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Purpose

The purpose of this program is to have effective procedures for reporting and evaluating/investigating incidents and non-conformances in order to prevent further occurrences.

Responsibilities

Individual responsibilities for reporting and investigation must be pre-determined and assigned prior to incidents.

CARDINAL SURVEYS COMPANY Safety Manager

Ensures investigations are conducted and assists in identifying corrective actions.

Site Manager and Supervisors

- Investigates (or assists in) incident investigations
- Corrects non-conformances
- AcCARDINAL SURVEYS COMPANY injured employees to the medical provider for initial treatment.

Employees

Immediately report any injury, job related illness, spill or damage to any property to their immediate supervisor. If their immediate supervisor is not available the employee is then to immediately notify the project manager. Employees who could be first responders will be trained and qualified in first aid techniques to control the degree of loss during the immediate post-incident phase.

Procedure


After immediate rescue or response, actions to prevent further loss will occur if the scene is safe. For example, maintenance personnel should be summoned to assess integrity of buildings and equipment, engineering personnel to evaluate the need for bracing of structures, and special equipment/response requirements such as safe rendering of hazardous materials or explosives employed.

Investigations of Incidents & Non-conformances

Investigation is an important part of an effective safety program in that it determines the root cause and corrective actions necessary to prevent similar incidents or non-conformances.

The following must be reported to the employee's supervisor immediately. If that person is not available then the CARDINAL SURVEYS COMPANY Safety Manager shall be immediately notified for:

- Near miss incidents with the potential to harm people, the environment or assets
- Work related injuries or illnesses; Property damage including vehicle incidents
- Hazardous chemical spillage, loss of containment and contamination
- Non-conformance to safety or environmental rules, policies or standards

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The supervisor shall make the necessary notifications and begin the incident investigation process.

In the case of a major injury or incident the scene of the event should be closed off and kept "as is" at the time of the incident. This is vital for effective incident investigation.

Incident investigation occurs as soon as possible, while the facts are still fresh within the minds of those involved (i.e. witnesses). Take the opportunity to talk to all of those involved before they become unavailable or memory fades. An incident investigation must be thorough and concerned only with cause and prevention and must be separate from administrative disciplinary action.

Equipment

Equipment shall be made available and may include some or all of the following items; writing equipment such as pens/paper, measurement equipment such as tape measures and rulers, cameras, small tools, audio recorder, PPE, flags, equipment manuals, etc. The Safety Manager shall have a incident investigation kit prepared in advance.

Incident Reporting Matrix

The Incident Reporting Matrix identifies, based on type of incident, who within corporate management shall be verbally notified and when. It also specifies which type of report from the field shall be completed based on the type of incident.


Reporting of the incident must occur in a specified manner based on site specific requirements and the reporting sequence shall be posted.

EXTERNAL INCIDENT NOTIFICATION MATRIX

TYPE OF INCIDENT	WHO TO NOTIFY VERBALLY	WHEN	INCIDENT REPORT
Minor First Aid	Owner Client	24 hrs	Yes
Injury Above Minor First Aid	911 / Site Medical Response / Owner Client	ASAP	Yes
As Required Injury Reporting	OSHA / Owner Client	Within 8 hrs	Yes
Fire / Explosion	911 / Site Fire Response / Owner Client	ASAP	Yes
Reportable Spill	Site Environmental / Owner Client	Within 24 hrs	Yes
Property/Vehicle Damage	Owner Client	Within 24 hrs	Yes

INTERNAL INCIDENT NOTIFICATION MATRIX

TYPE OF INCIDENT	WHO TO NOTIFY VERBALLY	WHEN	INCIDENT REPORT
Minor First Aid	Safety Manager	ASAP	Yes
Injury Above Minor First Aid	Safety Manager	ASAP	Yes
As Required Injury Reporting	President then Safety Manager	ASAP	Yes
Fire / Explosion	Safety Manager	ASAP	Yes
Reportable Spill	Safety Manager	ASAP	Yes
Property/Vehicle Damage	Safety Manager	ASAP	ASAP

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OSHA and Client Notification

Required incidents must be verbally reported to OSHA within 8 hours of their discovery. Incidents must also be reported to the owner client as soon as possible or in a timely manner (within 24 hours of incident).

Incident Review Team and Incident Investigation Report

All incidents shall be investigated and the extent of such investigation shall reflect the seriousness of the incident utilizing a root cause analysis process or other similar method determined by the CARDINAL SURVEYS COMPANY Safety Manager. They will form an Incident Review Team that participates in the determination of the final root cause investigative incident report. The team consists of representatives of management or other designees as assigned by the CARDINAL SURVEYS COMPANY Safety Manager.

