

QHSE MANAGEMENT SYSTEM

SAIFCO

MASTER DOCUMENT



Electromechanical Works (LLC)

Document Name:

**Accident & Incident Reporting
and Investigation Procedure**

QHSE Ref. No.

IMS/QHSE/AIRI/09 Rev.01

Date:

6th of June 2019

**ACCIDENT & INCIDENT REPORTING AND
INVESTIGATION PROCEDURE**

Rev	Date	Revision Record	Updated by	Reviewed by	Approved by
00	07/07/10	1 st Issue			
01	06/06/19	Updated procedure as per the new version of the standards ISO 9001:2015, ISO 14001:2015 & ISO 45001:2018	3 rd Party	RM	NY



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1.0 PURPOSE

The purpose of this Procedure is to ensure that a system is in place for reporting, investigating and taking appropriate actions for substandard conditions, substandard practices and accidents as well as environmental incidents.

This procedure promotes a no blame culture and implements self-assessment to develop continuous improvement.

2.0 SCOPE

This procedure applies to all activities and operations throughout the SAIFCO organization and to all areas controlled and/or contracted by/to SAIFCO. It applies to all personnel working directly for SAIFCO, contractors, sub-contractors, visitors, and all third parties on all SAIFCO's business.

3.0 DEFINITIONS

None

4.0 RESPONSIBILITY

All Personnel

All personnel must give details of known facts, actions, and circumstances to appropriate SAIFCO approved authorities and personnel as required and cooperate fully with any incident investigations.

Everyone should contribute to incident investigations openly, honestly, and without fear of retribution, or blame. This will be supported and encouraged through SAIFCO's no blame culture.

Plant Supervisors / Project Managers

Give details of work scope, procedures, and controls in place before and during the incident.

Each person must inform his/her direct manager of any incidents involving his/her supervised workforce immediately after the incident has occurred.

Assist in securing the incident site in a safe condition and preserving evidence undisturbed where possible.

Note: If medical attention is required, contact the medic / Hospital and call for assistance, provide appropriate logs, records, and other medical evidence as necessary.

HSE Personnel

Ensure the incident site is secured and left in a safe condition with any evidence left undisturbed where possible or gathered to assist in any investigation.

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If medical attention is or has been required, contact the Medic/ Hospital and discuss details of the incident to establish facts, and the extent of injury or illness.

Contact the Management Representative and other concerned parties to establish the severity and potential of the incident.

Determine and advise on the extent of reporting and investigation required.

Advise the Area Authority and relevant parties on any further actions as required.

Assist with the investigation of the incident, co-ordinate immediate actions and agree any further recommendations.

Act as secretary to the investigation Team as required.

Give guidance and advice as necessary to Investigation Team Leader.

Identify SAIFCO approved parties who will benefit from lessons learned from the incident investigation findings and communicate with them so they have appropriate incident awareness.

Project Manager / Management Representative

Ensure that the level of investigation and the format of the investigation team are adequate for the circumstances and magnitude of the incident in line with the severity of the incident.

Assign or agree members of the investigation team as required.

Issue Terms of Reference for the Investigations.

Assist the investigation team with their needs and requirements to function.

Approve relevant investigation reports.

Investigation Team

Liaise with the Project Manager / Management Representative and brief the Top Management on all serious and major investigations.

Discuss appropriate actions with the Management Representative.

Ensure that the level of investigation and the format of the investigation team are adequate for the circumstances and magnitude of the incident.

Approve relevant investigation reports and forward to Management Representative.

Review relevant incident investigations and monitor recommendations, actions and close out.

Inform the Top Management as required of any incident investigation findings that result or may result in losses, compensation, or insurance implications.

5.0 PROCEDURE

5.1 Reporting

All Incidents/accidents shall be reported on the "Incident/Accident report" formats (**IMS/QHSE/AIRI/09/01**) & **IMS/QHSE/AIRI/09/03**.

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5.2 Major, serious accidents / fatalities:

If one of the following events occurs, it must be reported instantly by phone to the Manager in-charge, Management Representative & the Top Management who will inform instantly the Police / Labor Authority or any of its branches having jurisdiction over the place of business:

- Fatality (FTL)
- Lost Time Accidents (LTA)
- Permanent Partial Disability (PPD)
- Permanent Total Disability (PTD)
- Road Traffic Incidents (RTA)
- Occupational Illness as listed in the UAE Labor law no. (8) of 1980.

The report must include employee's name, age, vocation, address, and nationality in addition to a brief of the accident, its circumstances and the arrangements made for the employee's medical aid or treatment.

5.3 Minor Incidents, Near Miss

If one of the following events occurs, it must be reported by the employee to his Departmental Head & Management Representative, as necessary. The "Near Miss" for (IMS/QHSE/AIRI/09/04) shall be filled out.

- Near Miss (NM)
- First Aid Cases (FAC)
- Medical Treatment Cases (MTC)
- Restricted Work Cases (RWC)

5.4 Investigation Requirements

All incident investigations will be carried out with the purpose of incident prevention and shall be reported on the "Incident/Accident Investigation" formats (IMS/QHSE/AIRI/09/02).

