DIVIC SAFETY LINES



NAVSAFECOM EXPEDITIONARY AND SPECIAL WARFARE DIVING SAFETY NEWSLETTER

A Navy diver assigned to Commander Task Group 73.6/ Mobile Diving and Salvage Unit 1-5 (CTG 73.6/MDSU	Dive I
1-5) prepares to enter the bridge of Royal Thai Navy (RTN) corvette HTMS Sukhothai during a combined	
salvage mission between the U.S. Navy and RTN on Military Sealift Command fleet experimentation ship	Maste
MV Ocean Valor, Feb 22. (U.S. Navy photo)	Analy
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By CWO5 Eric "Jim" Nabors Diving Safety Division Head

The Naval Safety Command (NAVSAFECOM) hosted the first Diving Safety Assessment Conference (ADSAC) in February 2024. The conference was attended by 36 Echelon II through IV commands and discussed sanitized 2023 Diving Safety Assessment (DSA) results, changes to the DSA program, the addition of command self-assessment grading, trends and common discrepancies. Fleet feedback and recommendations were received and are detailed in ALSAFE 24-011 available on the Naval Safety Command website and Naval Safety Command application. If you were unable to attend, a recording of the 2024 ADSAC and the presentation slides are available on the diving page on the CAC-enabled website for your review.

This conference will be hosted annually by the NAVSAFECOM. All diving units are urged to have at least one representative attend either in person or virtually through Microsoft Teams to ensure your unit's concerns and feedback are heard and any questions can be answered. If your unit has questions about

an upcoming DSA, don't wait for the next ADSAC, reach out to the Diving Division at SAFE-DIVESALVAGE@NAVY.MIL and we will provide help and answers.

I also wanted to touch on required Operational Risk Management (ORM) training. OPNAVINST 3500.39D has specific training requirements:

Supervisors: Supervisor is broadly categorized as anyone who oversees and is responsible for the actions of others. This description applies to all qualified Diving Supervisors, and all E-6s and above. The training requirement is completing "Managing Your Team's Risk" on Navy e-Learning upon initial assignment of supervisory responsibilities and every 36 months while assigned at a command.

ORM Assistant: ORM assistant qualification is earned by completing the ORM Application and Integration Course, Aviation Safety Officer Course, Aviation Safety Command Course, Surface Warfare Officer School, Afloat Safety

Officer Course or the Submarine Officer Advanced Course. The majority of Navy Divers will only have access to the ORM Application and Integration Course. This course only has to be completed one time. However, ORM assistants are required to complete the Leading Risk Management Integration Navy e-Learning course at each unit when they are assigned the duties of an ORM Assistant.

Stay safe, and we look forward to seeing you at your next Diving Safety Assessment.

Your Diving Safety Division Analyst

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Yearly Wrap-Up and other Diving News

By NDCM Russ Ciardiello

Whenever we start a new year, I like to take an overall look at the last year and compare it to previous years. I'm extremely happy to say you all are continuing to do great things out there across the entire community. You're still doing more with less and keeping each other healthy and safe. The stressors of changing how we pick (or get) orders, how we advance and whether a major command is disbanding can adversely affect a person's day-to-day mindset. From the start of the planning phase through the predives, the brief, the execution of the dive and the post-dives, these distractions can cause a misstep along the way. But you're not allowing that to happen.

Before we get into the charts, the quick take away is that once again, the highest class of incident reported was a 'C' (pause to allow the believers to knock on something). In comparison to the previous four years, calendar year (CY) 2023 had a significant decrease in the number of incidents reported. CY 2023 had 15 reported incidents in comparison to the previous four-years' average of 26.5 incidents reported. Some might say that's because we conducted fewer dives in CY 2023 (73,276) compared to the average of the previous four years (81,865), lessening the chances of an incident. However, if you look at the percentages, there was a 43% decrease in the number of incident reports as compared to an 11% decrease in dives.

