

– FPSO PROSPERITY

Ship Specific Virus Control Plan – Screening and Management

Version 1.01

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1. PPE REQUIRED AND IT'S USE

Protective clothing and equipment will be readily available and accessible to personnel that will be in contact with the suspected coronavirus patients. Such protective clothing and equipment include:

- Gloves;
- Eye and / or facial protection (glasses, goggles or face shields)
- Gowns and plastic aprons; (**disposable boiler Suit**)
- Personnel must always wear fully enclosed footwear;

The use of all protective clothing and equipment is detailed below in this section.

1.1 GLOVES

Personnel must wear disposable gloves when participating patient care where there is a body fluid hazard.

Changing and discarding gloves. Gloves must be changed and discarded:

- As soon as they are torn or punctured;
- After contact with one individual is complete and before care is provided to another person; and
- When performing separate procedures on the same patient and there is a risk of transmitting infection from one part of the body to another.



Disposable gloves. Source WHO

1.2 PROTECTIVE EYEWEAR

Protective eyewear must be worn while performing any procedure where there is a likelihood of splashing or splattering of blood or other body substances. Reusable protective eyewear must be cleaned in accordance with the manufacturer's instructions prior to being reused.



Protective eyewear, source WHO

1.3 PROTECTIVE APPAREL

Gowns and plastic aprons or covers should be worn to protect the wearer's clothing or skin from contamination with blood and body substances. Protective apparel provides a barrier and reduces opportunities for transmission of pathogens in health care settings.

Requirements to wear a protective gown or apron. A fluid resistant gown or apron made of impervious material must be worn during any procedure where there is a likelihood of splashes or contamination with blood or other body substances.

1.4 DISPOSABLE RESPIRATOR MASKS

All staff are required to wear an approved mask at all times when in contact with **suspected** infectious patients. Approved mask is the N95.

Note: Surgical masks do not supply sufficient protection and are therefore not to be used as a substitute.

1.5 FOOTWEAR

Footwear should be enclosed and capable of protecting health care workers from injury or contact with sharp objects, i.e. for example if sharps are accidentally dropped. Staff caring for a patient with suspected Influenza **SERIOUS RESPIRATORY INFECTION** should wear disposable shoe covers. These should be discarded when leaving the isolation room.

2. LIST OF COMMON AREAS VISITOR MAY VISIT

- Upper deck – Male change room
- Deck C – Duty Non-Smoking / Recreation Lounge / Outlet recreation lounge
- Nav Deck –Bridge
- Others – Alley way / Stair case

2.1 AREAS FOR MEETING WITH SHORE BASED PERSONNEL

Duty smoking room should be made operational for meetings to be carried out with shore base personnel. After the meeting is been carried out successfully the area should be cleaned as per procedure mentioned in section 4 [CLEANING PROGRAM AND DISINFECTING TECHNIQUES](#) of the plan.

2.2 DEALING WITH SHIP VISITORS & SOCIAL DISTANCING

- Wipe down with an anti-bacterial solution where the visitors will access and the objects, they are likely to touch.
- Restrict access into ships accommodation-keep doors locked and post signs warning of no entry.
- Make use of alcohol-based hand sanitizer on board, make it ready to use upon entry

onto ships and around the vessel.

- Visitors should inform company and prior intimation to vessel of the time of availability for visiting the vessel.
- Visitors should wash their hand with soap for at least 30 sec, prior boarding the vessel, the same should be prepared by ships staff and kept at the gangway for the visitors to wash their hands.
- Ship staff at gangway watch should take the temperature of the visitors visiting the vessel and the temperature should be noted in the body temperature screening log .
- [Appendix 1: FPSO PROSPERITY - BODY TEMPERATURE SCREENING](#)
- Anyone found to have a fever or high body temperature reading of more than 37.5 Celsius or 100 Fahrenheit, Will be denied from entering the vessel.
- Where possible have designated toilet and hand washing facilities for visitors- make sure that they are well stocked with soap.
- Try to prepare and complete any necessary documents digitally- avoid handling paper and laminated documents as far as possible.
- Have PPE readily available, such as disposable gloves, for use in unavoidable close contacts situations.
- Maintain effective ship and gangway security and ensure that no unauthorized person board the vessel.
- No handshakes and physical contacts
- Try to maintain at least 1 metre (3 feet) to 2 metre (6 feet) distance from the visitors.
- Where possible hold conversations and meetings with visitors on the open deck or open bridge wings.
- If visitors must be inside, limit the meeting in duty smoking area.
- Ensure that visitors boarding the vessel should through their mask and disposable gloves prior boarding the vessel.
- New mask and gloves to be provided to the visitors boarding the vessel.
- Limit the movement of visitors at gangway, if more number of visitors to board differ their timings of visiting the vessel.

