

Medical Care during the COVID-19-Pandemic

10. information for the offshore wind industry from the WINDEAcare® network
12 August 2022

Some time has passed since the last information letter. Many things have changed, some things have developed differently than expected. But one fact has remained: The pandemic is not over.

But the virus and living with the virus has changed. Many people are less concerned about their own health and more about how to keep the service operations running - especially in our critical infrastructure. However, both thoughts have their justification.

One's own health can be protected quite well with a refreshed vaccination protection (if necessary also with a repeated booster) and with the continued use of FFP2 masks in closed rooms with a high number of people or/and confined spaces.

For maintaining the service of the HEMS bases, our experience is that we have not seen any introduction of the virus into entire crews so far. We assume that - in addition to our general hygiene measures and the consistent implementation of the facility-based vaccination requirement - the daily antigen tests before and during duty operations have prevented "contamination".

Of course, the observations in the small HEMS teams can only be transferred to other work situations to a limited extent.

1 Dealing with positively tested individuals in offshore projects on vessels and platforms

We continue to regularly observe positively tested individuals in our offshore projects on vessels and platforms. Usually, they show very mild symptoms (sometimes none at all). Nevertheless, they are infectious to their colleagues. Therefore, for reasons of spread control, it still makes sense to segregate or isolate them.

Evacuation from the projects may also be absolutely correct. Likewise, it is possible - in accordance with the current recommendations of the Robert Koch Institute (RKI) - to isolate these individuals in the projects and to test them free after five (5) days at the earliest with negative antigen tests.

Free testing is also possible via a PCR test with a correspondingly high Ct value. Note: a Ct value of more than 30 is no longer considered infectious, as the viral load is usually low. Unfortunately, the frequently used PoC NAT devices (point of care/devices that work with the nucleic acid amplification technique, such as Abbott ID NOW™) in the projects cannot determine this equivalent to the (shore-based) laboratory tests. Therefore, affected individuals may more often still be positive even if de-isolation is already possible according to RKI guidelines.

Our general Standard Operating Procedure SOP 48. on the handling of Corona by the emergency paramedics of the JUH in the projects, has meanwhile been adapted to the changed recommendations (see picture on the right).

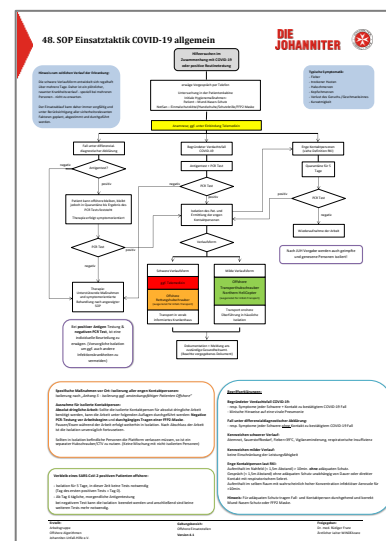


Figure 1: SOP 48.

2 Evacuation strategies of Corona patients and affected persons

In the early days of the pandemic, our considerations were focused on how we could safely (for all involved) evacuate seriously ill and at the same time infectious patients from offshore projects using rescue helicopters and, if necessary, winches. For this purpose, the rescue helicopters were structurally modified with the "Corona Shield" and, in some cases, new procedures for the winch rescue were established. In each case, we assumed that we would have to transport patients who needed medical assistance. Strategically, our goal was to evacuate all patients with potentially severe courses before they required intensive care. However, we were and still are prepared to care for infectious, critically ill patients.

With the change in the virus and the increase in knowledge, the situation has changed. We now see that most people who test positive in the projects have no or hardly any symptoms at all. From the perspective of emergency medicine, we can therefore hardly speak of patients. It may still make sense to evacuate these groups of people from the projects on land in isolation. We assess the choice of transport means and route as follows:

- We reserve transport in our HEMS helicopters for seriously ill patients.
- Rescue via winch is also only justified for seriously ill patients.
- People who test positive and take appropriate protective measures do not pose an increased risk. They can also cross from vessel to vessel or to structures such as an offshore platform or similar in the open fresh air.
- Positively tested persons can also be transported in groups via helicopter or vessel. However, these transports are in no case time-critical and can be planned (even days) in advance.

NHC Northern Helicopter will continue to evacuate groups of people affected by COVID infection via helicopter upon request. As an original air rescue company, the requirements for hygiene and disinfection of the aircraft can be implemented without any problems.

We will continue to be able to offer such flights several times a week. In the expectation that case numbers could increase again in autumn, we fear that the demand will not decrease. The request for these "non-urgent infection transports" can – like all medical assistance requests – be made via the Offshore Wind emergency control center.

3 Updates on exercises with offshore air rescue units

It has always been our aim to conduct joint exercises with our customers, even on complex rescue procedures. These exercises promote the interaction of the individual links in the rescue chain in many ways.

Increasingly, exercises are being planned that also require a combination of technical rescue, medical care, and special aviation procedures. These exercises fully replicate a real operation and are therefore particularly valuable.

However, these exercises tie up the crew completely and the helicopters used are not available in time for real missions. Especially the medical crew of the rescue helicopter cannot be called in a timely manner when they are involved in rescue scenarios from height.

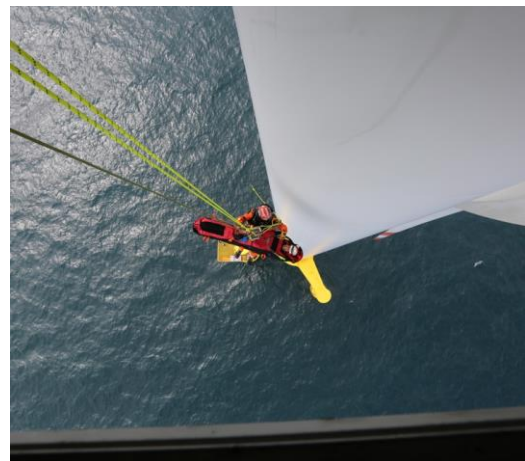


Figure 2: Example of complex exercise

For the Baltic Sea region, such exercises are conceivable in the risk assessment with the operational helicopter. There are comparatively few wind farms and thus few such exercises and, of course, comparatively few operations.

For the wind farms in the North Sea, the situation is somewhat different. Here, too, only one rescue helicopter is assigned, and the number of operations and also of planned complex exercises is significantly higher. Therefore, these exercises – in order to maintain basic protection for all customers – cannot be carried out with the rescue helicopter.

However, as has already been done many times, we are happy to realize the exclusive provision of a fully manned backup helicopter for these exercises.

Please do not hesitate to contact us!

Our article from the professional journal "IM EINSATZ" can also serve as a source of ideas for complex exercises, which is available as a special print from us or in the download area on our website (unfortunately only available in German).

4 Download of information

This letter as well as the previous information specifically on the topic of "Medicine and Corona Pandemic" can be viewed at any time in our download area of the WINDEAcare homepage.

Please note the dynamic nature of the situation. Not all statements we have created in the early days of the pandemic have to apply equally now:

<https://www.windea-care.de/de/downloads>



Figure 3: Special print "IM EINSATZ" as a source of ideas for a complex exercise