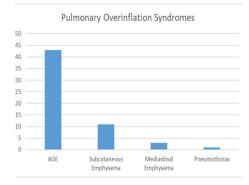
This data shows a great, consistent safety record for the diving community over many years. I would like to thank all the commands that submitted reports that may have seemed minor in nature and more of an administrative burden at the time. Going forward, the community needs to continue fostering a culture of reporting unique hazards and "telling on ourselves." These seemingly unimportant events provide more" teachable moments" to a broader audience than some Class A-D mishaps. When someone falls

from 15 stories trying to jump from balcony to balcony, most of us will get nothing from that because most of us would never allow ourselves or anyone around us to get into that situation. Now, if a person falls a couple of feet because the ladder was on slightly uneven ground most of us are likely to say, been there, done that. Each of the 73,276 dives completed in CY 2023 were high-risk evolutions and each posed numerous situations where an unplanned hazard could have presented itself. When a command reports these incidents, they are training the entire community and making it safer. These reports should be appreciated, not frowned upon, armchair quarterbacked or met with pointed fingers. Speaking of what may seem as a minor incident: A couple of weeks ago I had the pleasure of meeting the star of one of the reports. He was the diver serving as topside support who fell in the water during a dive. I believe most of the command said they learned something that day. I only wish I had asked if it was his birthday.

The seven charts on the next page represent the incidents reported in CY 2023 and the comparison of the previous four years.

Pulmonary Overinflation Syndromes

Here is a quick study of Pulmonary Overinflation Syndromes (POIS) reported over the last 11 years.



- -17% of all on-duty diving incidents reported resulted in a diver suffering from a POIS.
- Of 340 incidents reported, 58 total POIS (CY 2012-2022)

- Arterial Gas Embolism (AGE) accounted for 74% of all POIS reported.

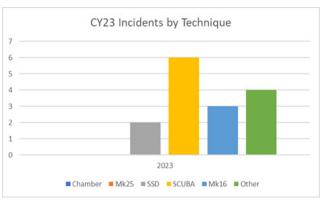
A diver experiencing any POIS is of great concern. An embolism is obviously the highest concern because obstruction of the arteries in the brain or heart can lead to death if not promptly relieved. In AGE incidents where the diver's ascent was reported as normal, the likely cause of an embolism would have been due to an interruption of breathing during ascent, however small it may have been. Any interruption in breathing during a normal ascent increases the chance for an embolism to occur but this is magnified at shallower depths.

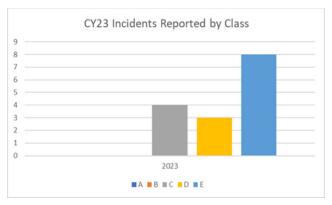
Ascending divers should be especially focused on their ascent rate and exhalation during the final 10 feet of their ascent. The volume change of all gases associated with the dive (lungs, buoyancy compensator, dry suit, etc.) is at its greatest ratio at this point in the water column and a controlled ascent can quickly become "uncontrolled."

Personally, I've also seen how important it is to be focused on your ascent while on a stage. During a stage dive I was supervising on a junk boat in Saipan, the diver essentially reached surface three times due to the sea state. That diver could have easily suffered a POIS during the last bit of his ascent but because we identified it as a hazard, briefed it and most importantly, he was aware of where he was, there was no incident. I have the highest quality video that was possible at that time, meaning if you squint and tilt your head you might be able to make it out. Cut me some slack, it was 15 years ago.



Yearly Wrap-Up and other Diving News (cont.)







