

International Marine Contractors Association

Improving performance in the marine contracting industry

IMCA Update

Bryan McGlinchy and Peter Sieniewicz

Bergen International Diving Seminar

November 2021





Highlight some of IMCA's work since we last met in Bergen

1. IMCA Diving Supervisor CPD App
2. IMCA Certificate Verification Portal
3. IMO Diving Code
4. IMCA Accredited Diving System Inspector Scheme
5. COVID-19 Work undertaken with DMAC to protect the industry and its workers





IMCA / DMAC and the industry's response to the COVID-19 pandemic

COVID-19 and Diving – IMCA Information Notes



- IMCA D 05/20 *Renewal of diver medic certification during the COVID-19 pandemic*
- IMCA D 06/20 *Novel Coronavirus (COVID-19) – guidance for diving contractors*
- IMCA D 13/20 *Release of KMDSI bulletin on cleaning and sanitising Kirby Morgan Helmets, BandMasks and Full Face Masks*
- IMCA D 14/20 *Norwegian Oil and Gas Association Document COVID-19 and Offshore Diving (Norway)*
- IMCA D 15/20 *Extension of the renewal period for annual DESIGN audits during the COVID-19 pandemic*
- IMCA D 16/20 *COVID-19 – An example of a risk assessment undertaken by an IMCA Diving Contractor*
- IMCA D 18/20 *Publication of UK HSE guidance for divers and AMEDS on medical fitness and medical examination of divers during the COVID-19 outbreak*
- IMCA D 19/20 *IMCA Policy for the Validity of Diver Medicals During the COVID-19 Pandemic*
- IMCA D 20/20 *Norwegian directorate of health statement normalising the validity of offshore health certificates and divers' health certificates*
- IMCA D 21/20 *IMCA Diver Medic Training During COVID-19*
- IMCA D 22/20 *IMCA Diving Supervisor and ALST Training During the COVID-19 Pandemic*
- IMCA D 24/20 *COVID-19 swab-test testing for diver medics*



Key Docs: IN 06/20 + DMAC 33 & 34



Information Note

No. 1583 – May 2021

Novel Coronavirus (COVID-19) – Guidance for Diving Contractors

Updated May 2021

This Information Note supersedes IMCA Information Note 1551 Rev. 2 which is withdrawn. The document has been prepared by IMCA Diving Division Members and members of the Diving Medical Advisory Committee (DMAC). It is also fully endorsed by the Working Committee of the International Diving Industry Forum (IDIF).

1 BACKGROUND

The novel Coronavirus disease (COVID-19) is a respiratory illness that can spread from person to person. It was first identified during an outbreak in Wuhan, China in December 2019 and has since spread worldwide. In 2020 COVID-19 was declared a pandemic by the World Health Organisation (WHO) and multiple cases have been confirmed in the offshore community. There is currently no curative treatment for the disease. Despite the advent of COVID-19 vaccination programmes in a number of countries, it is very important that the suite of protective measures outlined in these guidelines is observed for the foreseeable future.

The best way to protect against infection is to avoid being exposed to the virus that causes COVID-19.

A person who has had no symptoms of COVID-19 for 14 consecutive days, has had no contact with infected people and has maintained social distancing during that period, is considered likely to be COVID-19 free.

The aims of this Information Note are to:

1. Offer guidance to diving contractors on preventing the spread of the virus; and
2. Give considered advice on how to respond to suspected cases of COVID-19 among offshore commercial diving teams (surface supplied and saturation).

How COVID-19 spreads

When someone who has COVID-19 coughs or exhales, they release droplets of infected fluid. Most of these droplets fall on nearby surfaces and objects – such as desks, tables or telephones. People can catch COVID-19 by touching contaminated surfaces or objects and then touching their eyes, nose or mouth. If standing close to a person with COVID-19, others can catch it by breathing in droplets coughed out or exhaled by that person. Maintaining a distance of at least 1 metre to other people will reduce the risk of infection. Poor ventilation, especially in enclosed spaces, increases the risk of transmission.

Symptoms

Most persons infected with COVID-19 experience mild symptoms and recover. The symptoms may include:

- Fever or chills;
- A dry cough;
- Shortness of breath or difficulty breathing;
- Fatigue;
- Muscle or body aches;

IMCA, its members and affiliates (IMCA, Divers, IMCA (UK), IMCA (USA), IMCA (CAN), IMCA (AUS), IMCA (NZ), IMCA (INDONESIA), IMCA (MEXICO), IMCA (BRAZIL), IMCA (CHINA), IMCA (RUSSIA), IMCA (INDONESIA), IMCA (MALAYSIA), IMCA (THAILAND), IMCA (PHILIPPINES), IMCA (VIETNAM), IMCA (JAPAN), IMCA (KOREA), IMCA (TAIWAN), IMCA (HONG KONG), IMCA (SINGAPORE), IMCA (AUSTRALIA), IMCA (NEW ZEALAND), IMCA (INDONESIA), IMCA (MALAYSIA), IMCA (THAILAND), IMCA (PHILIPPINES), IMCA (VIETNAM), IMCA (JAPAN), IMCA (KOREA), IMCA (TAIWAN), IMCA (HONG KONG), IMCA (SINGAPORE), IMCA (AUSTRALIA), IMCA (NEW ZEALAND)) apply to all documents from IMCA's website, including this document. IMCA makes every effort to ensure the accuracy and reliability of the data contained in the documents it publishes, but IMCA shall not be liable for any guidance and/or recommendations and/or statements herein contained. The information contained in this document does not fulfill or replace any individual's (or Member's) legal, regulatory or other status or obligations in respect of their operations. Individuals and Members remain solely responsible for the safe, lawful and proper conduct of their operations. © 2021 Page 1 of 20

