



Lusail Real Estate Development Company

Health, Safety, Security, Environment, Logistics & Quality
Department

STANDARD OPERATION PROCEDURE – Incident & Event Reporting and Investigation#

Amendment Record

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COMPANY PROPRIETARY INFORMATION

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This document is reviewed to ensure its continuing relevance to the systems and process that it describes. A record of contextual additions or omissions is given below:

Rev .No	Description / Comments	Prepared By	Checked By	Approved By	Issue Date
1	(Pg. 1) Company Propriety Information – Not controlled if printed has been added.	HSE Working Group	Michael Ford	Uwe Krueger	1 st April 2015
1	(Pg. 2) Revised Amendment Table	HSE Working Group	Michael Ford <i>Michael Ford</i>	Uwe Krueger	1 st April 2015
2	Review document – document refers number were required to be up dated	Bruce Bester	Michael Ford	Uwe Krueger	23 August 2015
3	Review of the entire document	Bruce Bester	Michael Ford	Uwe Krueger	29 Nov 15
4	Action Requirements following an Accident or Incident Table - Extreme	Bruce Bester	Michael Ford	Uwe Krueger	27 Jun 16
4	Amendments to Section 7.3.5	Bruce Bester	Michael Ford	<i>Uwe Krueger</i>	27 Jun 16

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1.0 Introduction

1.1 Purpose

The purpose of this Procedure is to provide a standard method for reporting of all Health and Safety (H&S) incidents which occur during the course of performing work on Lusail Real Estate Development Company Project.

Accurate reporting ensures incidents and unsafe work practices are identified and corrective actions initiated.

This Procedure has been written to meet the requirements of the H&S Management Standards, and the H&S Performance Standards.

1.2 Scope

This Procedure applies to all personnel working at Lusail Real Estate Development Project and details the requirements and processes for:

- Initial notification and reporting of incidents;
- Post Incident Briefing (PIB)
- Classification and Investigation Reporting;
- Corrective Actions; and
- External reporting of 'Notifiable Incidents' to Government Regulators.

1.2.1 Limits of Scope

This Procedure does not detail the processes for injury management and workers compensation.

2.0 Definitions

Term	Description
Job Hazard Analysis (JHA)	A process used to identify the hazards or potential hazards associated with each step of a job or work plan to uncover hazards and then eliminate, control, or remove them before the work is started.
Design Failure	Failure resulting from poor or improper engineering, or failure by management to construct per design specifications
Discharge	A planned and uncontrolled release or spill of a substance into the air, water or on land. Generally refers to hazardous substances discharges.
EMT	Emergency Medical Technician responders
Major Property Damage	Is damage to, or the destruction of, public or private property, caused either by a person, equipment, accident or by natural phenomena over the value of QAR 250,000
Minor Property Damage	Is damage to, or the destruction of, public or private property, caused either by a person, equipment, accident or by natural phenomena over the value between QAR 10,000 and QAR 249,000
Explosion	Rapid expansion of gases generally coupled with fire resulting in damage to all materials within the range of the explosion's energy
Event	Used interchangeably with Incident
The Principle	Lusail Real Estate Development Company
LREDC Representative	Supervisory Consultant, PMCM and or LREDC HSE Department
Contractor Representative	Supervisory Consultant and or Contractor's employee

