

# Shipboard safety checklist for helicopter operations

The following checklist for helicopter operations provides a structure for the on board preparations for helicopter operations. The checklist should be reviewed and may be amended to reflect the characteristics and capability of individual ships for conducting helicopter operations.

Each item on the checklist should be positively confirmed before proceeding with the operation. If an individual item is not positively confirmed, the planned operation should only go ahead when a clarifying remark against that item states how the operation may safely proceed, be mitigated, or how the item could be otherwise addressed.

Parts 1 and 2 of the checklist should be used in preparation for all helicopter/ship operations.

Parts 3 to 6 of the checklist may be used to supplement Parts 1 and 2 of the checklist when appropriate to the specific operation or ship type.

The checklist should be completed by the Responsible Officer (RO) in advance of helicopter operations. A copy of the completed checklist should be retained in the ship's records for a period of three months.

Ship name: .....

Ship location: ..... Helicopter operator: .....

RO (print name): ..... RO (signature): .....

Date: ..... / ..... / .....



## Part 1 – General

Ref. number	Check	Status	Remarks
1.1	Deck crew briefed and ready to guide helicopter passengers.	<input type="checkbox"/> Yes	
1.2	Deck crew complete, correctly dressed (PPE and distinctive clothing) and in position.	<input type="checkbox"/> Yes	
1.3	Hook handler additionally equipped with strong rubber gloves and rubber soled footwear (static discharge).	<input type="checkbox"/> Yes	
1.4	Rescue party briefed and standing by.	<input type="checkbox"/> Yes	
1.5	Rescue boat prepared and ready for lowering.	<input type="checkbox"/> Yes	
1.6	All passengers clear of the operating area.	<input type="checkbox"/> Yes	
1.7	Access to and exit from the operating area clear.	<input type="checkbox"/> Yes	
1.8	The following equipment is ready for immediate use: <ul style="list-style-type: none"> <li>• Red emergency signalling lamp;</li> <li>• Large axe;</li> <li>• Crowbar;</li> <li>• Adjustable wrench;</li> <li>• Fire resistant blanket;</li> <li>• 60cm bolt/wire cutters;</li> <li>• Grab or salving hook;</li> <li>• Heavy duty hacksaw, complete with six spare blades;</li> <li>• Ladder;</li> <li>• Lifeline, 5mm diameter x 15m in length;</li> <li>• Side cutting pliers;</li> <li>• Set of assorted screwdrivers;</li> <li>• Harness cutting knife complete with sheath; and</li> <li>• First aid kit.</li> </ul>	<input type="checkbox"/> Yes	
1.9	Dedicated safe access markings to guide passengers near to helicopter operating areas.	<input type="checkbox"/> Yes	
1.10	Landing or winching area free of contaminants, including surface water.	<input type="checkbox"/> Yes	
1.11	Wide area sweep completed to remove/ secure loose objects or objects that could become dislodged by the helicopter's downdraught.	<input type="checkbox"/> Yes	
1.12	All aerials and standing or running rigging/ gear above and near to the operating area lowered or secured.	<input type="checkbox"/> Yes	



1.13	Pennant or windsock clearly visible to the helicopter pilot.	<input type="checkbox"/> Yes	
1.14	Firefighting systems/equipment: <ul style="list-style-type: none"> <li>• Pumps running with adequate pressure on deck;</li> <li>• Required fire hoses, monitors, portable foam equipment and dry powder extinguishers, ready for use, near to but clear of the operating area; and</li> <li>• Fire hoses and foam nozzles/monitors pointing away from the operating area (inadvertent discharge).</li> </ul>	<input type="checkbox"/> Yes	
1.15	The correct lighting (including required navigation lights) set.	<input type="checkbox"/> Yes	
1.16	Ship manoeuvring requirements understood and communicated.	<input type="checkbox"/> Yes	
1.17	Internal radio communications established by RO equipped with portable radio, headset and noise cancelling microphone.	<input type="checkbox"/> Yes	
1.18	External communications established with the helicopter operator/helicopter pilot.	<input type="checkbox"/> Yes	
1.19	Ship readiness confirmation by the Officer of the Watch (OOW).	<input type="checkbox"/> Yes	

## Part 2 – Pre-landing

Ref. number	Check	Status	Remarks
2.1	Deck crew briefed on landing arrangements.	<input type="checkbox"/> Yes	
2.2	All personnel warned to keep clear of rotors and exhausts.	<input type="checkbox"/> Yes	
2.3	Operating area free of heavy spray or seas on deck.	<input type="checkbox"/> Yes	
2.4	Side rails and, where necessary, awnings, stanchions and other obstructions have been lowered or removed.	<input type="checkbox"/> Yes	
2.5	Portable pipes removed, open lines blanked.	<input type="checkbox"/> Yes	
2.6	Rope messengers ready in case required for securing the helicopter. (Only the helicopter pilot may decide whether to secure the helicopter.)	<input type="checkbox"/> Yes	



### Part 3 – Additional for ship type – All tankers

Ref. number	Check	Status	Remarks
3.1	Ship with no inert gas (IG) – Pressure released from tanks at least 30 minutes before start of helicopter operations.	<input type="checkbox"/> Yes	
3.2	Ship with IG – Tank pressures maintained below relief valve settings.	<input type="checkbox"/> Yes	
3.3	All tank openings securely closed.	<input type="checkbox"/> Yes	
3.4	No venting planned or expected.	<input type="checkbox"/> Yes	

### Part 4 – Additional for ship type – Bulk carrier

Ref. number	Check	Status	Remarks
4.1	Surface ventilation to dry bulk cargoes stopped.	<input type="checkbox"/> Yes	
4.2	All vents and hatch openings closed and secured.	<input type="checkbox"/> Yes	

### Part 5 – Additional for ship type – Passenger ship

Ref. number	Check	Status	Remarks
5.1	Passenger spaces including cabins vacated near to operating area.	<input type="checkbox"/> Yes	
5.2	Removal of recreation facilities near to operating area (including emptying of swimming pool water).	<input type="checkbox"/> Yes	
5.3	Dressing lights or flags removed (additional obstructions).	<input type="checkbox"/> Yes	
5.4	Crowd control/management in place.	<input type="checkbox"/> Yes	
5.5	Appropriate deck and area lighting functional.	<input type="checkbox"/> Yes	
5.6	Medical department notified.	<input type="checkbox"/> Yes	
5.7	Public address announcements maintained.	<input type="checkbox"/> Yes	



**Part 6 – Additional for ship type – Offshore support**

Ref. number	Check	Status	Remarks
6.1	Cargo lashing security checked.	<input type="checkbox"/> Yes	
6.2	Lighting requirements addressed and functional.	<input type="checkbox"/> Yes	
6.3	No simultaneous operations.	<input type="checkbox"/> Yes	