3. QUARANTINE ARRANGEMENTS AND DISPOSAL OR CONTAINMENT OF CONTAMINATED MATERIALS

3.1 SCREENING OF VISITORS AND EMPLOYEES

- **ONLY** critical or essential personnel or visitors to be allowed to board the vessel, subject to approval from and the Master after discussion with the DPA.
- *Crew that is assigned to monitor personnel movement at the gangway must wear N95 mask*
- **Everyone (on signers, crew or visitor)** entering the ship must complete a screening questionnaire and have their temperature checked on arrival using the non-contact forehead thermometer (use: **V.Ships Screening Questionnaire COVID-19**).
- *If anyone found to have visited **China / Italy / Iran / Korea** in the past 14 days will be denied from entering the vessel.*
- **Anyone found to have a fever or high body temperature reading of more than 37.5 Celsius or 100 Fahrenheit, Will be denied from entering the vessel.**
- This will then be recorded in the Body temperature log at the Gangway and in the screening questionnaire form and highlighted to the DPA.

- Gangway watcher must immediately inform **CCR** of the high temperature reading.
- On Duty Officer to inform Captain. Captain to notify DPA immediately.
- Suspected person **WILL NOT** be accepted to enter the vessel and must be sent ashore to medical facility for detailed medical check.
- As soon as found suspicious person and till his disembarkation, all movement at the gangway must be stopped.
- Once suspicious person left the vessel, gangway watcher must disinfect gangway areas and handrails by spraying **bleach or other equal disinfectant spray to kill bacteria**.
- Only after disinfection is done, then movement in/out at the gangway may be resumed.
- On boarding the vessel at the base of the gangway, visitors that have been screened and met the criteria to board the vessel will be instructed to wash their hands with soap and water, or alcohol hand sanitizer. Alcohol hand sanitizers are located at all common areas.
- Visitors should be escorted to common areas only (Conference Room)

3.1.1 DAILY TEMPERATURE RECORDING

- Daily temperature should be recorded twice a day of the crew on board and visitors.
- Temperature should be noted in the body temperature screening log.
[Appendix 1: FPSO PROSPERITY - BODY TEMPERATURE SCREENING](#)
- Records of temperature should be sent daily to the Fleet HSEQ manager.
- If body temperature of any crew is found above the normal range i.e above 37.5 F or 100 deg celcius, procedure should be followed as described in section 5
- HOW TO REQUEST FOR MEDICAL ASSISTANCE.

3.2 ISOLATION OF PATIENTS

Since the vessel is at port so if a person is considered high risk or having serious respiratory infection, the patient will be sent immediately to Hospital mentioned in 5.1. If due to some restriction he cannot be shifted to hospital then he will be kept in Isolation room with the door kept closed. Isolation room is prepared for patient with procedures below.

The designated **ISOLATION ROOM** on the PROSPERITY is **cabin # 422** located at Deck 4, i.e. TREATMENT ROOM.

The main priority after a suspected patient being isolated is to send him off the vessel for further evaluation ashore as soon as possible to reduce risk for the other crew. Where there is more than one patient that requires isolation, the same set up will be prepared for the second isolation room, which will be the hospital room.

ISOLATION OF CABIN - 422

SECOND ISOLATION CABIN - 423

Any crewmember or personnel that become unwell will be escorted to the isolation room via the isolation route, using the access from outside and will wait on the open area at C-Deck PORT side. He will be given a N95 mask & disposable gloves and go straight into the isolation cabin that have been prepared as per below set-up.



Isolation of cabin 422:

- Cabin door vent gratings Inside/Outside sealed with Duct tape.
- Suction intake of the Sanitary Fan in the Toilet room of the Cabin closed and sealed.
- Increase Chlorine dosage into Sewage Treatment Plant.
- When the patient inside of Cabin – seal the door with Duct tape after ventilating complete corridor

Healthcare personnel or personnel interacting with the patients must adhere strictly to the infection control guidance in this document.

- Place a surgical mask on the patient, if tolerated. If not, ask them to cover their nose and mouth with a tissue. Use of the mask / tissue can be discontinued once inside the isolation room
- Full PPE must be worn by anyone in contact with the patient:
 - N95 Mask or equivalent
 - Eye protection
 - Gown
 - Shoe covers
 - Gloves

It is important to remember that any suspected patients are **NOT** allowed to wander around and in the accommodation stairs as this would contaminate the whole ship. The isolation room shall have a dedicated hand wash and toilet facilities.

- Ventilation of the isolation room:

The patient would be placed in a room with negative air pressure with an independent air supply and exhaust system.

3.2.1 Limitation of personnel entering the isolation room

Healthcare personnel or attending personnel entering the room of a patient in isolation should be limited to those performing direct patient care only. A record of all staff providing care to the patient must be kept. This would make it easier to track any contacts.

3.2.2 Outside the Isolation Room

The door is to remain closed at all times with a notice telling unauthorized people NOT to enter.