Term	Description
Contractor	A person or entity that enters into a contract/agreement with LREDC. Also known as Support Service Provider.
On-site Treating Medical Professional	The health professional <u>that initially assesses</u> and treats the injured or ill worker.
First Aid (FIA)	<p>First Aid injuries are injuries that can be treated by First Aid and do not require follow up medical treatment.</p> <p>Examples include:</p> <ul style="list-style-type: none"> • Using a non-prescription medication at non-prescription strength (for medications available in both prescription and non-prescription form, a recommendation by a physician or other licensed health care professional to use a non-prescription medication at prescription strength is considered medical treatment). • Administering tetanus immunizations (other immunizations such as Hepatitis B vaccine or rabies vaccine are considered medical treatment). • Cleaning, flushing or soaking wounds on the surface of the skin. • Using wound coverings such as bandages, Band-Aids, gauze pads etc.; or using glue or butterfly bandages or Steri-Strips (other wound closing devices such as sutures; staples etc. are considered medical treatment). • Using hot or cold therapy. • Using any non-rigid means of support, such as elastic bandages, wraps, non-rigid back belts etc. (devices with rigid stays or other systems designed to immobilize parts of the body are considered medical treatment for recordkeeping purposes). • Using temporary immobilization devices while transporting an accident victim (e.g. splints, slings, neck collars, back boards etc.). • Drilling of a fingernail or toenail to relieve pressure, or draining fluid from a blister. • Using eye patches. • Removing foreign bodies from the eye using only irrigation or a cotton swab. • Removing splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs or other simple means. • Using finger guards. • Using massages (physical therapy or chiropractic treatment are considered medical treatment for recordkeeping purposes) • Drinking fluids for relief of heat stress. <p>This is a complete list of all treatments considered first aid for record keeping purposes.</p> <p>Note – The treatments listed here are to be reported as first aid regardless of the professional status of the person providing the treatment.</p>
Medical Treatment beyond First Aid	Injuries that require active medical treatment (other than diagnosis or investigation) by a physician that could not be undertaken by a suitable trained first aid officer or paramedic. (Please note investigation by a Doctor without specific treatment is NOT a medical treatment case)
Restricted Work Injury Cases	Any injury sustained by a worker that prevents them from undertaking all their normal duties under their classification. (Duties modified due to effects of injury, but still able to work in some capacity)

Term	Description
Major Injuries	<p>Defined injury, which requires immediate notification to Ministry of Labor. (Qatar)</p> <p>Specifically:</p> <ul style="list-style-type: none"> Any fracture, other than to the finger, thumb or toe Any amputation Dislocation of the shoulder, hip, knee, or spine Loss of sight (whether temporary or permanent) A chemical or hot metal burn to the eye or penetrating injury to the eye Any injury resulting from an electric shock or electric burn, leading to unconsciousness or requiring resuscitation, or admittance to hospital for more than 24 hours <p>Any other injury:</p> <ul style="list-style-type: none"> Leading to hypothermia, heat induced illness or to unconsciousness Requiring resuscitation Requiring admittance to hospital for more than 24 hours Loss of consciousness caused by asphyxia or by exposure to a harmful substance or biological agent Acute illness or loss of consciousness resulting from the absorption of any substance by inhalation, ingestion or through the skin Acute illness which requires medical treatment where there is reason to believe that this resulted from exposure to a biological agent or its toxins or infected material.
Lost Time Injury (LTI)	An Injury not being a major injury that results in a person either missing 3 or more consecutive days from work (not counting the day of the accident) or being unable to fulfil his/her normal duties for 3 or more consecutive days, including non-working days i.e.- weekends
Health and Safety Incident	A system failure which has or could have led to a fatality, injury, occupational illness, loss of containment, OHS public complaint, OHS legal claim or any other OHS nonconformance (including improvement and prohibition notices). Is an unplanned event that interrupts the completion of any activity, and that may or may not include injury or property damage
HSE	Health Safety & Environment. For purposes of this Procedure, HSE refers to the Lusail Health Safety & Environmental Department.
Incident	Any event which is unforeseen and unplanned which results in any form of material or monetary loss to the Client, Contractor, Consultant, employee or visitor.
Significant Incident	Any occurrence that has actually resulted in or had the potential to result in outcomes classified as Significant.
Incident Owner	The Line Manager responsible for the work area in which the incident occurred.
Supervisor	Refers to the person in charge of the person involved in the incident. A supervisor's actual job title may change depending on the involved person's level, and may include front line Supervisors,
Injury Incident	Any incident resulting in injury to a worker which requires medical treatment beyond first aid.
Incident Review Board	A detailed in person review of the incident summary to identify cause. From cause determination panel identifies corrective measures required to be implemented for prevention of future similar incidents.
Dangerous Occurrence	An unplanned and undesired occurrence (incident) which has the potential to cause injury and which may or may not cause damage to property, equipment or the environment.
Near Miss Incident	Any occurrence, event, or situation having the potential to cause injury, illness, exposure, property damage, etc.; which <u>did not result</u> in injury, illness, property damage, etc this particular instance.

