



Incident Reporting and Investigation Procedure

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1. Purpose:

This procedure outlines the steps for reporting and investigating incidents within Gold Circle Investigations Ltd. The primary goal is to ensure the safety of employees, customers, and assets, as well as to prevent similar incidents in the future.

2. Management Statement

Management Statement: Gold Circle Investments Ltd realizes the importance of accurate and timely reporting of incidents and injuries. The Company Management understands that unless incidents and injuries are reported, we will lose the opportunity to learn and improve our Health, Safety and Environmental program. the Company strives to foster an atmosphere of management and personal accountability relative to reporting and investigating incidents and injuries. Our motto is: " You will never get into trouble for reporting event, but not reporting an HSE event as described below is breaking company policy and will lead to disciplinary action". All incidents occurring on a the Company worksite, no matter how small, must be reported.

3. Definitions:

Incident: Any unplanned event that results in, or has the potential to result in, harm to people, property, or the environment.

Near Miss: An incident that did not result in injury, illness, or damage, but had the potential to do so.

Investigator: Person or team assigned to investigate the incident thoroughly.

Corrective Action: Measures taken to prevent recurrence of incidents or near misses.

A Health or Safety Event is any event which has or may lead to:

Harm to one or more persons including:

- i. Near miss or near hit: Level 1
- ii. First Aid Injury as described in OSHA: Level 2
- iii. OSHA Recordable Injury: Level 3
- iv. Days Away From Work Case: Level 4
- v. Hospitalization of one employee: Level 4
- vi. Fatality: Level 4

Note: Hospitalization of two or more employees overnight or one or more fatalities must be reported to OSHA within 24 hours.

Vehicle Event is any event which has or may lead to:

Near Miss or near hit: Level 1

Damage to a vehicle : Level 2

Environmental Event is any event which has or may lead to:

- i. Minor release of chemical fluids or hydrocarbons, <2 liters: Level 2
- ii. Damage to an environmental containment, < \$1000.00: Level 2
- iii. Environmental damage: Level 3



4. Reporting Responsibilities

All the Company Employees, Contractors and Sub-Contractors shall Report any event listed above as soon as safely possible, but always within one hour of the event. the Company Clients Shall be notified immediately of any incidents occurring on their property or in their operations.

5. Reporting Procedure:

a) Immediate Reporting:

Employees who witness or are involved in an incident must report it immediately to their supervisor or manager. If the incident occurs outside of regular working hours, employees should contact the designated emergency contact.

b) Information Required:

Date, time, and location of the incident.

- Description of the incident, including what happened and any contributing factors.
- Names and contact details of witnesses, if any.
- Any injuries, damages, or environmental impacts.

c) Form of Reporting:

Incidents can be reported verbally, via email, or by using the company's incident reporting form.

4. Initial Response:

a. Ensure Safety:

Priority should be given to ensuring the safety of all individuals involved and mitigating any immediate hazards.

Secure the area to prevent further incidents or access by unauthorized personnel.

b. Preservation of Evidence:

If possible, preserve the scene of the incident to aid in the investigation process. Take photographs, gather relevant documents, and secure any equipment involved.

6. Investigation Procedure:

a. Assignment of Investigator:

A qualified individual or team shall be assigned to investigate the incident promptly.

The investigator should be independent, objective, and trained in incident investigation techniques.



b. Gathering Information:

Interview witnesses and involved parties to gather firsthand accounts of the incident.

Review relevant documents, such as maintenance records, training logs, and procedures.

c. Root Cause Analysis:

Identify the underlying factors that contributed to the incident, including immediate causes and systemic issues.

Use techniques such as the "5 Whys" or "Fishbone Diagram" to analyze root causes.

d. Report Preparation:

Prepare a detailed report outlining the findings of the investigation.

Include recommendations for corrective actions to prevent similar incidents in the future.

7. Corrective Actions:

a. Implementation:

Management shall review the investigation report and approve appropriate corrective actions. Assign responsibility for implementing these actions and establish timelines for completion.

b. Follow-Up:

Monitor the effectiveness of corrective actions to ensure they are implemented as planned.