A log (Isolation Room Log Sheet) noting patient name, date and time of admission into the room, as well as name of staff and time of each entry and exit from the room must be placed outside the room and completed without fail.

The following item must be placed outside the room:

- N-95 masks
- Disposable gowns / boiler suits
- Disposable gloves
- Safety goggles
- Disposable shoe covers
- Disposable hair covers
- Disposable bags.
- Linen Bag for double bagging any linen
- Isolation Room Log Sheet
- Daily Temperature Record Log (using ADM 38)

3.2.3 Inside the Isolation Room

The contents of the isolation room will be limited to:

- An examination beds
- Oxygen tank and disposable nasal cannula and mask
- A disposable bed sheets
- A blood pressure cuff
- A thermometer with disposable caps
- A large waste bin lined with a disposable bag.
- A metal instruments tray with disinfectant solution.

The ideal isolation room should have negative pressure capability, an effective extraction fan vented to an area outside of the building that is not accessed by people, is a good alternative. If these are not available then use a room with good ventilation.

Windows may be kept slightly open for ventilation however the air- conditioner should be kept off.

Movements in and out of the isolation room must be kept at a minimum.

If the area or room being used has air conditioning that is connected to a facility wide air conditioning unit, the air conditioning must be turned off to prevent airborne spread throughout the facility.

3.2.4 Hand hygiene

Hand washing is considered to be the most important measure in preventing the spread of infection. Hands should be washed **before** significant contact with any person and **after** activities likely to cause contamination.

- Hand washing must take place before and after each patient contact.
- Hands must be washed with chlorhexidine soap or hand wash liquid for a minimum one minute, taking care to wash between fingers. or by using **alcohol-based hand sanitizer**

- Hand washing signs must be posted and visible above every hand-washing station
- Must be performed correctly by all staff and visitors:
 - Prior to donning PPE, before entering the isolation room
 - After removing PPE

3.2.5 Respiratory protection

Respiratory protection must be donned prior to room entry. All healthcare personnel or attending personnel who enter the rooms of patients in isolation for any respiratory illness must wear a fit-tested disposable N95 respirator or equivalent

Masks should be removed after all other PPE has been removed and only once the staff member has left the isolation room and closed the door. Carefully remove the mask using the straps. Discard in appropriate contaminated waste container. Perform hand hygiene.

3.3 DISPOSAL OR CONTAINMENT OF CONTAMINATED MATERIALS

- All disposable items, other than masks must be removed and discarded in the disposable garbage bin before leaving the room.
- N95 masks must be discarded **ONLY** once the staff member has left the room and closed the door.
- Goggles worn in the room must be thoroughly wiped down with the 2% Na Hypochlorite solution or the available chlorhexidine / alcohol solution.
- All garbage must be double bagged at the doorway before removal. This procedure involves one staff dressed in isolation garments inside the room placing the garbage filled bag into an uncontaminated disposable bag held by a gloved staff member positioned outside the room.
- The double-bagged garbage will be promptly removed from the isolation premises and thrown in the garbage skip situated away from the accommodation.

4. **CLEANING PROGRAM AND DISINFECTING TECHNIQUES**

All non-disposable equipment must be cleaned and disinfected prior to use on another patient.

Routine cleaning and disinfection strategies apply. Management of laundry, utensils and medical waste should also be performed as usual.

Routine cleaning of the environment after the patient has left the premises should be carried out

The infection control precautions for persons with SERIOUS RESPIRATORY INFECTION include Standard Precautions, which apply to ALL patients at ALL times, and the following additional precautions apply.

- *Airborne transmission*
- **droplet transmission** or
- **direct or indirect contact** with skin or contact with contaminated surfaces; or
- or any combination of these routes.

4.1 Cleaning agents and disinfectants

- Clean all surfaces, frequently touched surfaces and floors with bleach. Bleach can be used as a disinfectant for cleaning and disinfection (dilute 1 part bleach in 50 parts water, or 1000 ppm). Bleach solutions should be prepared fresh. Leaving the bleach solution for a contact time of at least 10 minutes is recommended.
- Alcohol (e.g. isopropyl 70%, ethyl alcohol 60%) can be used to wipe down surfaces where use of bleach is not suitable e.g. metal.
- If other disinfectants are considered, check with the manufacturer that they are active against coronaviruses. Disinfectants should be prepared and applied in accordance with the manufacturer's guidelines. Ensure that appropriate contact time is given before removing any disinfected materials.

Thorough disinfection of the isolation room implies the wiping down of all contact surfaces.

