



# Movement of Passengers during COVID-19 Pandemic

Technical Note

Issue 10  
January 2022

## Acknowledgments

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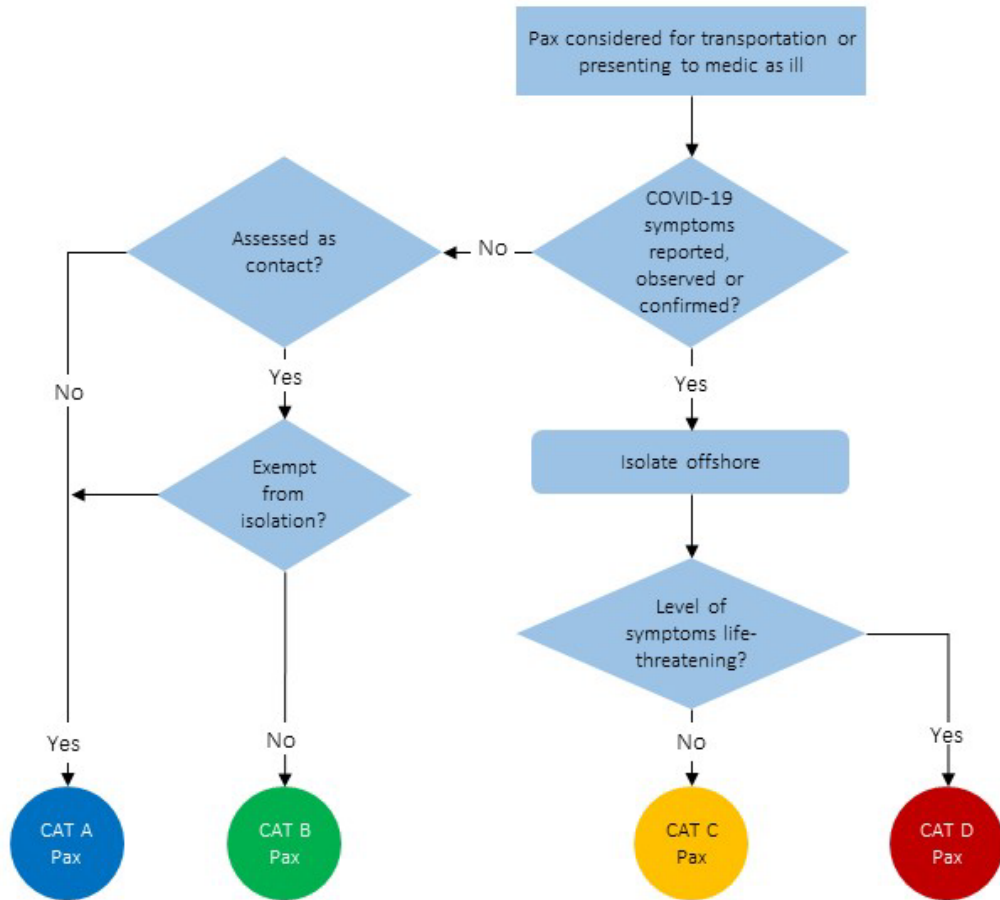
# Movement of Passengers during COVID-19 Pandemic

January 2022

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# 1 Passenger Flowchart



Helicopter Operator Considerations			
<ul style="list-style-type: none"> <li>• Snood must be worn.</li> <li>• Normal O&amp;G aircraft / crew.</li> </ul>	<ul style="list-style-type: none"> <li>• Snood must be worn.</li> <li>• Cleaning of aircraft and survival equipment per operator's CAT-B protocols.</li> <li>• Adequate spacing must be provided between passengers (max 8 pax on a S92, 5 on a H175, 4 on an AW139) unless all pax have returned a negative test within 12hrs of flight time.</li> </ul>	<ul style="list-style-type: none"> <li>• PPE required for patient and escort (patient face covering should be FRSFM).</li> <li>• Decontamination of aircraft and survival equipment required.</li> <li>• CMED/ Medevac/ SAR aircraft/ crew with limited pax numbers ensuring min 1m clearance between pax and aircrew (max 6 patients + 1 escort*).</li> <li>• Completion of Heli Operator Medevac form.</li> </ul>	<ul style="list-style-type: none"> <li>• PPE required for patient and escort.</li> <li>• Decontamination of aircraft and survival equipment required.</li> <li>• SAR aircraft / crew required.</li> </ul>
Client Considerations			
<ul style="list-style-type: none"> <li>• Provision of snood.</li> <li>• No decontamination required.</li> <li>• No onward transport plan required.</li> </ul>	<ul style="list-style-type: none"> <li>• Provision of snood.</li> <li>• Decontamination of survival equipment as per provider instructions.</li> <li>• Specific onward transport plans to be provided prior to flight.</li> </ul>	<ul style="list-style-type: none"> <li>• Provision of PPE for patient and any client-provided escort (face covering should be FRSFM).</li> <li>• Evidence of medical RA to be provided to helicopter operator.</li> <li>• Specific onward transport plans to be provided prior to flight.</li> </ul>	<ul style="list-style-type: none"> <li>• Provision of PPE for patient.</li> <li>• Evidence of medical RA to be provided to helicopter operator.</li> <li>• Specific onward transport plans to be provided prior to flight.</li> </ul>