35

30

25

20

10

2019

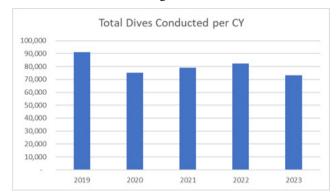
2020

Total Incidents Reported per CY

2022

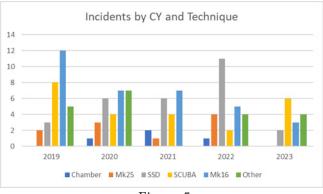
2023

Figure 2



2021 Figure 3

Figure 4



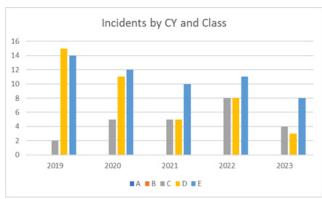
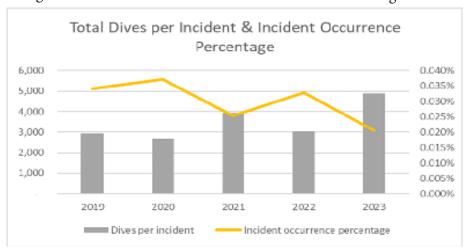


Figure 5

Figure 6



The Coastie Corner

By DVC Adam Harris

Understanding and Preventing Shallow Water Blackout

In the high-stakes world of military diving, safety is of utmost importance. Among the various risks divers face, shallow water blackout (SWB) is a particularly dangerous threat. This condition is characterized by a sudden loss of consciousness underwater due to a lack of oxygen and has tragically resulted in the deaths of experienced divers around the world. It is essential for every military diver to understand the precursors, prevention strategies and proper treatment of SWB to prevent accidents and ensure their safety.

A SWB typically occurs when a diver holds their breath for an extended period, depleting oxygen levels in the bloodstream to critical levels. While seemingly innocuous, certain activities can predispose divers to this dangerous condition. Intense physical exertion, repetitive breath-holding drills and hyperventilation before submersion all increase the risk of SWB. Additionally, environmental factors such as cold water and strong currents can exacerbate the likelihood of an incident.

Preventing SWB requires education and discipline. Military divers need to be fully aware of the risks of breath-holding and the importance of proper breathing techniques.

Training programs should highlight the dangers of hyperventilation and emphasize the need for gradual ascent to prevent sudden changes in pressure. Implementing strict guidelines for buddy diving and continuous monitoring during underwater operations can provide an additional layer of safety. Regular physical conditioning tailored to enhance lung capacity and breath-holding endurance is also crucial in reducing the risk of SWB.



Warning Shallow water

In the event of a SWB, swift and decisive action can mean the difference between life and death. Immediate retrieval of the unconscious diver to the surface is paramount, followed by the initiation of rescue breathing and cardiopulmonary resuscitation if necessary. Military divers must be proficient in administering emergency oxygen therapy. The diver should be closely monitored for signs of recovery or deterioration. Prompt evacuation to a medical facility equipped to handle diving-related emergencies is imperative for further evaluation and treatment.

SWB continues to pose a significant risk to the safety and health of military divers across the globe. By recognizing the warning signs, adopting preventative measures and mastering the right treatment methods, we can greatly minimize the likelihood of this life-threatening condition. It is our responsibility to take the necessary steps to ensure the well-being of our fellow divers.



U.S. East-Coast based Naval Special Warfare Operators (SEALs), 10th Special Forces Group (Airborne) Green Berets, and Norwegian Naval Special Operations Commandos conduct diving operations to strengthen interoperability and refine skills in the Arctic region near Kodiak, Alaska Feb. 23, 2024, during Arctic Edge 2024. AE24 is an annual defense exercise for the U.S. Northern Command emphasizing Joint Force operations in an extreme cold weather and high latitude environment and is designed to demonstrate Globally Integrated Layered Defense in the Arctic. (U.S. Army photo by Spc. Preston Mothersole)

DIVING SAFETY LINES

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Intense physical exertion, repetitive breath-holding drills and hyperventilation before submersion all increase the risk of SWB.

