

Background

V.Group has set KPIs (Key Performing Indicators) on reduction of crew accidents/injuries by the **Lost Time Injury (LTI)** and **Total Recordable Cases (TRC)** frequencies.

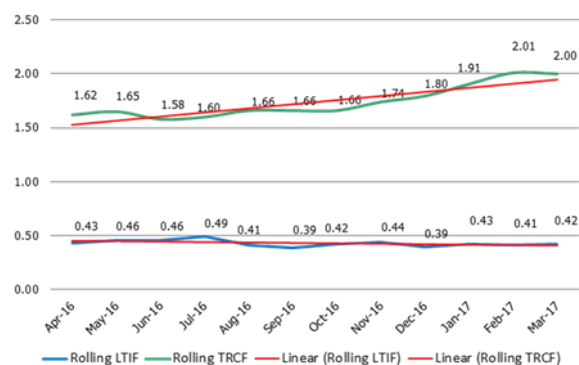
Note: LTIs= Fatalities + Permanent Total Disabilities (PTD) + Permanent Partial Disabilities (PPD) + Lost Workday Cases (LWC)

TRCs = LTIs + Restricted Work Cases (RWC) + Medical Treatment Cases (MTC)

For detailed definitions of all categories above – please see the Annex with Flowchart of reporting at the end of this Bulletin

Our previous version of this Bulletin (in 2014) focused on recording **LTIF** correctly, this new version targets proper categorization and recording of **TRCF**.

The LTIF and TRCF rolling graph (last 12 months) below **shows an increase of TRCF:**



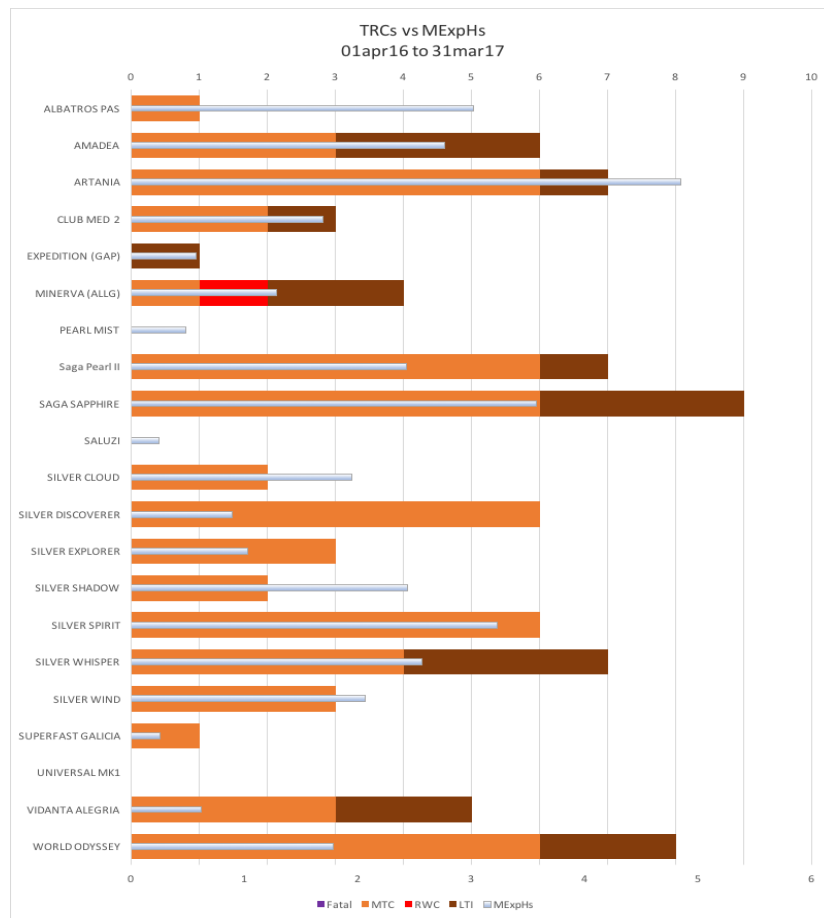
The above are frequencies/ rates and depend also on the **Exposure Hours** - cruises days and the number of crew entered in Shipsure