Term	Description
Release	A failure of containment or confinement system(s), or a planned discharge resulting in an uncontrolled spill of a substance into the air, water or on land
Structural Failure	Structure as constructed unexpectedly fails due to poor or improper design, improper construction, material defect or damage
Vehicle Accident	Any incident involving wheel or track mounted light and heavy vehicles or equipment where collision, roll-over, fire, or similar has occurred.
RIDDOR	The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations

3.0 Responsibilities

The Contractor is fully responsible for the pre-planning, development of Method Statements, Job Hazard Analysis, overall safe work planning and implementation. The Contractor's Project Management is responsible for the assuring that all work is planned and conducted according to the pre-planning document, Contractor and Lusail Health Safety & Environment (HSE) procedures and the Qatar Construction Specifications. Should a conflict occur between procedures, standards or requirements, the more stringent shall apply.

The Contractor shall conduct investigations into any incident that occurs within their area of responsibility and shall allow the Principal/LREDC Representatives to attend investigations as required

3.1 Project Director / Manager

- Ensuring sufficient resources are allocated for the effective implementation of this procedure.
- In consultation with the Site Safety Official (HSE Manager), determine the classification of Classified Injuries (Medically treatment beyond First Aid and above).
- Assign responsibility to an individual / role for the formal notification of incidents to government bodies.
- Authorise close-out of all Significant Incidents.

3.2 Site Safety Official (HSE Manager)

- Submit initial Incident Notification within 12hours to the LREDC Representative
- Evaluate what actions have been taken or are needed to be taken to ensure the safety and/or the protection of the area.
- Investigate the incident, conducting the necessary interviews and obtain written statements.
- Where a formal root cause analysis is required, act as the Incident Analysis Leader.
- Ensure the necessary incident investigation and analysis is undertaken within the prescribed timeframes and suitable corrective actions are established.
- Update the Incident Reporting and Investigation Form during the investigation process and submit to the LREDC Representative when satisfied the investigation has been completed.
- Attach any necessary information to the Incident Report and Investigation Form.
- Assign actions arising from incident investigation and analysis and assign a due date for each.
- Monitor close out of action items.
- Maintain a copy of all incident report and investigation records.
- Provide feedback to the individual reporting the incident and the immediate workforce.

3.3 Individuals

All Contractor and subcontractor employees that are working directly on the LREDC project are individually responsible for:

- Promptly reporting all accidents and incidents to their Supervisor / Line Manager; and
- appropriate, providing evidence to the incident investigation.

3.4 First Responder and / or Work Site Supervisor

Any person who witnesses an incident is to take all steps necessary to remove personnel from danger, provide immediate first aid (if trained to do so) to any personnel who may be injured, and seek assistance as necessary from the Lusail City Command Centre (LCCC). After the immediate actions are complete, the work-site supervisor (or the next most senior person if the work-site supervisor is absent for any reason) is responsible for taking control of the accident or incident site to coordinate actions to:

- Remove personnel from immediate danger;
- Provide medical assistance and/or evacuation for any injured and/or deceased personnel;
- Barricade against unnecessary entry of personnel and preserve the scene for evidence, including the taking of appropriate photographic evidence;
- Compile a list of names of people who are missing, injured and/or deceased;
- Prevent any further damage to property, equipment or environment as appropriate;
- Compile a list of names and contact details of people who witnessed the accident or incident and get each to write an immediate statement of what they witnessed.

4.0 Accident and Incident Classifications

LREDC uses the Risk Matrix and Descriptor Tables for consequence and likelihood shown below to quantify Health and Safety risks. The severity of a Health and Safety incident that has already occurred is to be derived directly from the Consequence Descriptors Table.

Risk Matrix

Likelihood	Consequence	1 Minor First Aid Injury 1 < Qr.10k	2 Medium Medically Treated Injury Qr.10K – Qr.20k	3 Serious Restricted Work Injury Qr.20K – Qr.50K	4 Major Lost Time Injury Qr.50k – Qr.100k	5 Catastrophic Fatality >Qr.100k
	A: Almost Certain > 1 per week >25%	Moderate 11	High 16	Extreme 20	Extreme 23	Extreme 25
B: Likely 1/week – 1/month 10% - 25%B	Moderate 7	High 12	High 17	Extreme 21	Extreme 24	
C: Possible 1/month – 1/year 1% - 10%	Low 4	Moderate 8	High 13	High 18	Extreme 22	
D: Unlikely 1/year – 1/10 years 0.1% - 1%	Low 2	Low 5	Moderate 9	High 14	High 19	
E: Rare < 1/10 years 0.1%	Low 1	Low 3	Low 6	Low 10	High 15	