These surfaces include, but are not limited to:

- ✓ Floors
- ✓ Walls
- ✓ Ceilings
- ✓ Windows
- ✓ Doors
- ✓ Sinks and faucets
- ✓ Counter tops and legs
- ✓ Exhaust vent surfaces
- ✓ Seating surfaces and legs
- ✓ Knobs, buttons, handles, levers, light switches and control panels
- ✓ Any equipment contained in the contaminated area

4.2 Protective Personal Equipment (PPE) to wear while carrying out cleaning and disinfection works

- Wear disposable gloves, disposable long-sleeved gowns, eye goggles or face shield and an N95 mask.
- Avoid touching the nose and mouth (goggles may help as it will prevent hands from touching eyes).
- Gloves should be removed and discarded if they become soiled or damaged and a new pair worn.
- All other disposable PPE should also be removed and discarded after cleaning activities are completed. Eye goggles, if used, should be disinfected according to manufacturer's instructions after each use
- When in doubt, refer to guidance documents for the proper donning and doffing of PPE.
- Hands should be washed with soap and water immediately after each piece of PPE

is removed following completion of cleaning.

4.3 Cleaning guidelines for areas exposed to suspected/ confirmed case(s) of novel coronavirus (nCoV) in non-healthcare commercial premises

- Where possible, seal off the areas where the suspected/confirmed case has visited before carrying out cleaning and disinfection of the contaminated environmental surfaces. This is to prevent unsuspecting persons from being exposed to those surfaces.
- When cleaning areas where a suspected/confirmed case has been, cleaning crews should be attired in suitable PPE (see 4.2 above). Gloves should be removed and discarded if they become soiled or damaged and a new pair worn. All other disposable PPE should also be removed and discarded after cleaning activities are completed. Goggles, if used, should be disinfected according to manufacturer's instructions after each use. Hands should be washed with soap and water immediately after the PPE are removed.
- Keep cleaning equipment to the minimum.
- Keep the windows open for ventilation where the workers are using disinfectants.
- Mop floor with bleach (dilute 1 part bleach in 50 parts water, or 1000 ppm).
- Wipe all frequently touched areas (e.g. lift buttons, handrails, doorknobs, armrests, seatbacks, tables, air/light controls, keyboards, switches etc.) and lavatory surfaces with chemical disinfectants (use according to manufacturer's instructions) and allowed to air dry. Bleach solution (dilute 1 part bleach in 50 parts water, or 1000 ppm) can be used. Alcohol (e.g. isopropyl 70% or ethyl alcohol 70%) can be used for surfaces where use of bleach is not suitable.
- Wipe down walls up to 3m in height as well as blinds with bleach (dilute 1 part bleach in 50 parts water, or 1000 ppm). viii. Remove curtains / fabrics / quilts for washing with preferably hot water cycle. For hot-water laundry cycles, wash with detergent or disinfectant in water at 70°C for at least 25 minutes. If low-temperature (i.e. < 70°C) laundry cycles are used, choose a chemical that is suitable for low- temperature washing when used at the proper concentration.
- Discard cleaning equipment made of cloths and absorbent materials e.g. mop head and wiping cloths into biohazard bags after cleaning and disinfecting each area as these materials are not easily disinfected. Wear a new pair of gloves and fasten the double-bagged biohazard bag with a cable tie. Disinfect non-porous cleaning equipment used in one room before using for other rooms. If possible, keep the disinfecting equipment separated from other routine equipment.
- Disinfect buckets by soaking in bleach (dilute 1 part bleach in 50 parts water, or 1000 ppm, at least 10 minutes), disinfectant solution or rinse in hot water before filling.
- Discard equipment made of cloths/ absorbent materials (e.g. mop head and wiping cloths) after cleaning each area to prevent cross contamination.
- Disinfectants should be applied to surfaces using a damp cloth. They should not be applied to surfaces using a spray pack, as coverage is uncertain and spraying may promote the production of aerosols. The creation of aerosols caused by splashing liquid during cleaning should be avoided. A steady sweeping motion should be used when cleaning either floors or horizontal surfaces to prevent the creation of aerosols or splashing. Cleaning methods that might aerosolize infectious material, such as the use of compressed air, must not be used.
- Leave the disinfected area and avoid using the area the next day.
- Disposable bags should be properly disposed of upon the completion of the disinfection work.

4.4 Precautions to take after completing the clean-up and disinfection of the affected area

- Cleaning crews should wash their hands with soap and water immediately after removing the PPE and when cleaning and disinfection work is completed.
- Discard all used PPEs in a double-bagged disposable bag securely sealed and

- labelled.
- The crew should be aware of the symptoms and should report to their occupational health service if they develop symptoms

5. HOW TO REQUEST FOR MEDICAL ASSISTANCE

As soon as suspicious person found, Medic or any other crew on board must report to On duty Officer and Master.

Master must report medical case to

V.Ships

Designated Person Ashore Mr.Kalidas Chandran

Contact Details:

Mobile: +6598270433

DID tel: +6568850364

E-mail: Kalidas.chandran@vships.com

Or Alternate DPA – Mr. Chris Yeo Contact

Details: Mobile: +6581680048

DID tel: +6568850365

E-mail: chris.yeo@vships.com

Caring for the Crew® Program –Global Medical Advice Contact Center:

Email: firstresponse@futurecareinc.com

This email address is monitored by our First Responders 24/7 and should be utilized to request COVID-19 advisory assistance.