DSA Scheduler's Corner

By NDC Alan Dewitt

Deep Sea,

Welcome to the Spring 2024 edition of the Diving Safety Lines! Scheduling for Fiscal Year (FY) 24 has been going well and the calendar is getting filled up for the rest of this FY. If your command or one you are tracking needs a Diving Safety Assessment (DSA) this year, please email me as soon as possible to get on my schedule to allow time for me to secure funding. We need as much notice as possible due to issues with Navy funding this year. Even if you do not have an exact date, please reach out to me so I can secure funding for your DSA and your command is on my radar. Recently we have had quite a few commands come off the "Diving Operational Readiness Inspections (DORI)

only" list and we had not planned for that in our initial budget. When sending your email request, please remember to attach the most recent DORI results letter for your command in the initial email requesting a DSA because we are still running into issues with periodicity. Also ensure that when sending the attachment, it is the DORI results letter and not the DORI arrival letter. The DSA window is between 15 and 21 months after the completion of the command's last DORI or equivalent Immediate Superior in Command inspection. Once your command is past the 21-month mark from the last DORI, a DSA is no longer an option, and a DORI must be conducted as soon as possible. This training is the reason it is very important

the DORI results letter so we can make sure everything meets the OPNAVINST 3150.27D requirements. Remember, it is never too early to plan ahead and reach out to get penciled into our travel schedule. Looking forward to seeing you all out there. Feel free to reach out to me with any questions, comments or concerns. Hooyah Deep Sea KDSA



Doc's Corner

By HMCM Andrew Taylor

Greetings, Deep Sea family! I hope everyone has had a great start to the year and is enjoying the arrival of spring. It's already beginning to warm up and become pleasant again here in Virginia! With that said, we've launched into the new year with full force, conducting two Coast Guard DORIs and several DSAs. We just completed our annual DSA checklist review which will be uploaded to our website in the near future, so please check out those changes. These changes include updates to the form and flow, resulting in a better user experience for both assessors and assessees. The Medical checklist has undergone significant revisions so please check it out!

Recently, we hosted a Diving Safety Assessment Conference where we provided updates to our policies and procedures and fielded multiple questions and recommendations. One of the topics covered was repeat discrepancies, and unfortunately, Medical emerged as the top concern once again. The most common discrepancies we encounter involve overdue Diving Medical Exams, Periodic Health

Assessments (PHA), annual skin cancer screenings and expired medicines, medical consumables and equipment. The requirement for annual PHAs and skin cancer screenings has been in place for quite some time. The requirements are part of Individual Medical Readiness (IMR), with the key word being "individual." It is the responsibility of each of us to take ownership of our personal requirements and plan accordingly to complete them in a timely manner.

In the very near future, the Dive Medical Technician (DMT) and DMT/Independent Duty Corpsman (IDC) community will be conducting a working group and Navy Enlisted Code (NEC)/billet review. This review entails a comprehensive analysis of our fleet-wide manning utilization, with a particular focus on billet paygrade and priority. Key stakeholders from NEC-supported TYCOMs, BUMED, CENEODDIVE, BUPERS, USFFC and NAVMAC, as well as subject matter experts from throughout the diving fleet will be

represented. The Dive Medical Technician NEC has been critically undermanned. Our goal is to optimize our structure to enhance readiness and safety across all supported communities.

Additionally, I'd like to appeal for help in recruiting. If you encounter proficient Hospital Corpsmen (HM), please direct them to your local DMT representation. During the working group mentioned above, we will also discuss incentives, schools and certifications, so stay tuned for updates on that front. Furthermore, it's worth noting that eight DMTs have graduated from IDC school not only as IDCs but also with a bachelor's degree from the Uniformed Services University. This accomplishment presents a tremendous opportunity to leverage and serves as a significant selling point.

I continue to be impressed by the professionalism and dedication observed from those I encounter on the deckplates! Please keep up the good work and stay safe out there!