Likelihood Description

LIKELIHOOD	
A: Almost Certain > 1 per week >25%	An almost inevitable occurrence. The event is expected to occur in most work circumstances
B: Likely 1/week – 1/month 10% - 25%B	The event is known to have occurred in the past, and there is a good chance the event will occur
C: Possible 1/month – 1/year 1% - 10%	It could happen. An easy to imagine situation could exist, but it would be unusual for event to occur
D: Unlikely 1/year – 1/10 years 0.1% - 1%	The occurrence would require failures of systems and controls, but it would be remotely possible for the event to occur

E: Rare < 1/10 years 0.1%	There is little or no chance of the event occurring, It would require a combination of factors for the situation to result. The event has not been known prior to have happened, but is possible
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Consequence

	Minor	Medium	Serious	Major	Catastrophic
Financial	QAR. 1 > QAR10k	QAR.10K – QARr.20k	QAR.20K – QAR.50K	Qr.50k – Qr.100k	>Qr.100k
Health And Safety	Injury requiring First Aid Treatment only	Injury requiring treatment by medically qualified person. No lost time	Life threatening injury requiring hospitalization	Serious permanent disabling injury or fatality	Multiple fatalities

5.0 Action Requirements following an Accident or Incident

The line manager is responsible for ensuring all of the actions listed against an appropriate risk classification in the table below are completed following notification that an accident or incident has occurred:

Risk Rating	Action / Investigation Requirements	
Extreme (20 - 25)	Actions and timeframe for completion	<ul style="list-style-type: none"> Stop work may be required. Immediate action required to eliminate / reduce risk. Verbal incident notification to supervisor and LREDC Representatives immediately. Incident notification to government agencies i.e. police immediately (if applicable). Incident Notification Report within 12 hours. Post Incident Briefing – PEEPO type briefing to commence within 24hours Investigation and Root Cause analysis to be commenced within 3 days. Investigation and Root Cause analysis finalized within 1 month of occurrence. (time extension at the discretion of LREDC) Incident is to be communicated with immediate workers and across the Project. Investigation may or will involve the Regulator.
	Client and Client Representative Notification Required	<ul style="list-style-type: none"> LREDC Safety Manager (will escalate internally as required as required) PMCM Project Manager and Safety Manager CS Safety Manager
	Sign off approval required	<ul style="list-style-type: none"> LREDC HSSEL&Q Director, Sr. HSE & F Manager and Safety Manager PMCM Project Manager and Safety Manager CS Safety Manager

High (12 - 19)	Actions and timeframe for completion	<ul style="list-style-type: none"> • Stop work may be required. • Immediate action required to eliminate / reduce risk. • Verbal incident notification to supervisor and LREDC Representatives immediately. • Incident reported to government agencies i.e. police immediately (if applicable). • Incident Notification Report within 12 hours. • Post Incident Briefing – PEEPO type briefing to commence within 24hours • Investigation and Root Cause analysis finalized within 2 weeks of occurrence. (Time extension at the discretion of LREDC) • Incident is to be communicated with immediate workers and across the Project. • Investigation may or will involve the Regulator.
	Client and Client Representative Notification Required	<ul style="list-style-type: none"> • LREDC Safety Manager (will escalate internally as required as required) • PMCM Project Manager and Safety Manager • CS Safety Manager
	Sign off approval required	<ul style="list-style-type: none"> • LREDC Sr. HSE & F Manager and Safety Manager • PMCM project Manager and Safety Manager • CS Safety Manager
Moderate (7 – 11)	Actions and timeframe for completion	<ul style="list-style-type: none"> • Immediate action required to eliminate / reduce risk. • Verbal incident notification to supervisor and LREDC Representatives immediately. • Incident Notification Report within 12 hours. • Inspection by PMCM, Supervisory Consultant and Principle Contractor to ensure that actions are adequate and implemented. • Post Incident Briefing – PEEPO type briefing to commence within 24hours • Investigation and analysis finalized within 7 days of occurrence. (Time extension at the discretion of LREDC) • Root Cause analysis may be required at the discretion of LREDC • Incident is to be communicated with immediate workers and across the Project.
	Client and Client Representative Notification Required	<ul style="list-style-type: none"> • LREDC Safety Manager (will escalate internally as/if required as required) • PMCM Project Manager and Safety Manager • CS Safety Manager
	Sign off approval required	<ul style="list-style-type: none"> • Safety Manager • PMCM project Manager and Safety Manager • CS Safety Manager
Low (1 – 6)	Actions and timeframe for completion	<ul style="list-style-type: none"> • Immediate action required to eliminate / reduce risk. • Verbal incident notification to supervisor and LREDC Representatives immediately. • Incident Notification Report within 12 hours. • Inspection by PMCM, Supervisory Consultant and Principle Contractor to ensure that actions are adequate and implemented. • Analysis finalized within 3 days of occurrence. • Incident is to be communicated with immediate workers and across the Project.
	Client and Client Representative	<ul style="list-style-type: none"> • LREDC Safety Manager (will escalate internally as/if required as required)

