



ACCIDENT-INCIDENT INVESTIGATION REPORT

Project Name: Waterview Connection Tunnels

Project No: 3466

Orbit Notification No:

SRC:

Field Report

OMA1113

INCIDENT DETAILS					
Incident Title:		MOP 12-year MOP fell off bicycle Allan Wood Reserve			
INCIDENT TYPE					
<input type="checkbox"/> Property Damage		<input type="checkbox"/> Plant Damage		<input type="checkbox"/> Near Miss	
<input type="checkbox"/> Hazard		<input type="checkbox"/> Injury			
<input type="checkbox"/> Serious Incident		<input checked="" type="checkbox"/> Other.....first aid event.....			
Incident Date:		10/04/2024		Reported Date:	
10/04/2024		10/04/2024			
Incident Time:		08:26 am		Reported Time:	
08:26 am		08:27 am			
Location:		Allan Wood reserve		Specific Work Area:	
				SVB	
DETAILS OF: <input type="checkbox"/> PERSON INVOLVED IN INCIDENT / <input type="checkbox"/> PERSON REPORTING INCIDENT					
Surname:		First Name:		Date of Birth:	
		s 9(2)(a)		2012	
Sex:		Phone:			
Male <input type="checkbox"/> Female <input checked="" type="checkbox"/>		s 9(2)(a)			
Occupation:		Employer:			
Student		Nil			
DETAILS OF TRAINING & EXPERIENCE					
Experience:		Training:		Roster Type	
Days into Roster		Hours into Shift			
<input type="checkbox"/> 1 to 6 months		<input type="checkbox"/> Site Induction		<input type="checkbox"/> 5 & 2 Mon – Fri	
<input type="checkbox"/> 6 to 12 months		<input type="checkbox"/> Area Induction		<input type="checkbox"/> 6 & 1 Mon - Sat	
<input type="checkbox"/> 1 to 3 years		<input type="checkbox"/> Specific Task		<input type="checkbox"/> Other,.....	
<input type="checkbox"/> 3 years +					
INCIDENT DESCRIPTION (Brief, factual description of events leading up to the incident as well as the incident itself)					
<p>s 9(2)(a) from APAC was travelling to Allan Wood reserve to remove alligator weed, he stopped on the shared pathway to allow peds and cyclists pass, a 12-year-old cyclist has attempted to pass the Ute and trailer and ended up on the edge of the grass next to the shared pathway. When the 12-year-old tried to remount the shared path the front wheel of her bike caught the edge of the path and she fell off grazing her left elbow and left knee. First aid has been provided and the girl has been assisted to a nearby park bench where she said she would call her mum, a minute or so later the girl has walked back to the ute which is still stationary on the path, s 9(2)(a) is letting s 9(2)(a) the Maintenance manager know, during the conversation the 12 year old felt dizzy and s 9(2)(a) has helped her to sit down and s 9(2)(a) has called her mum. The mum has arrived shortly after taking the girl and the bike home.</p>					
<p>During the Investigation a member of the public stopped and complained about APAC's ute being parked on the shared pathway. He stated it was left unattended but that is when s 9(2)(a) was assisting the little girl back to her mum's car. He stated he was going to complain.</p>					
IMMEDIATE ACTIONS TAKEN (What actions were taken to control the hazard or incident?)					
<p>We have looked at the situation and the circumstance and there are not really any other initiatives that could prevent this event. A contributing fact was probably the 12-year-old's biking experience.</p>					
RISK RANKING (see matrix on page 8)					
Initial <u>Actual</u> Consequence		x Insignificant		<input type="checkbox"/> Minor	
				<input type="checkbox"/> Moderate	
				<input type="checkbox"/> Major	
				<input type="checkbox"/> Catastrophic	

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ACCIDENT-INCIDENT INVESTIGATION REPORT