How to Properly Complete a Mishap Investigation (Part 2)

By NDC Andrew Homan

Welcome back to Part Two of "How to properly complete a mishap investigation." I want to start by saying the previous article combined with this edition's information is for reference purposes. These combined articles are intended to be used in the event a unit experiences an unfortunate event. Areas or sections covered in this edition correlate to the sections found within Risk Management Information (RMI) and are identified in Bold. In the last edition, you learned how to successfully autolink the dive log to a RMI - Streamlined Incident Reporting (SIR) event, which is one of the biggest hurdles in this process. I have seen more events in recent times that this was done correctly and would like to thank and congratulate those who did. This edition will take a deeper look into the processes, responsibilities and pitfalls of specific sections hindering the correct completion of a report before finalization and submission for quality control (QC).

In determining who will fill out the report, it is essential to consider factors such as who has the most comprehensive understanding of the incident, relevant protocols and any associated safety concerns. Both the dive unit and the command safety representative should collaborate to ensure all pertinent information is included accurately. Ultimately, the responsible party should be designated based on their expertise and ability to provide a thorough and objective account of the incident.

To begin, access the RMI homepage. Using the search bar at the top, enter the Event ID number that was either generated after linking the dive log to a mishap or provided by the command safety representative to link the log. After entering the Event ID, the drop-down menu will activate, and you should locate the option labeled "Search Investigation." This menu will enable you to navigate to a specific investigation. Select the Update Event Investigation tab to begin or finish the report. Completing the

entire report in one day may not be possible depending on the complexity of the event.

Some information, such as equipment failure status, toxicology or final diagnosis, might not yet be available or released. It is important to prioritize accuracy and thoroughness over speed when compiling these reports. Also, keeping everyone, including Naval Safety Command (NAVSAFECOM), informed of delays in meeting the 30-day reporting requirement is equally important.

Whether it is the first time accessing the report, or you are returning to add information, it will default to the first section (Event Investigation/ Event Information). As you progress through the report, enter all required information in each of the sections located on the navigation panel on the left side. You can use this panel to jump to a section in the event you are returning to. All fields marked with * in these sections are mandatory and cannot be ignored. NOTE: Remember to always "Update Event Investigation" or "Save" at the end of each page throughout the report. Event Information: Category, Sub-Category Tier 1 and Mishap Class are the sections often misinterpreted and incorrect. For the Category section, select Afloat for all diving mishaps and select Industrial and Occupational for Sub-Category Tier 1 section per DoDI 6055.07. Mishap Class can be determined by referring to the Current Mishap Definitions located on the website (https:// navalsafetycommand.navy.mil/) under the Resources Tab. Classification is a significant issue to address, even if the monetary threshold has not been met. Pay close attention to Mishap Class C which states "Nonfatal injury resulting in loss of time from work beyond day/shift when injury occurred." This classification will come up again later in the article. MANMED P-117, Article 15-102, Section (n) Decompression Sickness (DCS)/ Arterial Gas Embolism (AGE), Subsection 2(b) specifies that "designated divers with history of DCS Type II or AGE whose symptoms resolve

or who remain asymptomatic after the initial hyperbaric treatment may be cleared after 30 days to return to diving duty by a UMO (Undersea Medical Officer) without a waiver, provided there is a brain +/- spine MRI within seven days of the event and the MRI results are normal/unchanged." If the treatment or followon process required for a diver to return to full diving duty extends beyond a single day/shift, it is considered a Class C mishap.

Risk Management (RM). This section is often overlooked and there are instances where it is not filled out correctly. There is a brief before any operation for every dive which by definition is deliberate risk management. Examples include quality assurance, safety briefs and safety checks. To document this correctly, first select Deliberate or Real-Time/Time-Critical Risk Management processes were "Conducted prior to the event." Then Add New Risk Management Type. This function will open a new window where you can select the type (i.e., Deliberate, Real-Time/Time Critical or In-Depth Risk Management) along with any areas found to be deficient, if any. Select Save when RM type is complete and Done with Risk Management (RM) to move on to Objects.

Objects. Every event is required to have an object associated with an SIR. If the dive log was properly autolinked, the Dive Apparatus (Object) should be there already. Include all relative objects found to be causal or supportive to the event at this point. (Example: AGE resulting from an uncontrolled ascent while self-contained underwater breathing apparatus diving. Use of a recompression chamber should definitely be included, especially if mentioned in the narrative as a course of treatment. This additional information can provide comprehensive documentation for future analysis.)