## 2 Flowchart notes

- Accurate categorisation of passengers will allow the helicopter operators to ensure the sustainability of helicopter operations by protecting the crews from infection, and to take the necessary precautions to ensure the safe transportation of the passengers back to shore.
- All inbound flight manifests are to be annotated and signed indicating whether or not any passenger(s) on board the aircraft are being transported for COVID-19 infection considerations, i.e. CAT B or C.
- Following identification of a COVID-19 case on any offshore installation, normal crew change flights can take place provided:
  - all Category B/C/D passengers have been appropriately classified, and
  - all passengers for inbound travel on crew change aircraft are established as 'CAT A'.
- Heli admin staff shall ensure that the aircraft manifest for inbound flights has a written note in the "additional notes" box clarifying the "worst case" category on board.
  - This applies to all flight categories A, B & C.
- Passengers of different categories are generally not to be mixed on any flight.
- Mixtures of CAT A and CAT B passengers will not be carried on the same flight.
- On a case-by-case basis and following discussion with the helicopter operator, providing passengers from a single client are involved, it may be possible to mix CAT B and CAT C passengers on the same flight from the same location. The flight will be classed as CAT C.
  - CAT B passengers must be asked and agree to sharing the flight with CAT C passengers by signing the "notes box" on the Medevac form.
- [\\*Maximum 6 patients plus one escort on an S92 aircraft. Refer to helicopter operator for other aircraft limits.](#)

## 3 Understanding and implementing the 'Movement of Passengers' flowchart

### 3.1 General notes

- At this stage in the pandemic the concept of 'cases' and 'contacts' should be familiar to all.
- Persons offshore becoming unwell may become 'possible' or 'probable' COVID-19 cases. Once tested via the NHS/public health system they may become 'confirmed' cases. For the purpose of the flowchart all ('possible', 'probable' or 'confirmed') are 'cases'.
- Any COVID-19 case will be a CAT C or CAT D (depending on clinical severity) passenger until such time as they no longer require to isolate.
- Personnel offshore may be identified as contacts of a case either by notification from Test and Protect/Test and Trace (most likely due to contact with a case onshore, prior to the worker mobilising), notification by a family member, or by the installation operator itself (if a case is identified on the installation).
- [Contacts remain subject to national advice to isolate, but governments introduced an exemption from the requirement to isolate for contacts who are fully vaccinated. Rules differ nationally – see <https://www.nhs.uk/conditions/coronavirus-covid-19/self-isolation-and-treatment/when-to-self-isolate-and-what-to-do/> for initial briefing, but follow links to relevant country-specific guidance.](https://www.nhs.uk/conditions/coronavirus-covid-19/self-isolation-and-treatment/when-to-self-isolate-and-what-to-do/)
- [The categorisation \(A, B, C or D\) of an individual is not the responsibility of the helicopter operator.](#)

### 3.2 Responsibilities and obligations

- When onshore, all persons are obliged to follow national law and have a responsibility to follow public health advice on isolation and testing.
- On offshore installations, operators have the responsibility to follow the principles of public health advice; and are subject to enforcement action by the HSE (which in turn takes into consideration advice from HPS/PHE).
- During aviation transport of workers, the helicopter carrier is subject to aviation law and will apply its own operating procedures, including those relating to infectious disease.

### 3.3 Carriage of cases

- Determination of category status will be made by installation medic, topside doctor and installation operator Company medical advisor.
- The preference for medevac of case is at the stage of CAT C passenger, before possible deterioration to CAT D.
- CAT C passengers will be returned ashore on a medevac flight with infection control measures and an escort (the escort is required by helicopter carrier operations manuals).
- The most likely destination for CAT C passengers on arrival ashore will be home, for self-care and isolation there.

- Operators should ensure an appropriate onwards travel plan is in place for CAT C passengers prior to arrival onshore.

## 4 Contacts

### 4.1 Definition of a 'contact'

- Having, in the past 10 days, provided direct care for patient(s) with COVID-19 disease without using proper personal protective equipment, i.e. an unprotected medic. (*N.B. A protected medic is NOT a contact.*)
- Having travelled in a small vehicle (e.g. car or van) with...
- Having travelled in a large vehicle near (i.e. having less than 1m separation from) (*N.B. further away than 1m is NOT contact*) ...
- Having, on a flight, been seated within two seats in every direction (i.e. the 2 seats either side, and the 2 rows in front and behind these seats) of...
- Having shared a cabin with...
- Having had unprotected physical (skin to skin) contact with...
- Having been in proximity (with face-to-face contact, includes being coughed on, or face-to-face conversation) within 1m for any length of time, of...
- Having been in proximity (without face-to-face contact) within 1m for 1 minute or longer, of...
- Been in proximity between 1m and 2m for more than 15 minutes (the duration of contact should be considered cumulatively), of...