	Notification Required	<ul style="list-style-type: none"> • PMCM Project Manager and Safety Manager • CS Safety Manager
	Sign off approval required	<ul style="list-style-type: none"> • Contractor or Sub-contractor Management.

6.0 Types of Incidents

The Contractor shall implement all pertinent requirements of this Procedure when any of the following types of incidents occur on the LREDC Project, or during offsite performance of work activities directly related to the Contractors scope of work under their Contract. The following incident types are covered by this Procedure:

- Dangerous Occurrence
- Work Related Injuries
- Heat Related Illness
- Occupational Exposures (Not Heat Related)
- Fires (Any Size)
- Minor Environmental (as a result of an incident / accident)
- Major Environmental (as a result of an incident / accident)
- Minor Property / Equipment Damage or Loss
- Major Property / Equipment Damage or Loss
- Road Accident (MVA)

7.0 Incident Reporting

7.1 Initial Incident Notification

As part of the Incident Notification process, the following information shall be relayed in the first instance to the parties specified in Section 5, “Client and Client Representative Notification Requirement” using LUS-HSE-FM4-453-001 “Lusail Incident Notification Report”:

7.1.1 Part A

- **Reported Date** – When the incident was reported
- **Reported Time** – What time was the incident reported
- **Reported By and Contact Details** – Who reported the incident and that persons contact details
- **Incident Date** – What date did the incident take place
- **Incident Time** – What time did the incident take place
- **Incident Number** - This will be populated by LREDC
- **Business Type** - The relevant box needs to be ticked relating to where the incident took place
- **Project Name** – The project name i.e. Mix 100 and or CP 100 A2 etc.
- **Company Name** – The name of the principle contractor i.e. HBK, Synohydro etc.
- **Location** – Where did the incident take place within the project limits
- **Job Classification of Injured Person** - Normal duties of the Injured Person – carpenter, plumber etc.
- **Length of Services** - How long the person has been working on the project
- **Injured Persons Name**
- **Injured Persons Supervisors Name and Contact Details** – Who is the injured person direct supervisor
- **Brief Summary of the Incident** – Based on facts a brief description of what happened i.e. truck rolled over in CP 100 A2 or main office caught fire in Mix 100 (no more than 10 words)
- **Detailed Description of the Incident** – Based on facts (excluding any confidential or sensitive information)
- **Immediate Actions Taken** - e.g. details of who was verbally notified and when, what actions were taken to make the area safe, whether the person was referred to the Medical Centre.
- **Project Manager’s name LREDC** - Just the name of the project manager; not signature required (For Developers this is not applicable)
- **Project Manager’s name Contractor** - Just the name of the project manager; not signature required

- **HSE Manager's name Contractor** - Just the name of the project manager; not signature required
- **LCCC Notified** - Time and date that the LCCC was notified of the incident

7.1.2 Part B

- **Specify Incident Classification** - Select most applicable classification/s
- **Injury Classification** - Select most applicable classification/s (if known)
- **Assign the initial risk rating** - Consequence and likelihood to total
- **Consequence** – Choose 1-5 (Subjective, based on information available at the time of notification)
- **Likelihood** – Choose A- E (Subjective, based on information available at the time of notification)
- **Total** – Where Consequence and Likelihood intersect of the matrix will determine the total

All notifications of incidents shall occur within the timeframes noted in Section 5, regardless of whether an incident investigation has been undertaken or completed.