Persons. When you get to this section, make sure whoever is filling this out completes it in its entirety. Caution: This section includes more

How to Properly Complete a Mishap Investigation

(Part 2) continued

than one page requiring information on each additional page. After the information on each individual page is complete, select save. Be prepared to know information regarding the mishap victim and any other individuals identified within the report. This may include, but is not limited to, DoD ID number, age, gender, shop/code, 1st line supervisor, injury type, injury severity and provider information. IMPORTANT: When assigning Injury Severity, accurately account and document for days affecting work. This will factor into the algorithm that provides the Event Cost with Injuries. If there is no cost associated with the report, whether related to equipment or personnel, this is grounds for rejection and correction is required. This section ties directly into the earlier statement regarding Mishap Class. These various factors of severity, days affecting work and mishap classification align to ensure consistency and accuracy in the evaluation process.

Narrative. We continue seeing and rejecting reports due to missing or incomplete narratives. The Sequence of Events section is the only place in the report with no character limit restrictions. Be as detailed as possible to paint the picture and tell the story to provide the most accurate depiction of the event. This will provide anyone reading the report a clear understanding of all factors and conclusions. Remember not to provide any personally identifiable information (PII) in this section.

Documents Review. This section is not required but provides the opportunity to add/upload supporting documentation as it relates to the investigation. Documents to consider include operating instructions (OI), AFIs, TOs, work packages, directives, approach and landing charts, and other forms as applicable. To add a document to the list, select the "Add Document Reviewed" link. If a document is significant to the investigation, consider uploading it as an

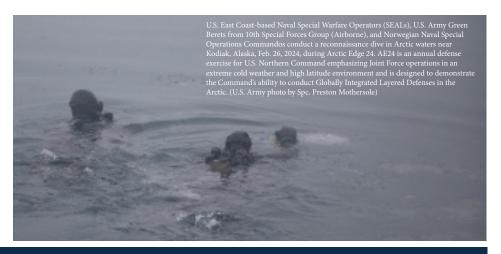
exhibit.

Factors. When considering factors relevant to an event, it is important to look beyond the immediate Investigative Area Checklist and assess additional factors. Physiological factors could include exhaustion, health, stress or physical capabilities. Environmental factors to consider are weather, lighting, turbidity or temperature. Mechanical factors deal specifically with the equipment used in support of the event. Human factors relate to communication, qualifications, training or cultural deficiencies. Consideration of these types of factors can provide a more comprehensive understanding of the event and help to identify potential areas for improvement or mitigation in the future.

Recommendations. Here the investigator can identify and document hazard(s) that played a role in the mishap sequence and provide possible mitigation processes. Hazards are defined as any real or potential condition that can cause injury or occupational illness to personnel, damage to or loss of a system, equipment or property, or damage to the environment. Recommendations should be a short, concise statement of the hazard and will associate to a specific factor. When the investigator has completed the report, they will see the final report as a "DRAFT". The draft report is a chance to review all information provided in the previous sections ensuring the information is accurate and complete without

providing any PII. Select the "Done with Preview" option at the bottom right of the screen to proceed and create a final message. This selection will audit the report for errors or sections requiring attention. Click on the associated sections for clarification to identify requirements to correct. Readdress and complete each associated section until all sections result in [0 ISSUES, 0 WARNINGS] and continue with selecting "Done with Validation" at the bottom. This selection must be completed before the report is able to be finalized and is available to submit for release or QC Evaluation before it is published.

I know the previous edition, coupled with the information provided in this article, is a substantial amount of material to process. However, having a thorough understanding of these processes is crucial for effectively investigating mishaps and identifying causes. Effective communication is paramount in minimizing rejections and delays for final release. Collaboration between units, safety representatives and QC ensures all stakeholders' interest align, risks are identified and mitigated early, and processes are streamlined for smoother operations. Use this knowledge to foster an environment of open communication, transparency and mutual understanding. Share this information with your organization to enhance efficiency, reduce errors and ultimately improve overall safety and quality standards.



