appraisal skills appropriate to the role of AMA

Learning Outcomes 8 through 18 are to be assessed during practical exercises.



# B.6 Further Advanced Medical Aid Training Delegate Performance Assessment

Assessment of delegates will be a summation of the following components:-

- a) Initial assessment
- b) Continuous assessment
- c) Final assessment by an assessor.

The purpose of the initial assessment is to establish the retention of knowledge and understanding in relation to previous ERRV advanced medical aid training. This will be achieved by an oral and or written questionnaire at course commencement.

The purpose of the continuous assessment is to ensure delegates are acquiring the necessary skills, knowledge and understanding of the subject matter being covered. This will be achieved by direct observation of practical work and by oral/written questioning.

The final assessment, will be conducted by an assessor assisted by course instructional staff. It will take the form of direct observation of scenario based exercises supplemented by oral questioning.



#### B.7 Further Advanced Medical Aid Training Duration and Timing

The optimum 'contact time' for the training and assessment is seen as **15 hours**. Contact time does not include course administration, lunch and refreshment breaks.

Theoretical and practical components should be given equal emphasis.

The total contact time per day shall not exceed 8 hours. The total training day shall not exceed 10 hours (the total training day includes contact time, coffee and meal breaks and travel between training sites where applicable).



Modulo 1

#### **B.8 Further Advanced Medical Aid Training Programme**

The Further Advanced Medical Aid Training Programme specified below is designed to help delegates achieve the stated learning outcomes specified in Section A.5. The contents in Appendix 1 must be covered prior to delivery of the modules.

To make efficient use of time and ensure effective learning, there should, wherever practicable, be an integration of the three phases of explanation, demonstration and practise. Full use should be made of audio aids, visual aids and course handout material.

Prior to the start of each module, the following must be included as part of the introduction by training staff:

(f)	Aim	The main purpose of the module
(g)	Learning Outcomes	What the delegates are expected to learn
(h)	Timetable	Training module duration and timing
(i)	Assessment	How delegates will be assessed and what they will
		be assessed against
(j)	Staff	Who will be delivering the training and roles of
		training support staff.

The Advanced Medical Aid Training Programme comprises the following modules and elements:

Roles and Responsibilities of the Advanced Medical Aider

<u>Module 1</u>	Roles and Responsibilities of the Advanced Medical Alder
Element 1.1	Duties of the AMA
Element 1.2	Appraisal and facilitation skills required in the role of AMA
Element 1.3	Maintenance and upkeep of ERRV medical equipment and facilities.
Module 2	Principles and Priorities of ERRV Medical Aid
Element 2.1	Anatomy and Physiology as appropriate to the role of the AMA
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<b>Module 3</b>	Preparation for Reception of Casualties
Element 3.1	Directing crew and appropriate communications
Module 4	Triage and Treatment of Casualties
Module 4 Element 4.1	
	Triage and Treatment of Casualties Initial reception and receiving casualties onboard Initial Assessment
Element 4.1 Element 4.2	Initial reception and receiving casualties onboard Initial Assessment
Element 4.1	Initial reception and receiving casualties onboard Initial Assessment Recognition and treatment of anticipated scenarios encountered by the AMA
Element 4.1 Element 4.2 Element 4.3	Initial reception and receiving casualties onboard Initial Assessment Recognition and treatment of anticipated scenarios encountered by the AMA following an offshore incident
Element 4.1 Element 4.2	Initial reception and receiving casualties onboard Initial Assessment Recognition and treatment of anticipated scenarios encountered by the AMA
Element 4.1 Element 4.2 Element 4.3	Initial reception and receiving casualties onboard Initial Assessment Recognition and treatment of anticipated scenarios encountered by the AMA following an offshore incident
Element 4.1 Element 4.2 Element 4.3 Element 4.4	Initial reception and receiving casualties onboard Initial Assessment Recognition and treatment of anticipated scenarios encountered by the AMA following an offshore incident Casualty monitoring and recording



#### MODULE 1 Roles and Responsibilities of the Advanced Medical Aider

#### **ELEMENT 1.1** Duties of the AMA

Training staff to **explain**:

- 1.1.1. Update to Relevant legislation and guidelines (including current ERRV management and survey guidelines)
- 1.1.2. Ships Medical Stores provision and relevant current Merchant Shipping legislation
- 1.1.3. Leadership and coordination of the ERRV medical response

