

Director To You



from John Lippmann
OAM

Making Diving Safer - A Shared Responsibility

Some years ago, when DAN Asia-Pacific was in the process of reviewing its insurance policies, we did some long, hard thinking about whether we should, and, if so, how we could use our insurance policies to encourage safer diving practice.

Until that time, divers would pretty much be covered for a dive accident, no matter what they did, and how reckless they had been. We would also offer cover to almost any diver who applied, with no questions asked. We made no enquiries whatsoever about whether or not they had any health conditions that might put them at a higher risk of a diving accident.

Given DAN's mission to promote diving safety, this seemed to be somewhat illogical and, together with our insurance providers, we decided to implement some steps that we hoped would promote safer diving practice.

The process was not primarily implemented with the expectation of reducing insurance claims. It was hoped it would enable us to provide some guidance to divers with certain medical conditions who may not be under the overview of a diving physician. We also believed that it might encourage divers to think carefully before they undertook certain potentially higher risk diving practices and possibly to take some responsibility themselves if they decided to do so.

We firstly introduced a requirement for applicants to declare any pre-existing medical conditions, previous

decompression illness (DCI) events, and medical conditions that might pre-dispose them to an increased risk of DCI. This has 'created a monster' for some of our staff in that it can significantly increase the time, effort and expense of processing a membership.

Despite this, we have persisted with this requirement as we are convinced that it often provides a very meaningful source of feedback to potential members, encouraging them to consider the possible interactions between their condition and diving, and things that they may do to potentially reduce this interaction.

In most countries, the vast majority of these divers have never seen a diving physician and are often totally unaware of any risks associated with their condition. Dive fatality reports increasingly include deaths associated with existing health conditions, especially cardiac conditions, of which the victim may, or may not, have been aware.

We also introduced depth restrictions on our insurance plans. This was done in an attempt to make divers think about the increasing risk of a dive accident with increasing dive depth.

The Master Plan has a limit of 50m and equates to what is commonly considered the maximum depth for air diving (although, in reality, we know that 50m is beyond the safe diving depth for most recreational divers).

The Preferred Plan is designed to provide coverage for a 'technical' diver who has the required training and experience to dive beyond 50m, as long as they are doing so using appropriate equipment and breathing gas. This limitation was introduced to

encourage divers to think carefully and be appropriately prepared before they undertake very deep dives. We have had some cases where an insured diver has been required to pay some or all of their treatment costs for diving beyond 50m having not met the requirements for a dive beyond this depth. (In the event of a claim, the appropriateness of a particular dive is assessed by suitable experts).

Some divers ignore fairly obvious symptoms so that they can continue to dive. This often compounds the symptoms so that more treatment is needed. It is possible that a diver could be obliged to pay a portion of their treatment costs if they have continued to dive when they should have reasonably known that they were putting themselves at an increased risk of injury.

DAN provides diving emergency hotlines available 24 hours a day, 7 days a week. We try to teach divers that any sign or symptoms arising within 24-48 hours of diving should be assumed to be diving-related and the diver should promptly be placed on oxygen and one of our hotlines called for advice as soon as possible.

The reason for this is to minimise the chance of mismanagement of the injury and maximise the effectiveness of first aid and subsequent treatment.

Please read the DAN AP website and your member logbook to familiarise yourself with your policy and the procedures to follow in the unlikely event of a dive accident.

DAN is here to make diving safer for you and your buddies.

Safe diving,