Naval Safety Command Local Area Assessments (LAAs)

By EODC Jeremey Marco

Hooyah Deep Sea and EOD brethren! I'm EODC Jeremey Marco and I've been a part of the Navy Safety Command (NAVSAFECOM) since May of 2022. I wanted to take the opportunity to provide some insight into a new function that is being exercised in the **Expeditionary and Special Warfare communities** called the Local Area Assessment (LAA). As the name implies, an LAA is an assessment vice an inspection, which gauges whether a command is both Safe to Operate and Operating Safely.

What is an LAA?

LAAs are part of the NAVSAFECOM threetier assessment model to assess command behaviors from Echelon II/III down to Echelon IV and V. LAAs are the third tier, which send multidisciplinary teams to assess the day-to-day unit level standards for safety compliance for Echelon IV and V commands. We try to link NAVSAFECOM community SMEs with their respective community during LAA assessments, so you will get a SEAL, EOD, SWCC or SEABEE community member onboard if you have a scheduled LAA. A command is assessed based off the behaviors of self-awareness, selfassessment, self-correction and continuous learning. What this looks like will vary from unit to unit as well as the specific type of training. However, it generally involves a look at the

command's PBED process, which is the ability to plan, brief, execute and debrief training. A gunshoot for example will involve NAVSAFECOM members being present to observe (or ask about) the operational planning that went into preparing for the gun-shoot, the safety brief, the gun-shoot itself and debriefs at the conclusion. The report goes directly to the Echelon II with copies of the report sent to all assessed units.

How do I know when an LAA is going to assess my command?

NAVSAFECOM sends out an All-Hands Safety Message (ALSAFE) via message traffic. The ALSAFE is the formal notice that NAVSAFECOM will be conducting an LAA within a specific geographic area. It is region, not command specific. If NAVSAFECOM's Expeditionary and Special Warfare Safety Directorate is going out on one of these LAAs, we will contact your command before-hand to identify what types of training you have scheduled during the specific dates. However, these LAAs are not intended to disrupt command operations. We will provide an on-site explanation of what this will look like for an Expeditionary or Special Warfare command, as well as work with the command to ensure we are not disrupting day-to-day functions.

How can the LAA be leveraged to get my ISIC to fix my billeting/manning, equipment or facility problems?

When the Expeditionary and Special Warfare Safety Directorate conducts an LAA, care is taken to assess a command's fit/fill, safety compliance of facilities, as well as whether the command is adequately equipped (safe to operate) with the necessary equipment to perform its mission. Any findings that demonstrate the command is operating with reduced resources or that it is not adequately manned, trained or equipped by its ISIC will be sent directly to the Echelon II commander. This assessment provides a spotlight on the issue for awareness and possible action by your community's leadership.

FNDFX

I look forward to participating in more of these assessments as well as Diving Safety Assessments and Navy Airborne Operations Program (NAOP) assessments to better the Expeditionary and Special Warfare communities and contribute to the mission of NAVSAFECOM. Remember, the NAVSAFECOM is a resource for the entire Expeditionary and Special Warfare community. We are here to assist in any way possible to ensure safe operations. For additional assistance or information, my email contact information is Jeremey.r.marco.mil@us.navy.mil.



Diving Safety Program Specialist Corner

By Brett Husbeck

Greetings my fellow Deep Sea brothers and sisters. For those of you that don't know me, I'm Brett Husbeck a retired Navy diver. I am writing to let everybody know about my new position at Naval Safety Command (NAVSAFECOM). I was hired as the Diving Safety Program Specialist. I'm very excited to continue working with the Navy, Marine Corps and Coast Guard diving program. I'll still be completing Diving Safety Assessments (DSA) and Coast Guard Diving Operational Readiness Inspections (DORI), as well as other duties assigned for my position. The big difference now is the command will have continuity within our department. Every three years or so, we have a big turnover with personnel. Statistically, that's when the Diving Assessments change. Hopefully, everything will stay status quo and there won't be any major changes in the way we complete our assessments, only updates or technical changes that happen in Navy diving.