The Diving Medical Advisory Committee

DMAC, 52 Grosvenor Gardens, London SW1W 0AU, UK
Tel: +44 (0) 20 7824 5520 Fax: +44 (0) 20 7824 5521

www.dmac-diving.org
info@dmac-diving.org

Return to Diving after COVID-19

DMAC 33 – June 2020

1 Introduction and scope

This guidance covers the return to commercial offshore surface supplied and saturation diving after confirmed or suspected COVID-19. It also contains recommendations for the assessment of fitness for diving duties of asymptomatic offshore commercial divers during the ongoing COVID-19 pandemic. The assessment of asymptomatic divers is necessary to identify potential pulmonary changes in those who contracted the disease but were symptom free. It is recognised that the guidance may be of interest to other diving sectors (e.g. inland/inshore, military etc.). The advice in this document is based on 'expert opinion' (Oxford CEBM Level 5) i.e. on very limited scientific foundations as only a limited number of case series have been available for review as of June 2020. We expect the advice in this document to be adjusted as knowledge is increased on the prevalence, infectivity and persistent health effects of COVID-19.

2 Short-term and Long-term Health Effects of COVID-19

The severity of COVID-19 disease is highly variable – from asymptomatic infection to death. Although pulmonary infection (pneumonia) with ground-glass opacities visible in chest CT scans is well recognised(1), recent reports suggest that, particularly in severe cases, the central nervous system and the cardiovascular system may be involved as well (2, 3). Preliminary data suggest a high incidence of pulmonary embolism in patients hospitalized for COVID-19 (4). DMAC has not identified studies characterising the progression and recovery of pulmonary CT changes in non-hospitalised patients, but there were remaining pulmonary CT changes in a small cohort of 112 hospitalised Chinese COVID-19 patients examined >28 days after initial symptoms (5). Pulmonary changes were reported in a group of asymptomatic passengers on the cruise ship 'Diamond Princess' (6). In this group of 104 patients with COVID-19 (confirmed by PCR tests), 54% of the 76 asymptomatic patients demonstrated CT findings. Overall, the findings suggest that there may be structural pulmonary changes in the absence of symptoms and these findings may persist for a long time.

3 Effects of COVID-19 on Fitness for Diving

In the acute phase of disease, symptoms like fatigue, malaise, dyspnea and coughing will preclude diving and will not be further discussed. The question arises as to the consequence for diving safety and infectivity once the diver is asymptomatic. Advice on these questions will be based on extrapolation of data and expectations based on the effects of similar infectious diseases. An example of such an assessment is the one published by the Belgian Hyperbaric Medicine Society (7). This statement discusses the potential consequences for fitness for diving after COVID-19 based on infectivity to other divers, pulmonary barotrauma, cardiac events, pulmonary oxygen toxicity and decompression sickness. The statement does not specify whether it is applicable to diving in general or whether it specifically addresses recreational or occupational diving.

Dr Frank Hietig, a senior physician at the Innsbruck University hospital, has reported that six divers having suffered COVID-19, but not being hospitalised, demonstrated 'severely damaged lungs' five to six weeks after recovery (8). However, the international hyperbaric diving society UHMS calls for caution when interpreting statements in the lay-press without peer review (9).

The views expressed in any guidance given are of a general nature and are intended without recourse or responsibility upon the part of the Diving Medical Advisory Committee, its members or officers. Any person who considers that such opinions are relevant to his circumstances should immediately consult his own adviser.

The Diving Medical Advisory Committee

DMAC, 52 Grosvenor Gardens, London SW1W 0AU, UK
Tel: +44 (0) 20 7824 5520

www.dmac-diving.org
info@dmac-diving.org

Guidance for Medical Examiners of Divers Conducting Face-to-Face Medicals During the COVID-19 Pandemic

DMAC 34 – June 2020

1 Introduction and Scope

The purpose of this guidance note is to give advice on how medical examination and assessment of commercial divers may be done adequately and with a low risk of transmission/infection during the Covid-19 pandemic. The guidance contains advice on risk assessment of clinical examinations, spirometry and exercise testing, and how infection risk can be managed. It is not the intention of this document to be prescriptive or provide detailed advice on all aspects of the examinations.

National legislation and the requirements of professional regulatory bodies may impose restrictions on the conduct of full medical examinations of divers. These take precedence over this guidance and must be observed.

2 Background

As the prevalence of Covid-19 increased globally during the spring and early summer of 2020, diving physicians understandably became increasingly reluctant to conduct commercial diving medicals. To help reduce the risk of SARS-CoV-2 exposure and transmission during diving medicals, and so protect both divers and physicians, regulatory authorities have introduced various interim control measures. These include: extending the period of validity of existing diving medicals; permitting telephone/video consultations; and accepting shortened medical assessments (e.g. by omitting spirometry) with reduced duration of certification.

Extending validity without a clinical examination or omitting parts of the medical examination are risk balanced temporary measures. They cannot continue indefinitely because:

- the risk of declaring divers medically fit to dive with undetected health conditions that are contraindicated will increase with time;
- new commercial divers should have a full clinical examination and assessment before being considered medically fit to dive; and
- divers who have had Covid-19 with moderate or severe symptoms should have a full health examination by a medical examiner of divers (MED) as recommended in DMAC 33 Return to Diving after COVID-19 (1).

It is therefore vitally important that, while COVID-19 remains a threat, appropriate infection prevention and control measures are introduced by MEDs so that face-to-face full medical examinations and assessments of commercial divers may proceed globally with low risk. It is essential that divers and the offshore energy diving industry have access to such a service going forward.