Incident investigations will not have any remit to seek or apportion blame in any way to individuals, groups, companies, or any parties.

All investigations will be carried out in an open and independent manner without any interference or influence of other parties. Any conflicts of interest or possible bias should be avoided.

The terms of reference for investigations will be specific and relevant to the incident. The terms of reference should be used to formally initiate an incident investigation.

Investigation teams should not extend their remit beyond the agreed terms of reference.

Any required resources or assistance should be made available by relevant parties, as the investigation deems necessary.

All investigations should be conducted in such a way that allows for comprehensive reporting with records of facts and findings.

Investigation reports must show incident analysis and recommendations with actions assigned for follow up and close out to eliminate or minimize the possibility of recurrence or similar incidents happening.

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Investigation teams should gather and include incident evidence and findings to support the investigation reports. These could be written statements, interview notes, logbooks, work permits, photographs, charts, maps, illustrations, drawings, sketches, graphs, technical data, materials and samples, examination & inspection certificates & reports, excerpts from procedures, manuals, instructions, etc.

A range of incident investigation and analysis techniques should be considered and applied, as the incident type and investigation scope require. Some to consider would be cause and effects, cause tree analysis, time and event line, etc.

All incident investigations should be submitted immediately on completion to the Terms of Reference Signatory who after approval should send them to the Top Management.

The Management Representative will follow up all recommendations and actions from incident investigations and record updates and close outs on a monthly basis.

The original copies of the incident investigation, attachments, and supporting documentation will be permanently and centrally filed under the custody of Management Representative. Reports and information on incidents are confidential company business. Distribution or access to incident investigations will only be allowed with the written approval of the Top Management.

5.5 Investigation Report Format

The initial and final reports will be submitted within the deadline stated in the Terms of Reference. The final report should be structured as follows:

a) Executive Summary

A brief description of the incident consequential losses (people, environment, property, reputation, process,) and major findings.

b) Sequence of Events

A narrative in chronological order of the sequence of events before, during, and after the incident. This should include events, dates, times, places, personnel, equipment, actions and outcomes.

c) Losses

Detailed description of losses resulting from the incident including personal injuries, environmental damage, and property damage, etc.

d) Causes

The investigation team should state the factual causes of the incident and any causes determined from investigation findings or conclusions. Recognized and agreed incident cause and analysis techniques should be used and applied to determine the immediate causes and the basic causes of the incident. Any other contributory factors to the incident should also be stated and explained.

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e) Conclusions, Recommendations, and Actions

The investigation team will make its conclusions, recommendations, and actions based on the facts and findings determined by the investigation and in such a way that follow up and close out can be achieved. All causes of the incident must be addressed by recommendations and actions to help ensure no incident recurrence or similar incidents happening. Designation of the relevant actionees assigned responsibility for any recommendations should be specified.

If the proposed corrective/preventive action is to introduce any new activity, product or service or modify an existing activity/equipment/process then this will be subject to risk assessment prior to implementation (this must be indicated/recorded).

f) Attachments

This section will contain the following documents or copies as required and any other items as applicable:

- Written Statements.
- Interview Notes.
- Log books.
- Work Permits.
- Photographs.
- Charts & Maps
- Illustrations, drawings, sketches, graphs, etc.
- Technical data.
- Materials & Samples.
- Examination & Inspection Certificates & Reports.
- Excerpts from Procedures, Manuals, Instructions, etc.

g) Follow Up and Periodic Reports

The HSE Executive should prepare a monthly follow-up and progress report on any outstanding recommendations and actions and send it to the Management Representative who is responsible to present it to the QHSE champions for their Follow up.

5.6 Incident Awareness

All incidents investigations should be discussed in the daily/routine meetings within Supervisors and Project Managers. Lessons to be learned and progress with follow-up actions should be covered during the discussion.

The Management Representative should report in QHSE meetings all incidents, investigations and their findings. Progress of the follow-up and close out of actions should also be discussed.

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Supervisors/ Project Managers should discuss incident investigations occurring in the company and those relevant from other areas at group meetings.

Safety Flashes will be issued to highlight incident investigation findings when appropriate. HSE Executive is responsible for producing the Safety Flash and then forwards it to Management Representative for approval and issue.

HSE Executive will prepare a monthly report of all outstanding incident investigation recommendations and actions including those that have past the target completion dates.

5.7 Audit and Monitoring

The implementation and application of the Incident Investigation procedure will be audited annually.

This will include a survey of reports for outstanding actions/recommendations beyond target dates and determine the percentage of completion and outstanding actions.

Audit findings will be communicated to QHSE Champions for information and any further actions required.

Resources will be undertaken and coordinate by the Management Representative for the approval of the Terms of Reference Signatory.