Call Line: +1 917-579-0257

Alternate Line: + 1 917-432-2400

Call Line phone numbers are for medical emergency assignments only

The V Ship Management / Client Rep Ashore must be notified of the case when a patient is placed in isolation or any visitor is denied entry due to elevated body temperature upon screening at the gangway.

The operators, owners, or persons-in-charge who should then immediately report this to the **YARD / LOCAL AGENT** and arrange for appropriate medical assistance

5.1 TRANSFER OF A PATIENT TO ANOTHER FACILITY.

If patient is to be transferred for further care: isolation precautions must be continued until the patient has left the premises. Cleaning and disinfectant should start immediately.

The suspected patient shall be given a N95 mask and disposable hand gloves prior to leaving the vessel. Places that are presumed to be touched by the patient will be cleaned & disinfect. As the vessel is alongside patient will be transferred to the hospitals, need to contact agent for the transfer.

Contact details of agent:

PLEASE UPDATE THE CONTACT DETAILS OF AGENT IN SHANGHAI & BATAM

Hospital address and contact no:

Please update for hospitals allocated for COVID 19 in Shanghai & Batam

Ship must also ensure that plans are in place to communicate information about suspected cases that are transferred to a receiving medical facility.

- VShip Management team (Name, contact details, emails)
- Vessel owner (Name, contact details, emails)
- [OFFADM07](#) - Crew Member Illness / Injury Report
- Client specific medial report form (if available)

6. CORONAVIRUS (COVID-19) TRAVEL RESTRICTIONS

6.1 PCR TESTING

- Crewing Officers will personally call to confirm health status and fitness of all joining crew. This shall include if they or anyone in their family have recently travelled to or from China
- PCR testing is required for everyone prior travelling to china, to make sure if tested COVID-19 positive or negative.
- PCR test should be done before 48 hours prior travelling to china from the country of origin i.e. its validity is only 48 hours.
- As required by the country PCR testing should be done upon arrival in china or as soon as upon arrival at hotel.
- Second PCR testing should be done upon 96 hours of the arrival.

6.2 JOINING CRITERIA

- Conduct briefing and educating joiners and off signers to be vigilant and proactive during their transit at airports and public places
- Forward the Novel Coronavirus information sheet to the joining and off-signing crew (See Appendix 5: Novel Coronavirus Information sheet)
- Company should provide all the joining crew with proper and correct PPE required during travelling & transiting through airports.
- Documents to be verified by the company and double checks should be done of proper documents to be held by joining crew.
- Proper training should be given prior travelling to board the vessel

6.3 COVID-19 TRAINING

6.3.1: Protect yourself

COVID-19

Protect yourself and others from getting sick

When coughing and sneezing, cover your nose and mouth with a tissue or a flexed elbow



Throw the tissue into a closed bin immediately after use



Clean your hands with an alcohol-based hand rub or with soap and hot water for at least 20 seconds:

- After coughing or sneezing
- When caring for the sick
- Before, during and after preparing food
- Before eating
- After toilet use
- When hands are visibly dirty



Avoid touching eyes, nose and mouth



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6.3.2: Protect everyone

COVID-19

Protecting everyone during ship visits

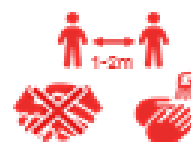
COVID-19 is spread through small droplets from the nose or mouth of an infected person which may be inhaled or land on objects and surfaces other people touch, after which they then touch their eyes, nose or mouth.

Protect through social distancing and good hygiene

Keep a minimum of 1-2 metres distance.

No handshakes or physical contact.

Wash hands frequently and thoroughly, keeping contact surfaces clean, and touch your face less.



Prepare for visitors

Wipe down areas and objects visitors are likely to touch with an anti-bacterial solution.

Restrict access into the ship's accommodation – keep doors locked and post 'no entry' signs.

Provide alcohol hand gel ready for use upon entry onto the ship and around the ship.

Have designated toilet and hand washing facilities for visitors, which are well-stocked with soap.

Try to prepare and complete documents digitally – avoid handling paper and laminated documents.

Have PPE, such as disposable gloves, ready to use in unavoidable close contact situations.



Keep your guard up

Maintain effective ship and gangway security and prevent unauthorised personnel boarding the ship.

If someone trying to board the ship exhibits symptoms – refuse access and report it.

Continue to sanitise contact areas throughout the ship's stay in port.



Take it outside

Where possible, hold conversations and meetings with visitors on the open deck or open bridge wings.

If visitors must be inside, limit the number of crew nearby to the absolute minimum.