3 Risk Assessment

Appropriate risk control measures for conducting face-to-face full diving medicals during the COVID-19 pandemic will need to be based upon the findings of a suitable and sufficient risk assessment. When conducting such risk assessments, Medical Examiners of Divers should consider the following and any other relevant factors:

The views expressed in any guidance given are of a general nature and are intended without recourse or responsibility upon the part of the Diving Medical Advisory Committee, its members or officers. Any person who considers that such opinions are relevant to his circumstances should immediately consult his own adviser.



The Diving Medical Advisory Committee

DMAC, 52 Grosvenor Gardens, London SW1W 0AU, UK.
Tel: +44 (0) 20 7824 5520

www.dmac-diving.org
info@dmac-diving.org

DMAC Statement on COVID-19 Vaccination and the Offshore Energy Diving Community

October 2021

COVID-19 is a viral infection caused by the SARS-CoV-2 virus and may develop into severe and potentially lethal disease. There is no specific treatment for COVID-19 once a person is infected. For offshore divers, COVID-19 is of special concern for several reasons:

- Social distancing is an important measure to stop the spread of the virus. This is difficult to maintain on an offshore vessel, and in practice impossible in a hyperbaric chamber and at a dive station (i.e. where all diving team members and technicians have to interact closely, before, during and after a surface-demand dive). If one person is infected, other persons on the same team will be exposed to the virus.
- Handling a severe case of COVID-19 in a saturation chamber is much more complex than in a hospital intensive care unit, with a higher likelihood of negative outcome.
- COVID-19 is primarily a disease of the airways, with pneumonia as one of the more common complications. Lung injury is a potential long-term effect which in turn may influence the diver's fitness to return to work. In addition, COVID-19 has been shown to affect the endothelial function and may increase susceptibility to decompression illness.

Several vaccines have been developed and have been proven to prevent COVID-19 effectively. Based on efficacy and safety, the World Health Organization (WHO) has, as of September 2021, validated eight COVID-19 vaccines for emergency use listing. The European Medicines Agency (EMA) has authorised four vaccines and the US Food and Drug Administration (FDA) has approved one vaccine and given "Emergency Use Authorization" to two other vaccines.

The efficacy and safety of vaccines is documented in large studies before approval is given. In addition, studies have been conducted on clinical use of the vaccines, confirming that they are safe and effective. New studies have also assessed the efficacy against the delta variant of the SARS-CoV-2 virus, which is currently predominant in most countries. A study of 19,000 persons with COVID-19 in the UK showed 67% and 88% effectiveness against symptomatic infection with the delta variant for two different vaccines [1]. In a register study including 4.2 million persons in Norway, the authors found that mRNA-vaccines offered 65% protection against symptomatic and asymptomatic infections with the delta variant [2]. Vaccines are particularly effective at preventing severe COVID-19 infection, including with the delta variant. In a Norwegian study, the authors found a 76% reduced risk for hospitalisation for vaccinated persons compared to unvaccinated [3]. In a not yet peer reviewed study from the UK, the vaccine effectiveness against hospitalisation was estimated at 96% and 92% for two different vaccines [4]. It has also been shown that vaccination reduces person-to-person transmission of the SARS-CoV-2 virus [5].

COVID-19 vaccines are generally well tolerated. The most common side effects are pain at the injection site, tiredness, headache, muscle pain, chills, fever and nausea. These are usually mild and short-lasting. More serious side effects have been reported, but these are rare. As with all other vaccines, there is a small risk of serious allergic reactions immediately after vaccination. There have also been reports of blood clotting and inflammatory heart conditions that may be linked to vaccinations. Such potential side effects are extremely rare. In the Norwegian Medicines Agency report on suspected adverse reactions to COVID-19 vaccines published on September 14 2021, the frequency of serious potential side effects is 3.7 cases per 10,000 vaccinations [6]. In a report from the Italian Medicines Agency the frequency of adverse side effects was 119 per 100,000 vaccinations based on a total of 76 million doses administered [7]. 86% of these cases were categorised as non-serious.

DMAC, the independent body comprising diving medical specialists from across Europe, seeks to provide advice about medical and certain safety aspects of commercial diving.

The views expressed in any guidance given are of a general nature and are intended without recourse or responsibility upon the part of the Diving Medical Advisory Committee, its members or officers. Any person who considers that such opinions are relevant to his circumstances, should immediately consult his own adviser.

Although COVID-19 vaccination significantly reduces the risk of infection, it does not eliminate it completely. All divers and diving contractors are therefore urged to continually monitor for symptoms of COVID-19 disease, which may be less severe in vaccinated individuals.

It is DMAC's position that, although vaccination side effects may occur, the known risks of COVID-19 illness and its related, possibly severe complications, far outweigh the potential risks of having an extremely rare serious adverse reaction to vaccination. DMAC therefore strongly recommends that offshore divers and diving personnel follow national recommendations for primary vaccinations and booster doses. Vaccination will reduce the risk of severe COVID-19 infection significantly. In doing so, it will also markedly reduce the risk of divers who contract COVID-19 from suffering severe complications that may cause career limiting long-term health effects.

Any non-vaccinated person joining a group of vaccinated people in a working environment where preventive measures like social distancing cannot be maintained, represents a significant increase in risk. Diving contractors wishing to control risks as far as reasonably practicable should take account of this, within the applicable legislative framework.