Initial identification of evidence immediately following the incident could include a listing of people, equipment, and materials involved and a recording of environmental factors such as weather, illumination, temperature, noise, ventilation, etc.

Evidence such as people, positions of equipment, parts, and papers must be preserved, secured and collected through notes, photographs, witness statements, flagging, and impoundment of documents and equipment. All shall be dated.

Witness interviews and statements must be collected. Locating witnesses, ensuring unbiased testimony, obtaining appropriate interview locations, and use of trained interviewers should be detailed. The need for follow-up interviews should also be addressed. All items shall be dated.

The final incident investigation report consists of findings with critical factors, evidence, corrective actions, responsible parties, and timelines for corrective action completion.


Results of incident investigations are communicated to employees via the Incident Notice form.

Field Incident Report Form

Written incident reports will be prepared and include the Field Incident Report Form and a detailed narrative statement concerning the events. The format of the narrative report may include an introduction, methodology, summary of the incident, Incident Review Team member names, narrative of the event, findings and recommendations. Photographs, witness statements, drawings, etc. should be included.

The supervisor completes the CARDINAL SURVEYS COMPANY Field Incident Report and takes the below steps when beginning an incident investigation.

- Provide emergency assistance, as needed and qualified for
- Secure the area as quickly as possible to retain area in the same condition at the time of the incident
- Notify management by phone according to the Incident Notification Matrix
- Identify potential witnesses
- Use investigation tools, as needed (camera, drawings, video, etc.)
- Tag out for evidence any equipment that was involved

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- Interview witnesses (including the effected employee) and obtain written, signed statements and fax to the CARDINAL SURVEYS COMPANY Safety Manager
- Prepare CARDINAL SURVEYS COMPANY Field Incident Report, sign the form, fax it to the CARDINAL SURVEYS COMPANY Safety Manager
- Implement any immediate corrective actions needed

Incident Notice Form

Lessons learned will be reviewed and communicated via the Incident Notice Form. Changes to processes must be placed into effect to prevent reoccurrence or similar events.

In order to communicate incident information and lessons learned from incidents the CARDINAL SURVEYS COMPANY Safety Manager shall send the Incident Notice to all work sites. The form shall be posted on employee bulletin boards and shall be discussed in weekly safety meetings until all employees at the job site have been informed of the incident.

Corrective Actions

Incident investigations should result in corrective actions, individuals should be assigned responsibilities relative to the corrective actions, and these actions should be tracked to closure.

Site Managers are held accountable for closing corrective actions. Corrective actions for safety improvement input are posted at each site and tracked by the CARDINAL SURVEYS COMPANY Safety Manager to ensure timely follow up and completion.

Corrective actions are also used as needed for revisions to site specific safety plans and the CARDINAL SURVEYS COMPANY Safety and Health Management System.

Injury Classifications

Injuries shall be classified per the following:


First Aid – Dressing on a minor cut, removal of a splinter, typically treatment for household type injuries.

Lost Work Day Case (LWDC) – An injury that results in an employee being unfit to perform any work on any day after the occurrence of an occupational injury.

Number of Lost or Restricted Work Days – The number of days, other than the day of occupational injury and the day of return, missed from scheduled work due to being unfit for work or medically restricted to the point that the essential functions of a position cannot be worked.

Occupational Injury – An injury which results from a work related activity.

Occupational Illness – Any abnormal condition or disorder caused by exposure to environmental factors while performing work that resulted in medical treatment by a physician for a skin disorder, respiratory condition, poisoning, hearing loss or other disease (frostbite, heatstroke, sunstroke, welding flash, diseases caused by parasites, etc.). Do not include minor treatments (first aid) for illnesses.

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Recordable Medical Case (RMC) – An occupational injury more severe than first aid that requires advanced treatment (such as fractures, more than one stitch, prescription medication of more than one dose, unconsciousness, removal of foreign body embedded in eye (not flushing), admission to a hospital for more than observation purposes) and yet results in no lost work time beyond the day of injury.

Restricted Work Day Case (RWDC) – An occupational injury which results in a person being unfit for essential functions of the regular job on any day after the injury but where there is no time lost beyond the day of injury. An example would include an injured associate is kept at work but not performing within the essential functions of their regular job.

Work or Work Related Activity – All incidents that occur in work related activities during work hours, field visits, etc. are reportable and are to be included if the occupational injury or illness is more serious than requiring simple first aid. Incidents occurring during off hours and incidents while in transit to or from locations that are not considered an employee's primary work are not reportable.