Based on information kindly provided
by the North of England P&I Club



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For more information, go to
ics-shipping.org/covid19

6.3.3: Care for Patient

COVID-19

Shipboard care for people with suspected or confirmed COVID-19

For ill crew members

Clean hands frequently with soap and water or with alcohol-based hand rub.



Stay in your cabin and do not attend work. Rest, drink plenty of fluids and eat healthy food.



Stay in a separate cabin from other people. If this is not possible, wear a mask and keep a distance of at least 1 m away. Keep the cabin well-ventilated and if possible, use a dedicated bathroom.



When coughing or sneezing, cover your mouth and nose with flexed elbow or use disposable tissue and discard after use. If you experience difficulty breathing, contact radio medical.



For caregivers

Clean hands frequently with soap and water or with alcohol-based hand rub.



Wear a medical mask when in the same cabin with an ill person. Do not touch your face during use and discard it afterward.



Use dedicated dishes, cups, eating utensils, towels and bed linen for the ill person. Wash everything used by the ill person with soap and water.



Identify surfaces frequently touched by the ill person and clean and disinfect them daily.



Contact radio medical immediately if the ill person worsens or experiences difficulty breathing.



For all crew members

Clean hands frequently with soap and water or with alcohol-based hand rub.



Avoid unnecessary exposure to the ill crew member and avoid sharing items, such as eating utensils, dishes, drinks and towels.



When coughing or sneezing, cover your mouth and nose with flexed elbow or use disposable tissue and discard after use.



Monitor everyone's health for symptoms such as fever or a cough. If anyone has difficulty breathing, contact radio medical immediately.



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For more information, go to
ics-shipping.org/covid19

6.3.4: Stress

COVID-19 Coping with stress during COVID-19

Feeling sad, stressed, confused, scared or angry during a crisis is normal. Talking to people you trust can help. Talk to your colleagues and contact friends and family.



When on board, maintain a healthy lifestyle - including proper diet, sleep, exercise and social contacts with other crew members and by email, social media and phone for family and friends.



Don't use smoking, alcohol or other drugs to manage emotions. When overwhelmed, talk to a colleague or contact Seafarer Help. Have a plan, where to go to and how to seek help for physical and mental health needs if required.



Get the facts. Gather information to accurately determine risks and take reasonable precautions. Use a trusted credible source such as WHO or government agency website.



Reduce time spent watching, reading or listening to upsetting media coverage to limit worry and agitation.



Draw on past skills which helped you manage previous difficult situations to help handle your emotions at this time.



Contact **Seafarer Help**, the free, confidential, multilingual 24 hour helpline for seafarers and their families, open 365 days a year for advice if necessary. Dial +44 20 7323 2737 or email help@seafarerhelp.org



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For more information, go to
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6.3.5: Laundry

COVID-19

How to deal with laundry

How to wash and dry clothes, towels and bed linen if a crew member is a suspected COVID-19 patient

Wash the patient's clothes, towels and bed linen separately.

If possible, wear heavy-duty gloves before handling them.

Never carry soiled linen near your body; place soiled linen in a clearly labelled, leak-proof container (e.g. bag, bucket).

Scrape off solid excrement (e.g. faeces or vomit) with a flat, firm object and place it in the patient's toilet before putting linen in the designated container. Place the excrement in a covered bucket to dispose of in a toilet if this is not in the patient's cabin.

Wash and disinfect linen: machine wash at 60–90°C with laundry detergent. Alternatively, soak linen in hot water and soap in a large drum, using a stick to stir, avoid splashing. If hot water is not available, soak linen in 0.05% chlorine for approximately 30 minutes. Rinse with clean water and let linen dry in sunlight.

Do not forget to wash hands at the end of the process.



Do I need to use a washing machine and drier to wash and dry clothes, towels and bed linen if no one in the crew is a suspected COVID-19 patient?

No need to use a washing machine or drier, nor extremely hot water.

Do laundry as normal using detergent or soap.

Once dry, clean your hands before handling and storing clothes, towels and bed linen.



International
Chamber of Shipping

Shaping the Future of Shipping

For more information, go to
ics-shipping.org/covid19

6.4 GREEN CODE FOR SHANGHAI

As Shanghai is taking great efforts to prevent COVID-19 from spreading – masks on all public transport, temperature checks everywhere, mandatory health info registration upon entering Shanghai and now as an extra safety measure and as an ease for people to travel within Shanghai it has removed Shanghai QR Code.

According to the Shanghai Municipal Information Office, all Shanghai residents are advised to have their Shanghai QR Code at hand, which includes people from Hong Kong, Macau, Taiwan and other countries.

There are a few ways to get your personalized Shanghai QR Code. We recommend getting it via Alipay, as it's easiest. You should have a banner (see above) that will lead you directly to the QR generator page. If not, search 'suishenban' or '随申办' in the search bar, give permission to the app for some personal info and there you have it

The QR codes come in three colours: green, yellow or red.