References

- [1] Bernal JL, Andrews N, Gower C et al. Effectiveness of COVID-19 Vaccines against the B.1.617.2 (Delta) Variant. *N Engl J Med* 2021; 385:585-594
- [2] Seppälä E, Lamprini V, Searfält J et al. Vaccine effectiveness against infection with the Delta (B.1.617.2) variant, Norway, April to August 2021. *Euro Surveill*. 2021;26(35):pii=2100793. <https://doi.org/10.2807/1560-7917.ES.2021.26.35.2100793>
- [3] Veneti L, Salamanca BV, Seppälä E et al. No difference in risk of hospitalisation between reported cases of the SARS-CoV-2 Delta variant and Alpha variant in Norway. *medRxiv* 2021.09.02.21263014; doi: <https://doi.org/10.1101/2021.09.02.21263014>
- [4] Stowe J, Andrews N, Gower C et al. Effectiveness of COVID-19 vaccines against hospital admission with the Delta (B.1.617.2) variant. https://media.ghn.org/articles/Effectiveness_of_COVID-19_vaccines_against_hospital_admission_with_the_Delta_B_16172.pdf
- [5] Shah Anoop S.V., Gribben C, Hanlon P et al. Effect of Vaccination on Transmission of SARS-CoV-2. *N Engl J Med* 2021; <https://www.nejm.org/doi/full/10.1056/NEJMc2106757>
- [6] Norwegian Medicines Agency. Reported suspected adverse reactions to COVID-19 vaccines as of 14.09.2021. <https://legemiddelverket.no/Documents/English/COVID-19/20210917%20Reported%20suspected%20adverse%20reactions%20coronavirus%20vaccines.pdf>
- [7] Italian Medicines Agency. COVID-19 Vaccine Surveillance Report, Report #8 Period 27/12/2020 – 26/08/2021. https://www.aitb.gov.it/documents/20142/1315190/Rapporto_sorveglianza_vaccini_COVID-19_B_EN.pdf



- *"It is DMAC's position that, although vaccination side effects may occur, the known risks of COVID-19 illness and its related, possibly severe complications, far outweigh the potential risks of having an extremely rare serious adverse reaction to vaccination.*
- *DMAC therefore strongly recommends that offshore divers and diving personnel follow national recommendations for primary vaccinations and booster doses.*
- *Vaccination will reduce the risk of severe COVID-19 infection significantly.*
- *In doing so, it will also markedly reduce the risk of divers who contract COVID-19 from suffering severe complications that may cause career limiting long-term health effects."*

The Value of DMAC



- In the digital age it can be difficult to find objective, well-researched, and reliable information on important subjects. This is why IMCA values the diving medical expertise and input of DMAC so much.
- The committee is made up of doctors intimately involved in the practice of diving medicine and its guidance is always based on the latest medical research and on empirical evidence.
- DMAC has no other agenda than to provide impartial advice about medical aspects of commercial diving for the benefit of offshore divers.





IMO Diving Code



Revision of the IMO Diving Instruments

- Revision of the IMO *Code of safety for diving systems* and the *Guidelines and specifications for hyperbaric evacuation systems*.
 - This has been a long-term objective, but we are making excellent progress.
 - IMCA's Core Diving Industry Workgroup (CDIW) for revision of the IMO Diving Instruments met weekly throughout the summer and autumn period last year and regularly in 2021.
 - A huge amount of complex technical and administrative work was undertaken in that time, and a lot of novel thinking was required.
 - In all, 9 submissions of draft text were made to the IMO Intersessional Correspondence Group (CG) for comment and then subsequent CDIW response.
 - The timetable of works for the remainder of 2021 and the spring of 2022 is shown on the next slide.

- **05 November 2021** – Text of Draft Code was submitted to the IMO together with the final report of the Correspondence Group.
- **November / December 2021** – Translation of 95 page document into 5 languages.
- **November 2021 to 25 February 2022** – Review any written submissions received by co-ordinator from Member States.
- **28 February to 04 March 2022** – Attend IMO Sub-committee on Ship Systems & Equipment (SSE 8) session and participate in IMO Working Group.
- The earliest date for publication of the new Diving Code will be **2023 – probably later.**

Improvements to the Diving Code



If adopted:

- The New Code's application will be extended to cover all types of diving systems, fixed and temporary, surface and saturation.
- Clear requirements for surface-orientated diving systems will be included.
- In addition to requirements for diving plant and equipment, the New Code will also address:
 - the suitability of ships and floating structures to act as diving platforms; and
 - the need to coordinate the ship's ISM system with a diving safety management system.

Improvements to the Diving Code (cont.)



If adopted:

- The means of evacuating divers in saturation will be clarified and updated so as to provide an equivalent level of safety to SOLAS.
- The major planning challenges related SAR operations for launched Hyperbaric Survival Craft (HSC) and how to deliver divers to a place of safety will be addressed by introducing requirements for SAR cooperation planning.
- These improvements should help to level the playing field for IMCA diving contractors globally.