...a case from 48 hours prior to symptom onset in the case, to 10 days from the date of symptom onset in the case (if the case has been symptomatic);

or, if the case is an asymptomatic positive PCR test, from 48 hours before the positive PCR test to 10 days from the date of positive PCR test.

- Personnel offshore may be identified as contacts of a case either by notification from Test and Protect/Test and Trace (most likely due to contact with a case onshore, prior to the worker mobilising), notification from a family member, or by the installation operator itself (if a case is identified on the installation).

### 4.2 Carriage of contacts

- The installation operator, in consultation with its medical advisor, should categorise non-case personnel for transport from installation to onshore as either CAT A or CAT B.
- Personnel who are neither cases nor contacts will be CAT A passengers.
- Personnel who are contacts of cases will be CAT B passengers, UNLESS they meet the following requirements:
  - Fully vaccinated (meaning – two of two-dose course, or single dose of single-vaccine course).
  - At least 14 days since completed course of vaccine.
  - Have undergone an on-installation COVID-19 test within 12 hours of departure from the installation.



- Personnel meeting the above requirements may, at the discretion of the installation operator, be classified as CAT A passengers for helicopter transport.
- Personnel unable to provide evidence of their vaccination status will be regarded as 'not fully vaccinated' and will be classified as CAT B passengers.
- Helicopter carriers will implement measures which provide confidence for aircrews that CAT B passengers can be flown ashore with no significant risk of transmission of infection to aircrew.
- Where a contact returns onshore within their theoretical 10-day isolation period (10 days from when they were first categorised as a contact) they become subject to national requirements for isolation - see <https://www.nhs.uk/conditions/coronavirus-covid-19/self-isolation-and-treatment/when-to-self-isolate-and-what-to-do/> (England) and associated other UK nations links.

### 4.3 Management of passengers

- CAT A passengers will return ashore with no specific measures needed.
- It will be good practice for companies to take steps to ensure that passenger seat location can be identified at a later date if necessary.
- 'Snoods' remain obligatory for CAT A and CAT B passengers; CAT C and CAT D passengers should follow clinical guidelines for PPE.

## 5 Outbound transportation

Fully vaccinated contacts may now be exempt from isolation (if they take daily lateral flow tests with negative results) and can travel, subject to following the local criteria, to their embarkation point. Contacts considering themselves exempt should seek advice from their employer prior to mobilisation. Operators/employers may wish to apply additional requirements (for example in relation to prior testing) of their own. Once satisfied that a contact meets national and employer requirements for exemption, they will be transported offshore as a CAT A passenger.

## Appendices

### A Revision Tracker

Issue	Previous issue	Change
Issue 2 30.03.20	Requirement for medevac form in heli-operator's considerations for CAT B flights	Removed
	-	Notes added to Movement of Passengers Flowchart box on Page 1
	-	Clarification notes A & B added to Page 3
Issue 3 31.03.20	-	Document title changed to be consistent with content "Movement of Passengers Flowchart"
	-	Revision tracker page added
	Movement of Passengers Flowchart text box missing a line	Movement of Passengers Flowchart box on Page 2 extended so all text can be read
	Page 3 Note A - typo	Page 4 Note A reworded
Issue 4 27.04.20	-	Addition of snood comments in CAT A & CAT B in Helicopter and Client Considerations
	-	Clarification on acceptability of FRSM as PPE in place of FPP2/3 or equivalent in CAT B & CAT C helicopter and client considerations
Issue 5 01.05.20	Typo corrections and minor formatting amendments	Format and content of notes box and CAT A pax considerations boxes
Issue 6 06.07.20	-	Additional information due contact tracing guidance for classification of CAT B pax commencing P3
Issue 7 14.09.20	-	Text change to "Information Box" on P4 to "Symptoms" and "Travel Risk"
	Requirement for escort on CAT B flights	Deleted
	Requirement for C-Med aircraft for CAT B passengers	Removed.
	CAT C Heli Operators Considerations	Cat C pax limit changed from 1-3 to 1-4 depending on a/c size.
	-	P6: change from 7 days to 10 days
	P7 Para 4: reference to CAT B passengers may require an escort	Deleted
	-	P5: Reword of "Situation 2" paragraph
Issue 8 07.09.21	-	Substantial rewrite of text and flowchart
Issue 9 08.09.21	Flowchart	Amendment of CAT C 2m distancing between aircrew and pax to 1m
	Section 4.2	Removal of last bullet point – duplication of "contact" definition
Issue 10 11.01.22	-	General updates to reflect increase in allowed pax numbers and new isolation requirements. <a href="#">Changes in blue.</a>



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