6.0 ATTACHMENTS

Type	Name	Number / Code
Form	Environmental Incident Report	IMS/QHSE/AIRI/09/01
Form	Incident/Accident Investigation Report	IMS/QHSE/AIRI/09/02
Form	Accident Report	IMS/QHSE/AIRI/09/03
Form	Near Miss Report	IMS/QHSE/AIRI/09/04

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Environmental Incident Report

Date:

Date of Incident _____ Time of Incident _____

- Air Emission
- Water Pollution (Wastewater Discharges / Sanitary Waste)
- Solid or Hazardous Waste
- Hazardous Materials or Chemicals Used / Stored
- Noise Pollution
- Odor / Dust
- Water / Fuel / Electricity Consumption
- Other

Details of Incident:

Reported By: _____

Action Taken

Reviewed By _____

Date _____



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INCIDENT DETAILS

Incident Site	
Incident Date	
Incident Time	

INCIDENT DESCRIPTION

INVESTIGATION TEAM


Other Contributing Factors

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INCIDENT CAUSES

Immediate Causes	
SUBSTANDARD PRACTICES	SUBSTANDARD CONDITIONS
Operating Equipment Without Authority	Inadequate Guards or Barriers
Failure to Warn	Inadequate or Improper Protective Equipment
Failure to Secure	Defective Tools, Equipment, or Materials
Operating at Improper Speed	Congestion or Restricted Action
Making Safety Devices Inoperable	Inadequate Warning System
Removing Safety Devices	Fire and Explosion Hazards
Using Defective Equipment	Poor Housekeeping, Disorder
Failing to use PPE Properly	Noise Exposure
Improper Loading	Radiation Exposure
Improper Placement	Temperature Extremes
Improper Lifting	Inadequate or Excess Illumination
Improper Position for Task	Inadequate Ventilation
Servicing Equipment in Operation	
Horseplay	
Under Influence or Alcohol or Drugs	

Basic Causes	
PERSONAL FACTORS	JOB FACTORS
Inadequate Physical Capability	Inadequate Leadership or Supervision
Inadequate Mental Capability	Inadequate Engineering
Lack of Knowledge	Inadequate Purchasing
Lack of Skill	Inadequate Maintenance
Physical Stress	Inadequate Tools, Equipment, or Materials
Mental Stress	Inadequate Work Standards
Improper Motivation	Abuse or Misuse
	Wear and Tear


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CONTROL FACTORS

- Leadership and Administration
- Management Training
- Planned Inspections
- Task Analysis and Procedures
- Accident, Incident Investigation
- Task Observations
- Emergency Preparedness
- Organizational Rules
- Accident, Incident Analysis
- Employee Training
- Personal Protective Equipment
- Health Control
- Programme Evaluation System
- Engineering Controls
- Personal Communications
- Group Meetings
- General Promotion
- Hiring and Placement
- Purchasing Controls
- Off the Job Safety

RECOMMENDATIONS & ACTIONS

Recommendation	Actionee	Target date	Closing date

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ATTACHMENTS

WITNESS STATEMENT

Name	
Occupation	
Company	
Date	

SIGNED

PRINT NAME:

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Date:

Accident REPORT

AR NO: _____

DATE: _____

CONTRACT: _____

CONTRACT NO: _____

Name of Employee:

Designation:

Staff No:

Name of Foreman / Charge In Hand

Location:

ACCIDENT DETAILS:

Date of Accident:

Time of Accident:

Type of Injury: () MAJOR () MINOR

Description of Accident: _____

Any disability due to accident: _____

Reasons of Accidents:

 Poor Concentration Carelessness Absence of Safety gear Use of unsafe scaffolding Improper use of tool Improper method of working Other. Behavioral Issue

State the reason if ticked other: _____

Other details:

i: First Aid given

 YES NO

ii: Needed Hospitalization

 YES NO

If hospitalized:

a: Hospital Address:

b: Ward / Bed No:


Remarks: _____

Reported by: _____

(Name)

(Sign)

(Date)

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Near Miss Report	Date:	

NEAR MISS REPORT

A near miss is a potential hazard or incident that has not resulted in any personal injury. Unsafe working conditions, unsafe employee work habits, improper use of equipment or use of malfunctioning equipment have the potential to cause work related injuries. It is everyone's responsibility to report and /or correct these potential accidents/incidents immediately. Please complete this form as a means to report these near-miss situations.

Department/Location _____ Date: _____

Time _____ am pm

Please check all appropriate conditions:

- | | |
|---|--|
| <input type="checkbox"/> Unsafe Act | <input type="checkbox"/> Unsafe equipment |
| <input type="checkbox"/> Unsafe Condition | <input type="checkbox"/> Unsafe use of equipment |

Description of incident or potential hazard: _____

Employee Signature _____ Date _____
(optional)

NEAR MISS INVESTIGATION

Description of the near-miss condition: _____

Causes (primary & contributing) _____

Corrective action taken (Remove the hazard, replace, repair, or retrain in the proper procedures for the task)

Signed: _____ Date Completed _____

Not completed for the following reason: _____

Management _____ Date _____