Accredited Diving System Inspector



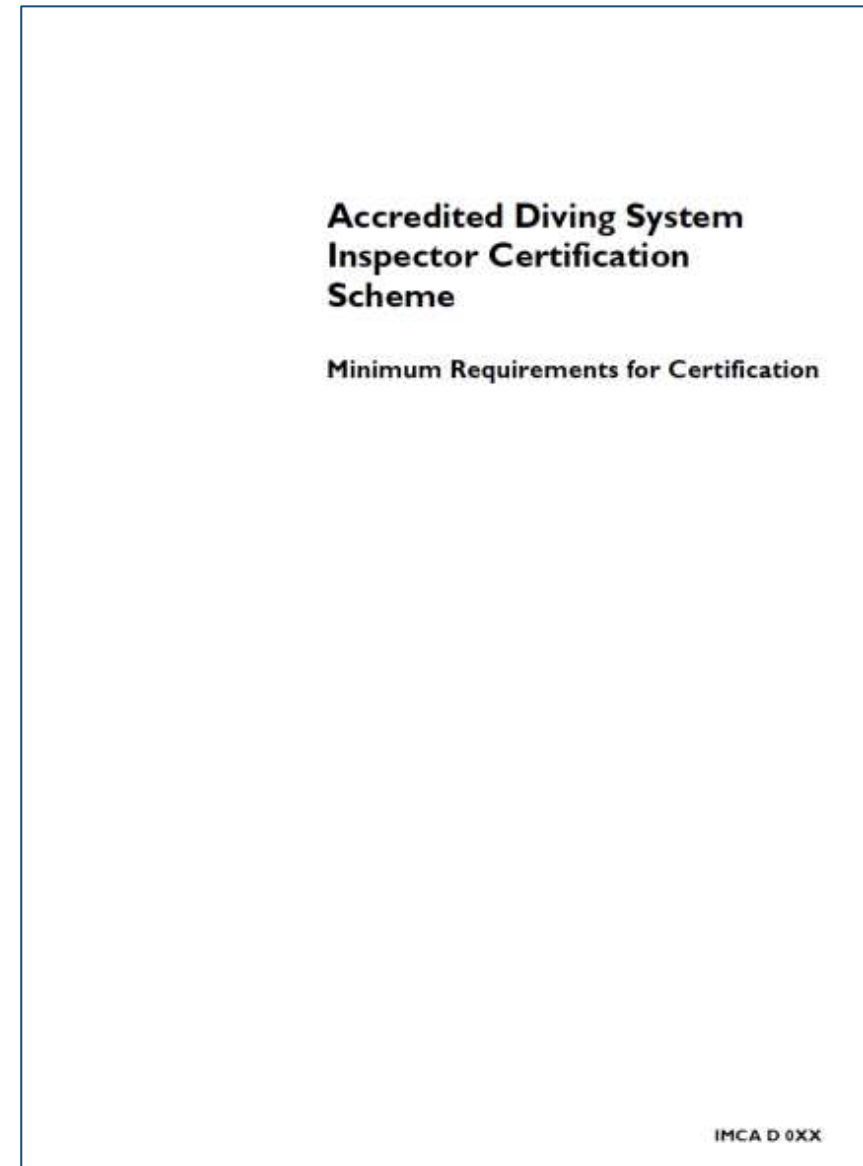
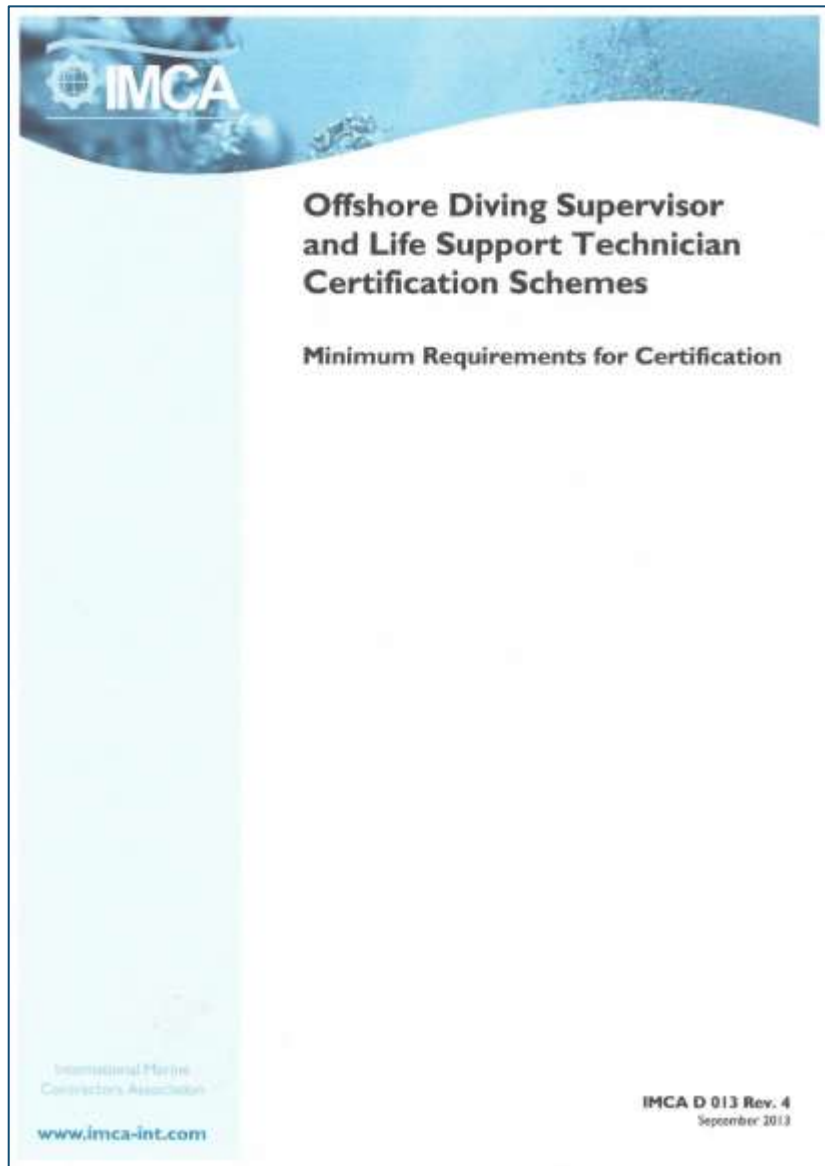
Aims of the ADSI Scheme



- Development of the ADSI scheme is making good progress.
- The ADSI scheme is being set up to:
 - Introduce an industry recognised professional accreditation for this important group of skilled workers
 - Provide assurance that diving system inspectors are competent, and so improve the quality, consistency, professionalism, and credibility of DESIGN inspections
 - Help the offshore energy diving industry ensure “objective auditing” of diving systems by individual inspectors;
 - Give all stakeholders confidence that diving systems subject to DESIGN inspections undertaken by ADSIs are fit for purpose and safe to use;
 - Reduce the frequency of diving system DESIGN inspections by holding records of ADSI DESIGN inspections on the eCMID database that with the appropriate permissions, can be accessed by client companies.