Green means that you're basically free to go anywhere in the city.

[To Amend\Shanghai is rolling out personalised QR codes to safeguard entry to public spaces.html](#)

Appendix 1: FPSO PROSPERITY - BODY TEMPERATURE SCREENING

FPSO PROSPERITY - BODY TEMPERATURE SCREENING LOG							
LOCATION: FPSO PROSPERITY							
NO	DATE Riqi	FULL NAME Quan Ming	POSITION Weizhi	COMPANY Gongsi	REASON FOR VISIT (VISIT OR SIGN ON) Canguan Yuanyin (Fangwen huo denglu)	BODY TEMPERATURE (NORMAL: 36.0 – 37.5 C) Tiwen (ZhengChang: 36.0-37.5)	TEMPERATURE RECORD BY Wendu Jilu
01							
02							
03							
04							
05							
06							
07							
08							
09							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							
21							
22							
23							
24							
25							
26							

Appendix 2: V Ships Screening Questionnaire COVID-19



SCREENING QUESTIONNAIRE COVID-19

An outbreak of 2019 Novel Coronavirus (2019-nCoV) requires early and effective detection of suspected cases to limit the risk of exposure to others. We are kindly requesting you complete the following questions and to have your temperature checked by us.

Name:		ID Number:	
Name of Employer:		Contact Number:	

Tick/circle the appropriate answers for all listed

1. Do you currently have any of the following symptoms?			
Fever/Chills	YES / NO	Cough	YES / NO
Shortness of Breath	YES / NO	Difficulty breathing	YES / NO
2. Do you have any pre-existing medical condition? (If Yes, please specify below)			YES / NO
3. During the last 14 days have you been in China? If YES, please specify the location/s below			YES / NO
Name of location/s:			
4. Did you have close contact (shared living quarters, or provided care) OR Spent time within speaking distance (if infection control precautions were not used) with a person who does have, or is under investigation for 2019-nCoV OR Have you visited a hospital in China?			YES / NO
5. Have you visited any live seafood or wild animal market in China			YES / NO
6. List all countries you have been to in the last 14 days			
7. Authorization for Disclosure of Information I hereby authorize and consent for VShips (and its affiliated entities) to collect and disclose the information contained in this Screening Questionnaire to my employer and/or field operator (if applicable) and their respective representatives and agents (including third party healthcare providers), and government agencies (where legally required to), for purposes of managing and protecting the site population from the 2019 n-CoV outbreak. Name: _____ Signature & Date: _____ (please print)			

For Official Use Only:

Temperature at screening:	
Name of Healthcare Professional, Signature & Date:	

Appendix 3: ADM 38 - Daily Temperature Chart

Temperature Observation Chart																			
Vessel:										Name of Seafarer:									
Month																			
Date																			
Time																			
Degrees C																			
41.5																			
40																			
39.5																			
39																			
38.5																			
38																			
37.5																			
37																			
36.5																			
36																			
35.5																			
35																			
Notes																			
Note: Record temperature by placing dot in the relevant cell on the date tested.																			

Appendix 4: OFFADM07 – Crew Member Illness / Injury Report



OFFADM07 – CREWMEMBER ILLNESS / INJURY REPORT

Confidential

MV/MT _____
Date of this Report _____

The contents of this form are to be kept confidential and shall be only used to facilitate the treatment of crew members & should be used when the format provided by vessels flag state is not available on board

SECTION TO BE COMPLETED BY VESSEL

Seaman's Name _____		Seas Code No. _____	
Date of Birth _____	Rank _____	Nationality _____	_____
Seaman Book No. _____		Date of Issue _____	_____
Port of Engagement _____		Date of Engagement _____	_____
Nature of sickness/injury _____			

Body Location _____		Has illness /injury incapacitated person from work? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Period of incapacity From ____/____/____ To ____/____/____		Date seaman ceased work ____/____/____	
Log entry made? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, attach extract of log entry to office copy			
Was seaman discharged due to illness/injury? Yes <input type="checkbox"/> No <input type="checkbox"/>		If yes, Name of Port _____ Date discharged ____/____/____	
Particulars of medical Treatment on board: _____		Port Agents Name: _____	
_____		Address _____	
_____		_____	
_____		_____	
Signature of witness (Rank/Name/pls. print clearly)		Signature of Master	

SECTION TO BE COMPLETED BY DOCTOR

Diagnosis (pls. print clearly) _____	

Treatment (pls. print clearly) _____	

Fit for Duty Yes <input type="checkbox"/> No <input type="checkbox"/>	Hospitalisation required Yes <input type="checkbox"/> No <input type="checkbox"/>
Unfit for Duty _____ Days	Name/Address of Hospital _____
Fit for light duty _____ Days	_____
Treatment terminated Yes <input type="checkbox"/> No <input type="checkbox"/>	Fit for Travel (if seafarer to be repatriated) Yes <input type="checkbox"/> No <input type="checkbox"/>
List special clinical examinations, if any, _____	