If anybody has any questions or concerns with RMI/DJRS, scheduling, technical safety or general questions about the Diving Safety Assessment, I will be available to answer them. Look at it like this, I'll be your trusted agent.

I want to talk about our checklist update. We are almost finished with updating all the Naval Safety Command checklists used for DSAs. We have changed some things around, took some questions out and added questions in order to make checklists flow more efficiently. If you have the checklists saved on a file or desktop computer, delete them. We don't want to show up and have you using an outdated copy. The checklists can be found on the CAC-enabled website. To start, you must have access to the Naval Safety Command "secure side." If you don't, here is how you get access, it's pretty easy. If you're on the non-secure Naval Safety Command website, click on contact us at the top of the page, then about halfway down you

will see Safety Assessments. Click on the https://intelshare.intelink.gov/sites/nsc link or copy and paste the link into your browser. Access to this site requires a common access card (CAC) and a one-time account registration. Once you are on Intelink, you will need to give a reason why you need access. After a couple of hours, you should have access to the secure side. If not already on the Diving page, go to the top and click on Topics and then go down and click on Diving. Now you have everything you need. Save it to your favorites.

The other place the checklists can be found is the Naval Safety Command App. Go to the App store and search "Naval Safety Command" to get the App. Once on the App, in the upper left hand you'll have 3 little bars. Tap the bars and look for "Expeditionary." Once in Expeditionary, tap "Dive" and now you'll have checklists, Diving Safety Lines and Diving safety stand down information. If you have any questions feel free to reach out. HOOYAH and dive safe.



Brett Husbeck

CURRENT CHECKLISTS FOUND ON THE WEBSITE AND PHONE APPLICATION

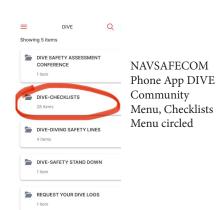
5AD Administration Checklist 5AG MOD 0/1 UBA Checklist 5AS Air Systems and Stowage Checklist 5DB Diving Boat Checklist **5ET Escape Training Tank** 5HE Divers Handling Equipment Checklist 5LU MK 25 MOD 2 UBA Checklist 5MU MK16 UBA Checklist 5RC Recompression Chamber Checklist 5SC Scuba Checklist **5TR Training Checklist 5UT Underwater Tools Checklist** 5UW Underwater Cutting/Welding Checklist CGW USCG Cutting/Welding Checklist Compressor (CP) Checklist **Diving Assessment Cover Sheet DP2 Checklist** HAZMAT (HAZ) Checklist KM37 MOD 0UBA (KM) Checklist Operational Risk Management (ORM) Checklist SS KM 97 UBA Checklist Submarine Checklist W20 USCG MK 20 Checklist WAD USCG Administration Checklist

WAS USCG Air Systems and Stowage Checklist

WDP USCG DP Checklist

WMD USCG Medical Checklist

WSC USCG Scuba Checklist



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Naval Safety Command, located on Naval Station Norfolk, Virginia, provides resources and guidance to develop a Navy safety culture in which everyone is trained and motivated to manage risk and ensure the combat readiness of our forces and the Navy's global warfighting capabilities.

We provide policy, doctrine and guidance, safety surveys and assessment visits, training and education, multimedia products, marketing and outreach campaigns, and recognition and awards programs.

Our products, current and archived, can be found at https://www.navalsafetycommand.navy.mil.



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The editorial staff is always looking for contributing writers. We want to publish your articles and stories that increase operational readiness, evaluate safety and health issues, correct deficiencies, and emphasize situational awareness.



Feedback or ideas for the next DIVING Safety newsletter issue?



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