The Model

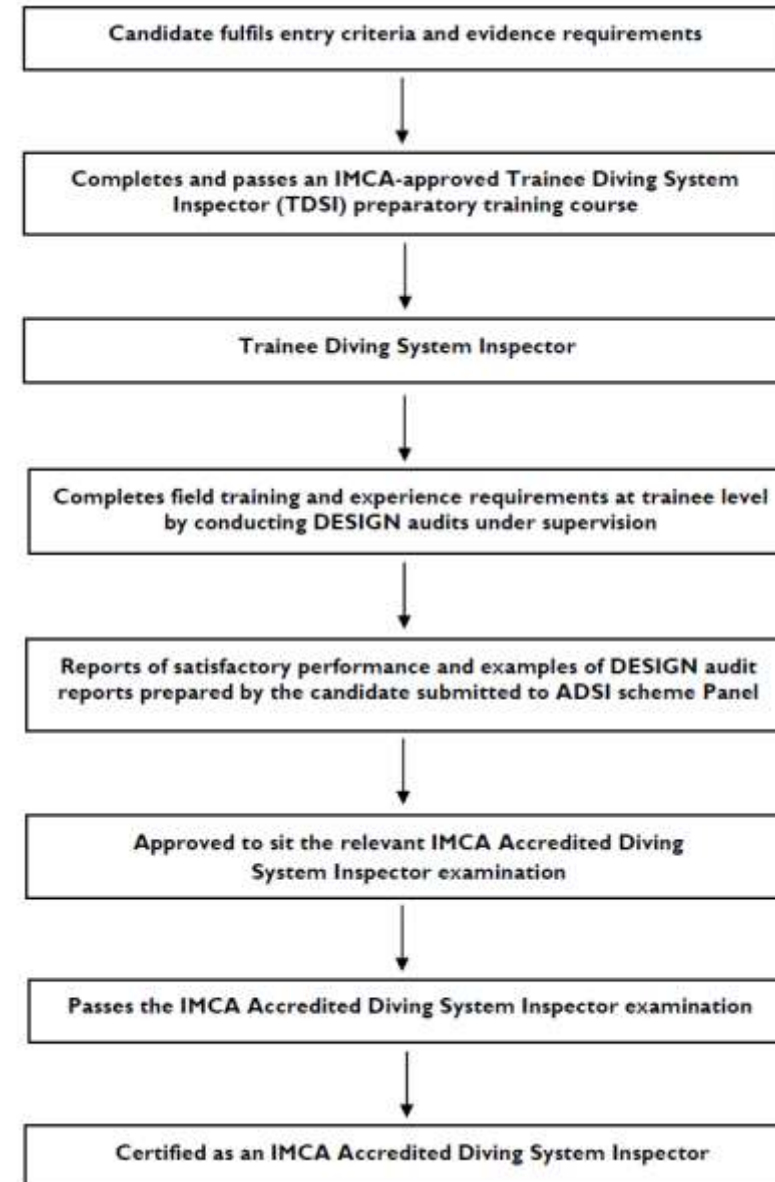


ADSI Certification Process

Accredited Diving System Inspector Certification Scheme

Minimum Requirements for Certification

IMCA D 0XX



Beil



IMCA Diving Supervisor CPD App



IMCA Diving Supervisors CPD App

- At the last Conference we discussed the work IMCA were doing on developing a CPD App for Diving Supervisors. The App was launched to industry in April 2019. It is now a requirement that all IMCA supervisors remain “In date”
- Today, over 1350 Supervisors are actively using the APP.
- The APP has also been adopted by both DCBC and ADAS whose qualifications are recognised by IMCA, and discussions have opened with our colleagues from the Netherlands.
- IDIF members are now confident that IMCA Supervisors are being keep up to date with changes to IMCA guidance and practices.
- The App has given IMCA the ability to speak directly to the supervisors especially on site through the “Broadcast Function”. This has been extremely helpful, especially during the recent pandemic.



Come from a number of sources for example;

- IDIF expressed concerns about saturation diver upward and downward excursions.
- Learning the lessons quickly from Safety Flashes and diving accidents.
- Supervisors expressed concerns about TUP Discipline, flying after diving.
- DMT schools raised worries about the lack on knowledge on how to deal with pneumothoraxes and the recognition of DCI as we now rarely see it.
- IMCA was worried that new or revised guidance was not getting to the hands of the end user.
- IMCA has in the region of over 70 Diving related guidance documents published or in production.
- All of these concerns and others have now been addressed.



Some Topics Covered So Far

Load cracking in aluminium cylinders

Dropped objects

Underwater air lift bags

Flying after diving

Minimum dive team sizes

Diving Project Roles, Duties, & Responsibilities

Control of Bell Blow-Down

Umbilical handling – trapped umbilical

Underwater air lift bags

HP water jetting

Subsea lifting operations

Use of bell outer doors

Management of change

Hat hygiene

Physics review

Decompression illness

Bell batteries

Diver bail-out

Equivalent Air Depth (EAD)

Gas analysis

TUP safe practices

Permits-to-work

ROV/Diver SIMOPS

Surface supplied mixed gas diving

Minimum quantities of gas required offshore



Industry Reception

- The major IOGP client companies have fully endorsed the CPD scheme and the Diving Supervisor CPD App approach.
- Many IOGP client companies now require diving supervisors who work on their projects to demonstrate that they use the App to keep their CPD status in-date.
- IMCA members have also fully embraced the scheme.
- Crucially, most of the diving supervisors themselves appear to like it.