The Contractor is fully responsible for ensuring the Incident Notification is sent with in the timeframe stipulated in Section 5 to LREDC Representatives were applicable.

7.2 Post Incident Briefing(s) (Task Assignment / Information Gathering)

LREDC requires a Post Incident Briefing(s) (PIB) for all incidents / accidents. This is intended to assist the Contractor in post incident / accident task assignment, information collating and the analysis thereof in order to identifying contributing causes, root cause and to formulate robust corrective measures necessary for prevent reoccurrence. The briefing is not intended to place blame on any Contractor or employee, nor is it to degrade the persons involved in the incident.

The Contractor shall schedule and conduct a PIB within twenty four (24) hours or as early as reasonably practicable (at the discretion of LREDC) following the incident occurrence. Personnel invited to the meetings shall include (but not limited to):

- Contractor Project Manager
- Contractors HSE Manager
- Area Supervisor/ Foreman
- Personnel Involved in Incident
- Witnesses (all)
- LREDC Representatives

During the PIB the parties involved will appoint and establish an investigation team and team leader. The appointed Investigation Team Leader (normally the Contractors HSE Manager) will assign responsibilities as required to ensure all necessary information/evidence can be collated.

It is necessary to collate the evidence to build up a picture of the incident and its causes. This is often an interactive process, between evidence gathering and the development of causes, and may include:

- Evaluate what actions have been taken or are needed to be taken to ensure the safety and / or the protection of the area, meeting any legislative requirements.
- Review the initial notification
- Take statements, and interview staff as required.
- Take measurements and photos.
- Submit photos and any other documentation as required
- Collation of all evidence sources in chronological order;
- Construction of a time line diagram to organise the evidence showing chronological interrelationships;
- Ensure the investigation goes far enough into the historical period prior to the incident so that all contributory factors are covered;
- Cross-check evidence to find any time gaps, lack of evidence, or areas of inconsistency; and
- Re-interview or recheck evidence where disagreement or inconsistency occurs.

Note – some of the above activities may not be required for Level 1 incidents

Form LUS-HSE-FM4-443-001 “HSE Minutes of Meeting Form” will be used to document the PIB(s) and all information shared.

The LREDC Representative will chair the initial PIB until an Incident Team Leader has been appointed, thereafter he/she will be updated on the progress of the investigation and attend any additional PIB at their discretion.

7.3 Incident Classification and Investigation

7.3.1 Part A – Incident Summary and Risk Rating

The appointed Team Leader Owner is responsible for verifying the accuracy and appropriateness of the data based on known facts collated at the PIB(s). The Team Leader is then responsible for entering the following information:

- Specify Incident Classification (select most applicable classification/s)
- Assign the initial risk rating (consequence and likelihood). Calculate the Risk Score Result. NB: Incident Total Risk Score will determine the Action Requirements as set out in Section 5.

7.3.2 Part B - Incident Classification Details

Depending on what the incident classifications are selected in Part A, additional information is to be entered for each of the relevant classifications.

Important Note:

Work Place Injury / Illness – For work-related injuries, the on-site treating medical professional shall complete this section and shall provide the classification of the injury based on the medical report, where there is a delay in receiving such report the classification “Pending Classification” field shall be used where the injury has a potential to be classified higher than a First Aid Injury.

Where this occurs, the treating medical professional is responsible for providing advice to the Investigation Team Leader on the classification of injury, in accordance with the Definitions Table Section 2.

Once the medical report has been released the Investigation Team Leader is responsible for (if required) the reclassification of the injury in consultation with the on-site treating medical professional. The HOSPITAL medical certificate can in no way be overridden

7.3.3 Part C – Incident Analysis

A basic incident analysis must be completed for all incidents, regardless of the outcome or the risk level. All incidents will be assessed using the LREDC Risk Matrix contained in LUS-HSE-FM4-431-006 - Risk Level Matrix, the risk rating for the incident / accident shall be agree in conjunction with the LREDC Representative.

Incident Analysis requirements:

- Incidents rated as a Level 1 Risk (Low 1 to Low 6) may only require minimal analysis dependent on the circumstances of the incident and potential for reoccurrence.
- Incidents rated as a Level 2 Risk (Moderate 7 to Moderate 11) will require a more detailed incident analysis.
- Incidents initially rated as a ‘Significant Incident’ / Level 3 Risk (High 12 to Extreme 25) a detailed analysis including a Formal Root Cause Analysis is also required.