The following are examples of incidents that will not be considered as recordable:

- The injury or illness involves signs or symptoms that surface at work but result solely from a non-work-related event or exposure that occurs outside the work environment.
- The injury or illness results solely from voluntary participation in a wellness program or in flu shot, exercise class, racquetball, or baseball.
- The injury or illness is solely the result of an employee eating, drinking, or preparing food or drink for personal consumption (whether bought on the employer's premises or brought in). The injury or illness is solely the result of an employee doing personal tasks (unrelated to their employment) at the establishment outside of the employee's assigned working hours.
- The illness is the common cold or flu (Note: contagious diseases such as tuberculosis, brucellosis, hepatitis A, or plague are considered work-related if the employee is infected at work).

Training

Personnel must be trained in their roles and responsibilities for incident response and incident investigation techniques. Training shall occur prior to responsibilities to response or investigation duties are assigned. Training frequency will be based on the specific are of responsibility but shall not exceed once every two years. Training requirements relative to incident investigation and reporting shall include:

- Awareness
- First Responder Responsibilities
- The Initial Investigation at the Accident Scene
- Managing the Accident Investigation
- Collecting Data
- Analyzing Data
- Developing Conclusions and Judgments of Need
- Reporting the Results


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FIELD INCIDENT REPORT FORM


The Employee's Immediate Supervisor is to fill this form out then route it to the Safety Manager. Attach employee's and any witnesses written, signed statement.

If a major injury is involved freeze the scene (equipment, paperwork, etc.) and prevent injury location from being disturbed until advised by the Safety Manager.

<input type="checkbox"/> Job Related Illness	<input type="checkbox"/> Job Related Injury	<input type="checkbox"/> Near Miss	Property Damage <input type="checkbox"/> <Than \$500 Damage <input type="checkbox"/> >Than \$500 Damage
Date & Time of Incident: <input type="checkbox"/>	When/Who Within Mgmt Was Notified? <input type="checkbox"/>		Supervisor Name: <input type="checkbox"/>
Location of Incident: <input type="checkbox"/>	Date & Time Employee Reported to Supervisor: <input type="checkbox"/>		Time/Date of Treatment: <input type="checkbox"/>
Employee Name: <input type="checkbox"/>		Position: <input type="checkbox"/>	Experience in Position: <input type="checkbox"/>
Treatment: <input type="checkbox"/> None <input type="checkbox"/> First Aid <input type="checkbox"/> Clinic <input type="checkbox"/> Hospital			Copy of Treatment Record Attached? Yes No
Was this incident the result of violating a safety rule or procedure? Yes ___ No ___			
Describe Body Injury or Job Illness or Property Damage: <input type="checkbox"/> Form allows for space to be added			
Classification: <input type="checkbox"/> First Aid <input type="checkbox"/> Medical Recordable <input type="checkbox"/> Work Restrictions <input type="checkbox"/> Lost Time			
How Did the Incident Happen (Completed by First Line Supervisor)? What exactly happened? What was the employee doing? If there was an injury, describe it. Give as many details as possible and use additional paper if needed. <input type="checkbox"/> Form allows for space to be added			
Casual Factors Involved (Completed by First Line Supervisor): Describe the events and conditions that contributed to the incident. Include information about the equipment, workers, environment and other factors that will assist in the investigation. <input type="checkbox"/> Form allows for space to be added			
Supervisors Suggested Improvements to Prevent a Future Occurrence: <input type="checkbox"/> Form allows for space to be added			
First Line Supervisor's Name	First Line Supervisors Signature	Date	
Project Manager Comments	<input type="checkbox"/> Form allows for space to be added		
Safety Manager Comments	<input type="checkbox"/> Form allows for space to be added		
Senior Management Comments	<input type="checkbox"/> Form allows for space to be added		

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INCIDENT NOTICE

This notice is to be posted on all bulletin boards and documented in safety meetings and toolboxes at all locations until all staff are aware of the contents

Vehicle Property Damage

Date: **XX-XX-XXXX**

WHAT HAPPENED?

Provide just a one line factual statement...no names! Example:

A worker damaged a company vehicle by striking a concrete block while making a right turn on a road between buildings.

INSERT PHOTO	INSERT PHOTO
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HOW DID IT HAPPEN?

Provide a concise determination...make the message clear! Example:

The main cause of this incident was the unsafe employee behavior by choosing not to pay attention to objects in the area while driving.

WHAT DO WE DO NOW TO PREVENT THIS FROM HAPPENING AGAIN?

Insert your corrective actions...again no names. Example:

All drivers must:

- Continually assess road conditions and hazards and be prepared for any challenge that may approach them.
- Slow down around construction, large vehicles, emergency vehicles, wildlife, congested work areas, fog, rain or anything else that adds a hazard to your driving.

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