#### **ELEMENT 1.2** Appraisal and facilitation skills required in the role of AMA

Delegates to practice:

1.2.1. Facilitation and appraisal of an element of OODTP BMA crew training exercises

#### **ELEMENT 1.3** Maintenance and upkeep of ERRV medical equipment and facilities

Training staff to **explain**:

1.3.1. Update on medical equipment and facilities found onboard an ERRV

#### MODULE 2 Principles and Priorities of ERRV Medical Aid

#### **ELEMENT 2.1** Anatomy and Physiology as appropriate to the role of the AMA

Training staff to **explain**:

- 2.1.1 Principles of respiration and circulation
- 2.1.2 Function of circulatory system
- 2.1.3 Function of respiratory system
- 2.1.4 Function of muscloskeletal system
- 2.1.5 Function of nervous system

#### **MODULE 3** Preparation for Reception of Casualties

#### **ELEMENT 3.1** Directing crew and appropriate communications

Training staff to explain:

- 3.1.1 Directing the crew in preparation and in duties relevant to the incident
- 3.1.2 Confirming the state of readiness with the crew
- 3.1.3 Confirming the state of readiness with the master



#### **MODULE 4** Triage and Treatment of Casualties

#### **ELEMENT 4.1** Initial reception and receiving casualties onboard

#### Training staff to **explain**:

- 4.1.1 Principles and management of the contaminated casualty
- 4.1.2 Transfer and recording procedures

#### **ELEMENT 4.2** Initial Assessment

Training staff to **explain** and **demonstrate**, then delegates **to practice**:

- 4.2.1 Triage
- 4.2.2 Primary survey (including record keeping)
- 4.2.3 Secondary survey
- 4.2.4 Directing crew to transfer casualties to the appropriate area

# ELEMENT 4.3 Recognition and treatment of anticipated scenarios encountered by the AMA following an offshore incident

Training staff to explain and **demonstrate**, then delegates **to practice**:

- 4.3.1 Resuscitation procedures\* covering actions to be taken for a witnessed collapse and a drowning casualty
  - \*Resuscitation procedures must be in accordance with current Resus Council guidance
- 4.3.2 Treatment (including relevant change in medical practice and the use of appropriate ERRV medical equipment) of the following:
  - a) Unconscious casualty
  - b) Wounds and bleeding
  - c) Burns and scalds
  - d) Cold water immersion
  - e) Fractures, dislocations and soft tissue injuries
- 4.3.3 Use (under medical supervision) of intraosseous infusion device
- 4.3.4 Use (under medical supervision) of intravenous equipment
- 4.3.5 Use (under medical supervision) of advanced airway management device

#### Training staff to **explain**:

4.3.6 Safe administration of medications, oxygen and entonox



#### **ELEMENT 4.4** Casualty monitoring and recording

#### Delegates to **practice**:

- 4.4.1 Monitoring vital signs
- 4.4.2 Recording the condition of casualties using appropriate documentation
- 4.4.3 Responding to any changes in casualty condition

#### MODULE 5 Casualty Transfer

Training staff to **explain** and **demonstrate**, then delegates **to practice**:

5.1.1 Preparing casualties for transfer from ERRV (including procedures for casualty handling for walking and stretcher casualties)

Training staff to explain: (a revision of the following including any relevant changes)

- 5.1.2 Monitoring procedures for casualties during transfer from the ERRV (including helicopter, FRC/other craft, transfer basket, port of call)
- 5.1.3 Communicating casualty information to the receiving medical unit including updated monitoring, triage and treatment information.

All exercises in the AMA training programme should incorporate aspects of Rescue, Recovery, Care and Transfer as appropriate.

(\* The above topics should be briefly explained to ensure suitable retention of knowledge which incorporates any relevant changes and/or updates)

**Note**: Team working to be used where appropriate.



#### **SECTION C** Resources

In order that a training programme may be delivered successfully it is essential that appropriately qualified and experienced people are there to deliver and support the programme and that the appropriate facilities and equipment are in place.