What next?



The current CPD App is exclusively offered to IMCA Qualified Supervisors only! No one else is allowed access!

However ...

Following encouragement from IDIF, IMCA members and other industry stakeholders, we are exploring the possibility of launching a new App in 2022, the:

"IMCA Diving Development App."

The format will be the same with each module taking roughly 20 minutes to complete. Knowledge Units will be issued quarterly, and their content will be based on material previously developed for the Diving Supervisor CPD App. Please feel free to speak to any of the IMCA staff here. We would welcome your thoughts.

Keep an eye out on the IMCA website for further information.

Additionally

Following further requests from our members, the Association is also planning to develop a CPD App for IMCA LSTs, probably in 2023.



Expansion of the CPD App Approach?



- The Marine Division was quick to recognise the success and the usefulness of the IMCA CPD App approach.
 - **In conjunction with the Nautical Institute, the Marine Division has recently launched a DPO CPD App.**
- Other parts of IMCA may also benefit from adopting this flexible, enjoyable, and effective approach to the delivery of CPD for key personnel:
 - Marine Division – eCMID Accredited Vessel Inspectors (AVI)?
 - ROV Division – pilots and supervisors?
 - Others?





IMCA Certificate Verification Portal



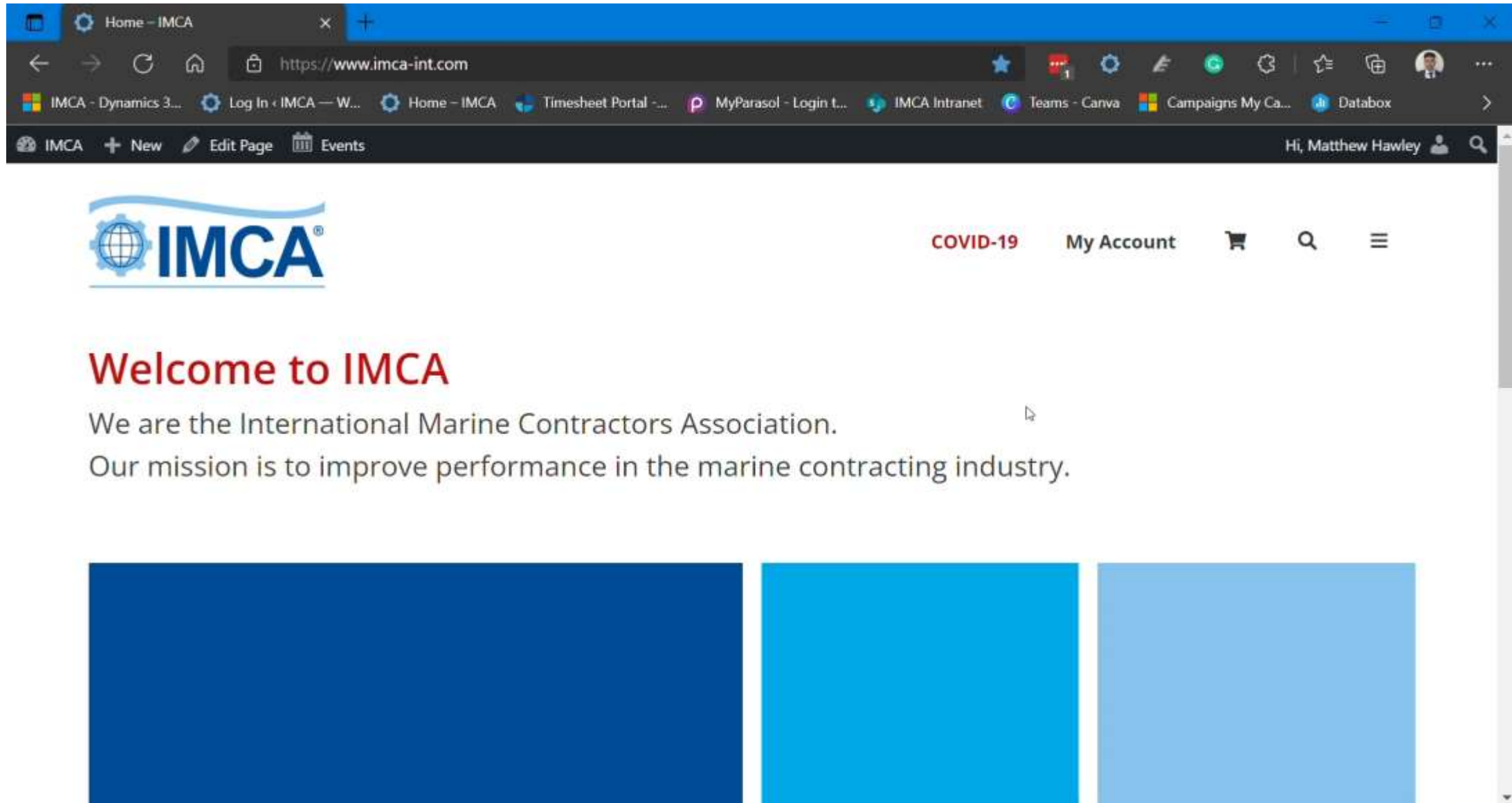
IMCA Certificate Verification Portal



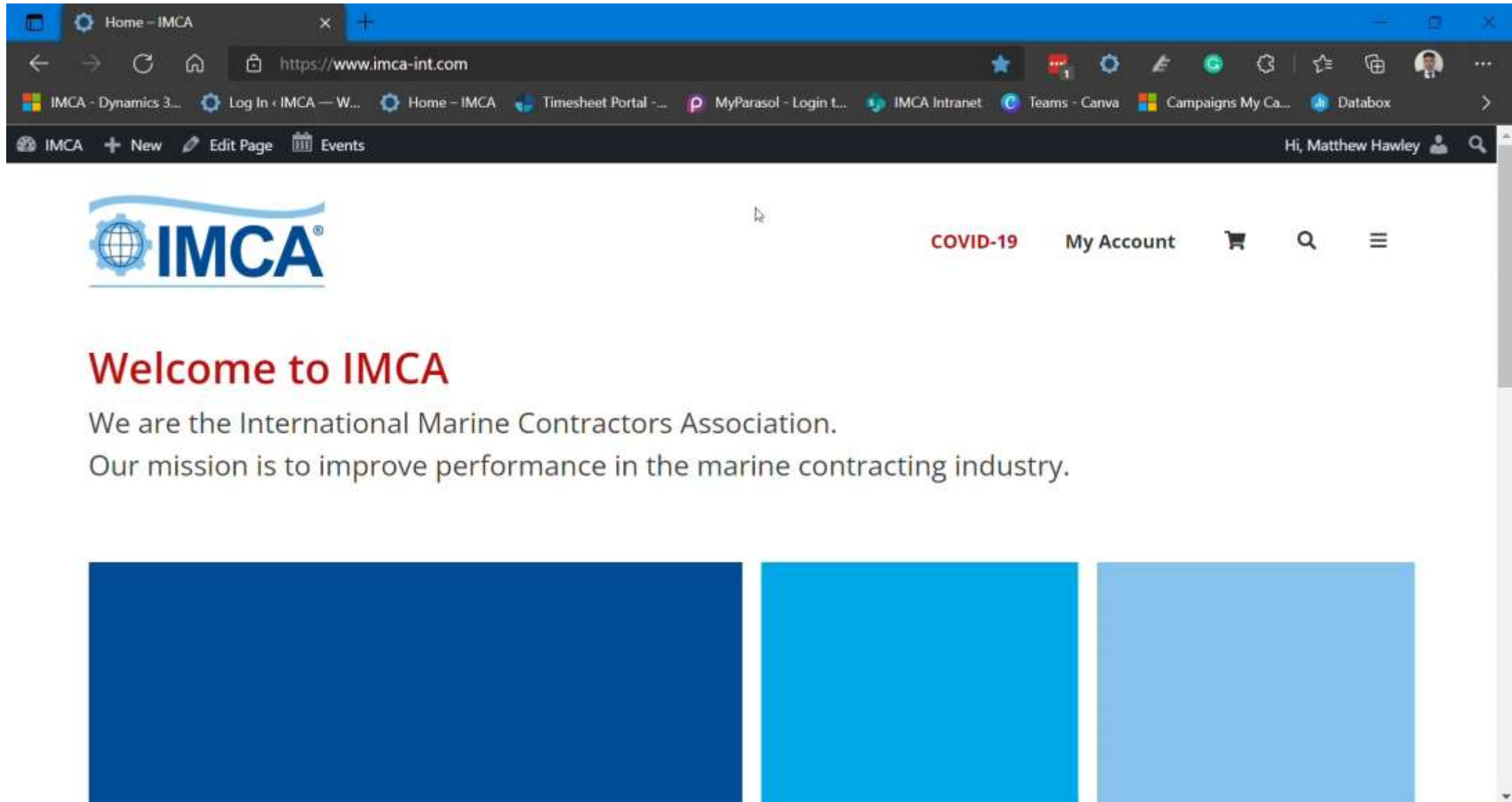
- IMCA has now developed a certificate verification portal for all IMCA diving supervisor and LST certificates issued by the Association. The system was launched in August.
- All IMCA Supervisor and LST Certificates can now be verified through the Certification Verification Portal
- It will also allow you or your clients to verify the status of supervisory personnel
