

From: [REDACTED]
To: [REDACTED]
Cc: [REDACTED]
Subject: Prelude - NOPSEMA - 08/04/20 Engagement Follow-up - action close out
Date: Thursday, 9 April 2020 4:31:16 PM
Attachments: [image002.png](#)

[REDACTED],

As discussed during yesterday's meeting please find close out information for the following actions:

[REDACTED]

[REDACTED]

- 2. COVID-19: Shell to provide the timeline of the actions undertaken in alignment with the precautionary medevac following identification of close contact with a positive case of COVID-19

Overview Comment: The screening process worked as designed. The IP was initially denied mobilisation to Prelude until his acute respiratory symptoms had cleared. However, subsequently he was informed that he had been in close contact with a COVID-19 case, this was unrelated to his previous symptoms.

1. On 17 March the IP was advised by the SDA Resource Dispatcher that based on his COVID19 Questionnaire response where he marked "yes" for showing symptoms he had been deemed unfit for travel.
2. The IP contacted Shell Australia on 18 March from Perth airport saying he had not received the email advising him not to travel. He only realised when his Broome leg of the trip had been cancelled. Note: SDA Resource Dispatchers only book and control the PTH-BRM leg of travel. Workers are responsible for booking and managing all other travel themselves.

3. Shell Occupational Health Nurse (OHN) contacted the IP on his mobile phone while still at the PTH airport. The OHN sought advice from the Shell Occupational Physician who advised that given his cold & flu type symptoms, he could not mobilise to Prelude. He did not meet the criteria at the time to be regarded as a COVID-19 suspect Case. The IP was instructed he had to be free of symptoms for 48 hours before being able to mobilise to Prelude. The IP agreed to arrange accommodation in Perth and wait until he had recovered. After recovering and being symptom free for 48 hours he mobilised to Prelude.
4. On 27 March the Shell Occupational Physician was informed by the Prelude Medic that the IP had just received a Public Health notification that he had been in close proximity to a person who was a Confirmed Case on his flight from Sydney to Perth on 17 March.
5. The worker had no symptoms; He was treated by the Medic as a Close Contact, a P2 mask was immediately placed on him.
6. The Shell Occupational Physician requested the IP provide information regarding people he had been in close contact with; as per the Public Health definition. This was in the event that he developed COVID-19 symptoms in the following 24 hours. The IP agreed to be immediately placed in quarantine. He was placed in one of the designated cabins.
7. The Shell Australia Country Health Manager, liaised with Public Health and a plan was made to medevac the IP to Perth on 28 March.
8. At 0700 on 28 March, the Shell Occupational Physician confirmed with the Prelude Medic as to whether the IP was experiencing any symptoms, and was informed that he had not yet developed any. He was thus regarded as a Close Contact, and not a Suspect Case. This information was provided on request to the medevac provider.
9. The Prelude Medic has been keeping in contact with the IP on a daily basis, and as of 1 April he has not developed symptoms. The IP's 14 day quarantine period ended on 1 April (14 Days post close contact with COVID-19 case).

Kind regards,



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