#### C.1 Staff

#### **Qualifications & Experience**

#### Instructional Staff

All instructional staff must:

- (a) Be either a Medical Practitioner or Registered General Nurse or Paramedic or services equivalent with a knowledge and experience of offshore ERRV crew working conditions and also have a knowledge and understanding of pre hospital care.
- (b) Be trained in instructional/lecture techniques and/or have proven instructing/teaching experience.
- (c) Hold an industry recognised assessor qualification
- (d) Have the appropriate competencies to conduct/assist the element of training being conducted.
- (e) Be included in an ongoing staff training programme, which includes visits to operational ERRVs, to enable them to maintain and update skills and knowledge

#### All Assessors must be:

(a) Compliant with a, c, d and e above.



#### C.2 Trainer/Delegate Ratios

It is recommended that the maximum number of delegates attending this programme is 12.

(b) The following ratios indicate the maximum number of delegates to be supervised by one Instructor at any one time during each activity.

Theory 12

Demonstration 12

Practical 6

Assessor/Delegate 1

#### C.3 Facilities

Different facilities may be required and it is important to make sure that these are available.

**Administration** arrangements to support delegates from booking through registration and assessment to certification.

**Theory** training area(s) so designed to enable each delegate to participate fully in the subject matter being taught.

**Demonstration and Practical** training areas so designed to enable each delegate to participate fully in the activities identified in the training programme. The training areas should be suitably representative of the treatment and casualty care facilities found onboard an ERRV.

Assessment areas suitable for individual assessment of candidates.

All facilities must be maintained, and where appropriate, inspected and tested in accordance with current standards/legislation.



#### C.4 Equipment

The following equipment, which must be of a type representative of equipment detailed in the latest edition of the ERRV Survey Guidelines, must be available for use and maintained to ensure safe and effective operation/use during training sessions.

As a minimum this must include:

- a) PPE
- b) Casualty handling devices
- c) Communications equipment
- d) Medical and non medical equipment to fully satisfy the delivery of this standard

All equipment must be maintained, and where appropriate, inspected and tested in accordance with current standards/legislation.



#### **SECTION D** Administration and Certification

#### D.1 Joining Instructions

All joining instructions must contain information which indicates that certain aspects of the course are of a physical nature and contain potentially stressful elements.

Prior to each course commencing, delegates must sign a declaration indicating they have read and understood a written statement regarding the physical and potentially stressful nature of the programme, and the need for delegates to be in good health.

#### D.2 Periodicity

Initial Advanced Medical Aid and Further Advanced Medical Aid certificates are valid for 2 years.



#### D.3 Certification

Training Centres are responsible for issuing a certificate direct to the delegate completing the programme and to the sponsoring company (when required). Each certificate must indicate that the delegate has been assessed against and met the learning outcomes and must contain the following:

- (a) Training Centre name
- (b) Full OPITO course title stating that it is OPITO-approved
- (c) OPITO registration code
- (d) Delegate's name
- (e) Course dates
- (f) Expiry date (Two years minus one day following the date that the delegate successfully completes the course)
- (g) Unique Certificate Number (UCN) Refer to OPITO UCN Guidance doc. for details
- (h) Training Centre Signatory.

#### D.4 Course Administration

Each delegate attending any OPITO-approved programme must be registered with the Central Register (CR) operated by OPITO. Registration must be made by the training centre to OPITO within one week following the course.

OPITO confirms that information on the registration form will be contained in a computerised register which will be available to employers, prospective employers and training providers in the oil and gas industry to verify training records. At all times, use of this data will be strictly in accordance with principles laid down in data protection legislation.



#### **Glossary of Terms and Abbreviations**

#### **Terms**

PLB

**Valid Certificate** An authentic certificate which is in-date i.e. has not expired

#### **Abbreviations**

CR Central Register Emergency Response ER **Estimated Time of Arrival** ETA **FRC** Fast Rescue Craft

Daughter Craft DC

Personal Locator Beacon Initial Training in Shipboard Operations ITSO



#### **Appendix 1 OPITO Information**

The topics listed below are to be delivered as part of the introduction to training courses specified in this standard and included in the lesson plans/instructor guides/exercise plans. Additional introduction topics may include training centre layout and alarms, emergency actions, first aid and domestic arrangements

#### Mandatory OPITO Information:

- a) Medical Fitness
- b) Certification Periods
- c) CR/Vantage (provided by OPITO)
- d) OPITO Customer Service Statement (provided by OPITO)
- e) The roles of employers and training providers (provided by OPITO)
- f) What is OPITO's role in industry? (provided by OPITO)
- g) Current Global Network of training providers (provided by OPITO)
- h) Emergency Response Framework (provided by OPITO applicable to ER training providers).