Seaman referred to a specialist Name _____ Field of specialisation _____	
Specialist's remarks (pls. print clearly – add separate sheet if necessary) _____	

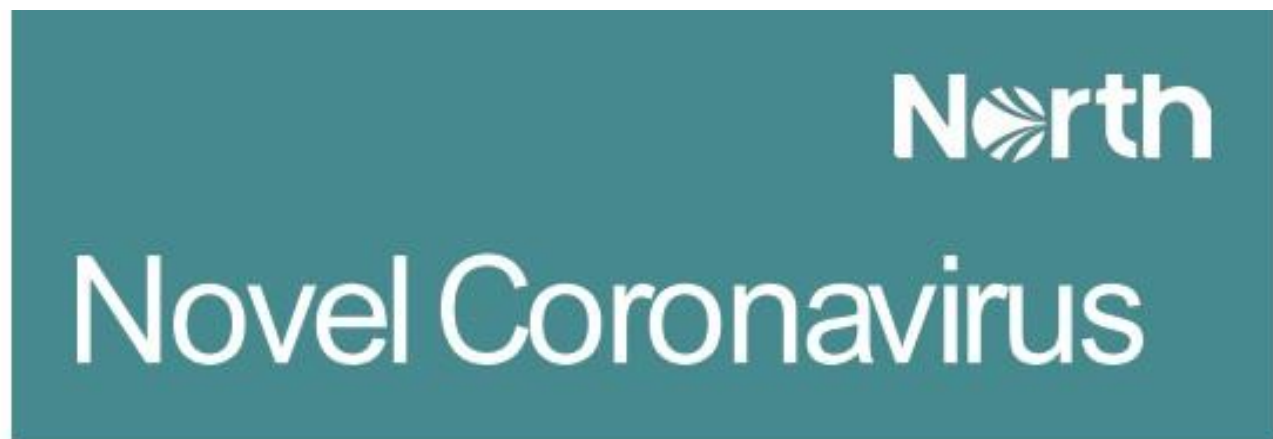
Follow up treatment, if any, to be done at next port: _____	

Doctor's Name _____	
Address _____	

Doctor's signature	

IMPORTANT: PLEASE ENSURE COPIES ARE RETURNED TO THE VESSEL IMMEDIATELY

Appendix 5: Novel Coronavirus Information sheet



2019-nCoV Novel Coronavirus - Key Points

In January 2020, a new strain of coronavirus, which causes a type of pneumonia, originated in Central China.

Spreading of the virus is accelerating and cases have been confirmed in a number of countries around the world. Keep up-to-date by regularly checking the WHO website at: www.who.int/emergencies/diseases/novel-coronavirus-2019

Before arriving at affected areas, ensure everyone understands how to prevent infection and know what to do in the event of infection or suspected infection.

When visiting affected areas

Know the symptoms	<ul style="list-style-type: none"> • Fever, cough, shortness of breath and breathing difficulties. • In more severe cases: pneumonia, severe acute respiratory syndrome (SARS) and kidney failure. • If a crew member exhibits signs of infection, seek medical attention immediately and control the spread of infection as per your contingency plan.
Practice good hygiene	<ul style="list-style-type: none"> • Wash hands regularly with soap and hot clean water – then use alcohol hand rub. • Keep away from people with cold or flu symptoms. • Cover mouth and nose with tissue when coughing or sneezing – then throw tissue into a closed bin after use and wash your hands. • Handle raw and cooked foods separately – use different knives and chopping boards • Cook meat and eggs thoroughly.
Control access to the ship	<ul style="list-style-type: none"> • If someone trying to board the vessel exhibits symptoms – refuse access and report it. • Maintain effective ship and gangway security when in affected areas and ensure unauthorised personnel do not board the vessel. • Restrict access into the ship's accommodation – keeps doors locked. • Have alcohol hand rub ready for use upon entry onto the ship.
Don't touch sick people	<ul style="list-style-type: none"> • Avoid unprotected physical contact with sick persons. • Do not touch an infected person's belongings, clothes, sheets or their bodily fluids.
Don't touch animals	<ul style="list-style-type: none"> • Avoid contact with live animals and surfaces in contact with animals.
Stay safe ashore	<ul style="list-style-type: none"> • Carefully consider whether it is safe to grant the crew shore leave when calling at affected ports. • Get the latest advice on crew safety ashore from the port agent. • Avoid making any crew changes in the ports of affected countries.
Have an action plan	<p>Develop a contingency plan that includes infection control procedures such as:</p> <ul style="list-style-type: none"> • how to request medical assistance • quarantine arrangements and disposal or containment of contaminated materials • separate toilet and bathing facilities for infected persons • sanitisation of affected surfaces and areas • using suitable PPE • restricting movement of people