Note: LTIF= LTIs / Million Exposure Hours

TRCF = TRCs / Million Exposure Hours

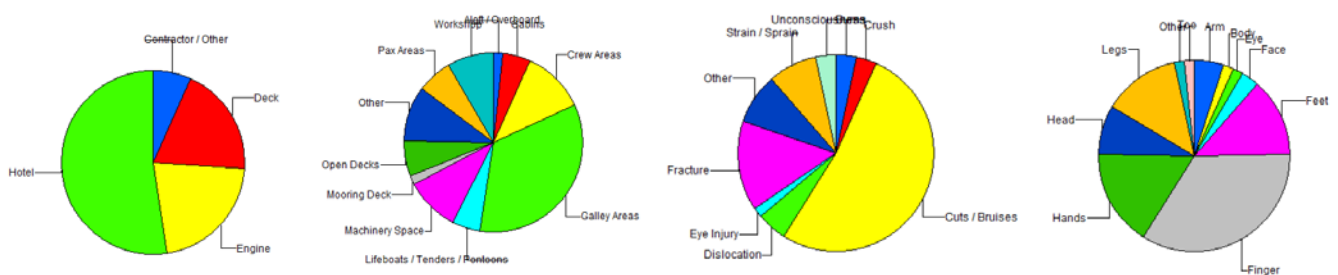
Million Exposure Hours = Days (cruise) * Number of Crew * 24 hrs / 1'000'000

The TRC and Exposure Hours analysis per vessel shows **a predominant number of MTC (Medical Treatment Cases)**:



Further analysis of the **MTC (medical Treatment Cases)** recorded in Shipsure for the last 12 months shows that accidents are:

- predominantly (53%) in the hotel department,
- mostly (35%) in galleys,
- mostly on fingers (34%) and hands (16%),
- the majority (53%) are cuts / bruises
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Caution: Provided that no surgery performed, no stiches/sutures/casts are applied and no medicines obtainable only through prescription are used:
Do NOT categorize Cuts and Bruises as MTC, but as First Aid Case (FAC)

Actions required:

Shipsure Categorization and Verification Procedure

Master and Doctor as delegated:

In Shipsure:

- 1) Check the proper categorization of each injury / accident reported against the definition in Shipsure and per the Annex “**Flowchart for categorization of accidents**”
- 2) If an accident with cuts and bruises is without any surgery / sutures /casts and without medicine by prescription only -categorize it as First Aid Case (FAC)
- 3) If in doubt - consult with the Safety Officer or the DPA

The Safety Officer:

For each crew injury reported to the Doctor:

- 1) Check that the Doctor has entered the injury accident with the **correct categorization**:
 - a) Verify against the definition in Shipsure and per the Annex “Flowchart for categorization of accidents”
 - b) If not correct – amend Shipsure accordingly and advise Doctor
 - c) In case of doubts – consult Staff Captain and DPA ashore
- 2) **Ensure Exposure Hours** are recorded correctly in Shipsure:
 - a) Enter/Verify the cruise start / end dates
 - b) Enter / Verify the (average) number of crew onboard during the above cruise
- 3) Complete the rest of the accident / injury details and analysis in Shipsure:
 - a) Pay special attention to the proper causation analysis
 - b) Avoid entering “N/A” or “Other”

The DPA ashore:

- 1) Check in Shipsure weekly (but latest by the end of the month) that:
 - a) accidents are **categorized correctly**
 - b) cruises are entered reflecting **correct start/end dates** and
 - c) (average) **number of crew onboard** for the period
- 2) Verify above against:
 - a) definitions in Shipsure
 - b) the Annex “**Flowchart for categorization of accidents**”
- 3) In case of discrepancies - advise/consult the vessel and/or amend entries in Shipsure accordingly
- 4) Verify performance with the V.Group KPIs for 10% reduction of LTIF and TRCF (versus previous year)
- 5) Follow up with vessel(s) as necessary

Effective immediately, ATTACH this Instruction to the Master’s, Doctor’s and Safety Officer’s hand-over reports



Completed



Annex: “Flowchart for categorization of accidents”