Conduct periodic reviews to assess whether further actions are necessary.

8. Documentation and Recordkeeping:

a. Incident Report:

Maintain a record of all incidents and near misses, including details of the investigation and corrective actions taken.

Ensure confidentiality of sensitive information, such as personal health information or trade secrets.

b. Accessibility:

Incident reports and associated documentation should be accessible to relevant personnel, such as managers, supervisors, and safety officers.



9. Training and Communication:

a. Training Programs:

Provide training to employees on incident reporting procedures, including the importance of reporting near misses.

Offer additional training to investigators on conducting thorough investigations and analyzing root causes.

b. Communication:

Communicate the outcomes of incident investigations to all employees to raise awareness and promote transparency.

Encourage a culture of continuous improvement by soliciting feedback from employees on safety practices.

10. Review and Revision:

a. Regular Review:

Periodically review and revise the incident reporting and investigation procedure to reflect changes in operations, regulations, or best practices.

Seek input from employees, stakeholders, and safety experts to improve the effectiveness of the procedure.

b. Documentation of Revisions:

Document all revisions made to the procedure and communicate these changes to relevant personnel.

11. Compliance:

a. Legal and Regulatory Compliance:

Ensure that the incident reporting and investigation procedure complies with relevant laws, regulations, and industry standards.

Periodically review compliance with legal requirements and update the procedure as necessary.

b. Internal Policies:

Align the incident reporting and investigation procedure with the company's internal policies, values, and goals.

Ensure consistency in implementing the procedure across all departments and locations.



12. Conclusion:

This incident reporting and investigation procedure aim to promote a safe and healthy work environment by effectively identifying, reporting, and addressing incidents and near misses. By following this procedure, we demonstrate our commitment to continuous improvement and the well-being of our employees, customers, and communities.



13. Annexures

A. Health and Safety Incident reporting Form

HEALTH AND SAFETY INCIDENT REPORT FORM			
INSTRUCTIONS Fill out this form immediately after a work-related incident and submit it to:			
REPORTED BY	DEPARTMENT		
PHONE	EMAIL		
INCIDENT DETAILS			
LOCATION	DATE OF INCIDENT TIME		
INCIDENT TYPE select one			
ACCIDENT		INCIDENT	NEAR MISS
VIOLENCE		ILL HEALTH	SAFETY
INCIDENT DESCRIPTION Report any details that may have contributed to the incident. Attach additional information as necessary.			
OUTCOME DESCRIPTION Detail all harm / health effects / damage.			
CORRECTIVE MEASURES Describe corrective measures taken to address immediate hazards related to the incident.			



B. Workplace accident incident reporting form

WORKPLACE INCIDENT REPORT FORM

INSTRUCTIONS

Fill out this form to report a workplace incident that resulted in injury, illness, or a near miss. Return completed form to:

THIS FORM SERVES TO DOCUMENT *select all that apply*

LOST TIME / INJURY	FIRST AID	INCIDENT	CLOSE CALL	OBSERVATION
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INDIVIDUAL AFFECTED To be filled in by person injured / involved, if possible.

NAME OF PERSON COMPLETING REPORT	SUPERVISOR NAME	DATE OF REPORT

PERSON(S) INVOLVED

EQUIPMENT / VEHICLES INVOLVED

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INCIDENT DETAILS

LOCATION	DATE OF INCIDENT	TIME

WITNESSES

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INCIDENT DESCRIPTION Describe tasks being performed and sequence of events. Attach additional pages as necessary.

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Was event / injury caused by an unsafe act (activity or movement or an unsafe condition, i.e., machinery or weather)?

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TO BE COMPLETED ONLY IF LOST TIME / INJURY OR FIRST AID WAS REQUIRED

TYPE OF INJURY SUSTAINED:		
CAUSE OF LOST TIME / INJURY OR FIRST AID:		

Was medical treatment necessary? If yes, name of hospital / physician:

YES	NO	
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EMPLOYEE SIGNATURE

DATE

SUPERVISOR SIGNATURE

DATE

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