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Joined-up strategy keeps safety at the helm in stormy waters

Following a year that saw the challenges of major cost reduction, International SOS has reshaped its approach to ensure that health and safety are not compromised

by Frank Simpson

UST AS OFFSHORE ENGINEERING contractors are responding to the changed economic climate for North Sea oil and gas, medical services are also adjusting while keeping the wellbeing of industry personnel uppermost in their minds.

"Last year, 2015, was challenging," said Lawrie Campbell, the regional general manager for Northern Seas and medical services Europe with Aberdeen-based International SOS. The company is the largest provider of medical and travel security services to the global offshore oil and gas, and maritime industries.

"The first half was all about cost reduction; our own industry saw a high turnover of tenders and contracts as many customers looked to re-scope and reprice. However, in recent months there have been productive mediumterm discussions about how we might re-engineer services now and for the future," he added.

"We have reshaped our proposition and how we meet client needs. We focus on improving services through greater operational efficiency. It is critical that health and safety, and service standards, are not compromised when costs are being cut." The company had been streamlining operations after acquiring businesses in the UK and Norway over the six years to 2015. This was accelerated by the oil price slump, and International SOS now offers a fully outsourced offshore medical solution integrating all medical services.

"We are the only provider that can do that in the North Sea, and in all sectors of the North Sea," Campbell claimed.

International SOS also has a global focus and reach. For example, it recently issued advice to clients on accessing information and local support regarding transmission of the Zika virus and relevant precautions that pregnant women are recommended to take prior to travelling.

Inside the packaging of the new model, a number of features stand out. It offers compliance in all jurisdictions to customers, many of which operate transnationally. This, Campbell said, reduces management time and the cost of a solution, and improves performance.

"For example, there are reduced transition costs and lead times for assets moving from geographical sector to sector. If someone has, say, six assets around different sectors of the North Sea, the savings simply for setting up

a health management framework can be hundreds of thousands of dollars," he added.

The entire system can be managed for a client by one doctor, providing common reporting across jurisdictions and joined-up injury and illness case management. There is a single point of contact with a client's headquarters.

International SOS has wholly owned onshore infrastructure and support in the UK and Norway, employing 450 professionals to support these operations. It supports its locally-based international operations from Aberdeen.

"Operators of mobile assets such as offshore construction vessels and drilling rigs are having to move more of them, and more often, to take on short-term, opportunistic work," Campbell observed. "Our ability to support that is unique."

The integrated service is overseen by a Medical Adviser who carries out risk assessment of the facility and all elements offshore including equipment, medications and sick-bay specification. Medical staff are fully managed.

Topside medical services are supported by onshore medical professionals who are on-call 24/7 with access to advanced telemedicine facilities. Telemedicine, such as for offshore medical checks, is increasingly accepted by cost-conscious clients, Campbell said.

"Onshore clinics also play a vital role in managing fit-to-work medicals and case management, as well as surveillance to review health risks," said Dr Michael Braida, regional medical director Northern Seas. "We use our expertise onshore to contain offshore events as far as possible, and order medical evacuations only if absolutely necessary. We manage a person's return-to-work process so the asset operator is not penalised through lost-time injuries or downgraded health and safety statistics."

The value of integrated services is clear, Campbell said. "Our recent study showed that an integrated outsourced health system brings tangible business benefits, improving total health performance and, in turn, efficiency of operations."

Evidence shows that the integrated approach increases onsite clinic visits, Braida added. "It means 250% more preventative check-ups, and a 67% increase in proactive follow-up on injury and illness cases. This can reduce overall illness rates, and reduce emergency medical transport requirements by 90%. This method not only produces a safer, healthier offshore workforce, but also reduces the need for costly disembarkations and operational disruption."

Using a streamlined, outsourced offshore medical service from a single



Lawrie Campbell stressess joined-up illness and injury case management

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provider is cost-effective and efficient, Campbell argued. "Our new model supports business continuity by providing timely and quality medical care to employees, increasing productivity and reducing lost time."

He explained that it also contributes to enhanced health, safety and environmental performance through a stringent injury and case management methodology and support system, developed in line with industry standards to help reduce lost time injuries and recordable incidents.

"It assists operators to comply with national and international regulations and industry best practices. This ensures a consistent and measurable solution while meeting the Duty of Care agenda for all employees."

In an industry concerned about the haemorrhaging of skills and the challenges of recruitment, the International SOS approach helps to develop and retain people through increased wellbeing and morale, he concluded.

There is plenty of scope for International SOS to apply its model in the Northern Seas, he stressed. "With fewer people mobilising to go offshore, fewer are passing through our onshore clinic. However, there is a lot of North Sea oil and gas activity after the wave of oil and gas investments pre-2015. Except for exploration and some maintenance programmes, there is still business out there, it needs to be conducted safely, and that is opportunity for us."

Based on its own insights, International SOS is driving thought leadership in its sector. The company has commissioned the British Standards Institution (BSI) to create PAS 3001:2016 to provide global organisations with a standardisation document describing best practices to manage risks and provide Duty of Care to employees working abroad.

Campbell observed: "The offshore medical services sector has never really standardised in the same way that other parts of the supply chain have. Solutions have been over-complicated rather than designed as fit-for-purpose and rolled out in a more standardised way. We have repositioned our capabilities with that in mind."

Hypothetically, he explained, if the entire offshore medical sector operated to the same minimum but robust standards, it could achieve the same results as now, but more cost effectively. "To draw an analogy with offshore engineering, there is a wide variety of designs and specifications for subsea systems, and much discussion around how standardisation could be applied in that case."

Asked what would happen ideally, he suggested that – just as for risk management of health, safety and environment offshore – operators could ask medical service providers to take clients' health objectives then implement and govern appropriate systems. Clients would measure health outputs rather than simply looking at the costs of component parts of the system.

"This would allow providers to demonstrate that controlling, managing and improving health performance has a direct effect on productivity," he added.