The additional following forms are available to assist in the collation of relevant information:

- LUS-HSE-FM4-446-146.00 - Incident Event Timeline Form
- LUS-HSE-FM4-453-002.02 - Witness Report
- LUS-HSE-FM4-446-145.00 - Incident Event Interview Form

These forms, where used, must be scanned and sent as an appendix to the Incident Classification and Investigation.

7.3.4 Part D – Formal Root Cause Analysis (Significant Incident / Level 3)

The Incident Investigation Team must ensure that a formal root cause analysis is undertaken for all Significant Incidents.

The Team Leader shall be suitably trained and experienced to head the analysis team. The Team Leader shall utilise all resources at their disposal to ensure a thorough and accurate incident analysis is undertaken.

The following completion of the formal root cause analysis, the following information will need to be recorded (there may be multiple in each section):

- Details of conditions (if conditions were a factor)
- Details of actions (if actions were a factor)
- Details of human factors (if these were a factor)
- Details of organisational factors (if these were a factor)

7.3.5 Part E – Corrective and Preventative Actions

Corrective and Preventative actions arising from the incident or incident investigation must be record in this Section of the Incident Event Form.

Prior to assigning responsible persons and due dates to corrective and preventative actions, the assigning person must first discuss the proposed action and due dates with the proposed responsible person.

The Investigation Team Leader is responsible for monitoring the close-out of these assigned action items.

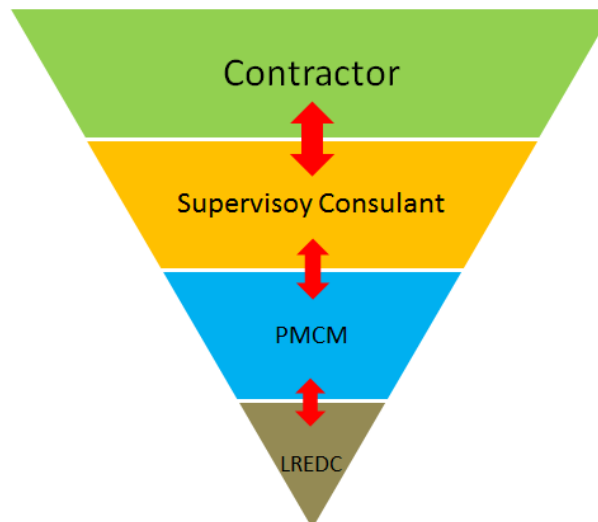
If the corrective and preventative action cannot be implemented by the due date the responsible person must request an extension from the Investigation Team Leader, whom will in turn liaise when LREDC Representative if this affects any agreed upon dates

7.3.6 Part F – Sign-Off

All Incident Classification and Investigation Forms shall be reviewed and signed off by the appropriate company representatives. This includes but is not limited to the Contractors Project Manager and HSE Manager.

LREDC Representatives shall review and once satisfied with the content of the report may sign-off. In the event that the report is not satisfactorily i.e. the details within the report are of insufficient standards the report will returned to the contractor and classified as “review and resubmit”.

Note: Sign-off of Incident Classification and Investigation Form will be conducted in the hierarchy as illustrated below:



7.3.7 Communication of Incident Investigation

Communication / feedback shall be the responsibility of the Contractor to convey the outcome of the incident investigation via safety meetings, toolbox meetings, organised stop work safety meetings, notice boards, safety bulletins and lessons learnt notices.

The Contractor must document all training provided relating to the incident to staff. Training records must be retained in site files for the duration of the project and archived for a minimum retention time of **10 years** from creation date

7.3.8 External Reporting of “Reportable Incident” to Government Regulators

For Health and Safety incidents the Contractor’s Project Manager or delegate is responsible for ensuring Reportable Incidents are reported to the applicable Government agent within the prescribed timeframe, and in accordance with prescribed procedure.

The Contractor’s Project Manager or delate shall ensure local site procedures are developed and maintained for the reporting Reportable Incidents to the applicable Government agency.

Any Health and Safety notifications to Government agents must be appendix to the Incident Classification and Investigation Form and if required made available to LREDC Representative on request.

8.0 References

Qatar Construction Specifications “The Report and Investigation of Accidents and Incidents”