 - **“In Date”** or **“Out of Date”**
- The process is very simple ...



Verification clip – In date example

A screenshot of a web browser displaying the IMCA website. The browser's address bar shows "https://www.imca-int.com". The website header includes the IMCA logo on the left and navigation links for "COVID-19", "My Account", a shopping cart icon, a search icon, and a menu icon on the right. Below the header, the main content area features the heading "Welcome to IMCA" in red, followed by the text "We are the International Marine Contractors Association. Our mission is to improve performance in the marine contracting industry." At the bottom of the page, there are three large, solid-colored rectangular blocks: a dark blue block on the left, a medium blue block in the center, and a light blue block on the right.

Verification clip – out of date example

A screenshot of a web browser displaying the IMCA website. The browser's address bar shows "https://www.imca-int.com". The page features the IMCA logo in the top left, a navigation menu with "COVID-19" in red, "My Account", a shopping cart icon, a search icon, and a hamburger menu icon. Below the navigation, a large red heading reads "Welcome to IMCA", followed by the text "We are the International Marine Contractors Association. Our mission is to improve performance in the marine contracting industry." At the bottom of the page, there are three large, empty rectangular boxes in shades of blue.

Verification Portal



- **Please make all your personnel departments aware of the new feature.**

Where next?

IMCA is now looking to expand the Verification Portal to include the following:

- IMCA Diver Medic Certificates
- IMCA Trainee Air Diving Supervisor Certificates (TADS)
- IMCA Trainee Bell Diving supervisor Certificates (TBDS)
- IMCA Assistance Life Support Technician (ALST)





Improving performance in the
marine contracting industry