Consider the maximum reasonable potential consequence of the event					
Initial <u>Potential</u> Consequence	<input type="checkbox"/> Insignificant	<input checked="" type="checkbox"/> Minor	<input type="checkbox"/> Moderate	<input type="checkbox"/> Major	<input type="checkbox"/> Catastrophic
Incident with Actual or Potential ISR 1 and 2 or a Potential 3 complete pages 1, 2 and 7					
Incident with an Actual or Potential ISR 4 or a Potential 5 complete all pages Note: Site Risk Register must also be reviewed					
Incident with an Actual ISR 5 complete a full ICAM investigation <input type="checkbox"/> (tick once complete)					
SUPERVISOR					
Name:		Signature:		Date:	
INJURY					
INJURY/ILLNESS	BODILY LOCATION				
<input type="checkbox"/> Amputation	<input type="checkbox"/> Abdomen	<input type="checkbox"/> Nose			
<input type="checkbox"/> Burns – chemical	<input type="checkbox"/> Ankle	<input type="checkbox"/> Pelvis			
<input type="checkbox"/> Burns – heat	<input type="checkbox"/> Back	<input type="checkbox"/> Shoulders			
<input type="checkbox"/> Contusion / abrasion	<input type="checkbox"/> Chest	<input type="checkbox"/> Spinal – neck			
<input type="checkbox"/> Crush	<input type="checkbox"/> Ears	<input type="checkbox"/> Spinal – thoracic			
<input type="checkbox"/> Dehydration	<input checked="" type="checkbox"/> Elbow	<input type="checkbox"/> Spinal – lumbar			
<input type="checkbox"/> Dislocation	<input type="checkbox"/> Eyes	<input type="checkbox"/> Toes			
<input type="checkbox"/> Effects of exposure	<input type="checkbox"/> Face	<input type="checkbox"/> Upper arm			
<input type="checkbox"/> Electric Shock	<input type="checkbox"/> Feet	<input type="checkbox"/> Upper leg			
<input type="checkbox"/> Foreign body (eye, ear, nose)	<input type="checkbox"/> Fingers	<input type="checkbox"/> Wrist			
<input type="checkbox"/> Fracture	<input type="checkbox"/> Genital	<input type="checkbox"/> Other			
<input type="checkbox"/> Loss of consciousness	<input type="checkbox"/> Groin			
<input type="checkbox"/> Internal injury (torso)	<input type="checkbox"/> Hands				
<input type="checkbox"/> Intra-cranial injury / concussion	<input type="checkbox"/> Head				
<input type="checkbox"/> Multiple injuries	<input type="checkbox"/> Hips				
<input type="checkbox"/> Laceration	<input checked="" type="checkbox"/> Knees				
<input type="checkbox"/> Poisoning	<input type="checkbox"/> Lower arm				
<input type="checkbox"/> Sprains / strains	<input type="checkbox"/> Lower leg				
<input checked="" type="checkbox"/> Superficial	<input type="checkbox"/> Mouth				
<input type="checkbox"/> Other (specify)	<input type="checkbox"/> Neck				
FIRST AID TREATMENT PROVIDED (record any treatment, observations or advice given to patients)					
First aid treatment for minor abrasions, plasters etc.					
Returned to normal duties? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Referred to Medical Centre/Hospital? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Details:.....					
First aid treatment providers name: s 9(2)(a), from APAC.					
DAMAGE					
Plant Damage					
Plant/Equipment Information (including motor vehicles)(include photos)					
Type of Vehicle/Equipment:	Ute	Driver:	s 9(2)(a)		
Make:	Ford	Licence No.:			
Licence No.:		Year:	Expiry Date:		
Chassis No.:		Colour:	Approved for vehicle type: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Damage/Loss:	NIL	Approx. Cost:	NIL		
Property Damage					



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ACCIDENT-INCIDENT INVESTIGATION REPORT

CAUSATION CHECKLIST					
PEOPLE					
<input type="checkbox"/> No written job procedure	<input type="checkbox"/> Written job procedure did not anticipate factors	<input type="checkbox"/> Employee/s did not know job procedure	<input type="checkbox"/> Job tasks were too difficult	<input type="checkbox"/> Employee/s not capable of performing the job	<input type="checkbox"/> Employee/s deviated from known job procedure
<input type="checkbox"/> Deviation from job procedure was required	<input type="checkbox"/> Employee/s did not know that PPE was required	<input type="checkbox"/> No PPE specified for job	<input type="checkbox"/> PPE not available	<input type="checkbox"/> Lack of PPE contributed to injury	<input type="checkbox"/> Employee/s did not know how to use PPE
<input type="checkbox"/> PPE was used incorrectly	<input type="checkbox"/> PPE supplied was inadequate	<input type="checkbox"/> Emergency equipment not specified	<input type="checkbox"/> Emergency equipment not properly used	<input type="checkbox"/> Emergency equipment did not function correctly	<input type="checkbox"/> Other
EQUIPMENT					
<input type="checkbox"/> Hazardous condition(s) contributed to by equipment	<input type="checkbox"/> Hazardous condition of equipment not required	<input type="checkbox"/> Quality of equipment contributed to condition	<input type="checkbox"/> Wrong equipment used	<input type="checkbox"/> Employee did not know where to obtain correct equipment	<input type="checkbox"/> Equipment design encouraged operator error
<input type="checkbox"/> Failure to recognize equipment hazardous condition	<input type="checkbox"/> Employee(s) not informed of equipment condition	<input type="checkbox"/> No detection of condition in existing inspection procedure	<input type="checkbox"/> Correct equipment unavailable	<input type="checkbox"/> No inspection procedure	<input type="checkbox"/> Substitute equipment used
ENVIRONMENT					
<input type="checkbox"/> Hazardous condition(s) contributed to by location	<input type="checkbox"/> Failure to recognize environmental hazard	<input type="checkbox"/> Hazard condition of environment not reported	<input type="checkbox"/> Insufficient work space	<input type="checkbox"/> Employee(s) not required in area	<input type="checkbox"/> Hazardous condition not visible
<input type="checkbox"/> Employee(s) not informed of hazardous condition	<input type="checkbox"/> Environmental condition a contributing factor	<input type="checkbox"/> Other			
MANAGEMENT					
<input type="checkbox"/> Management system failure	<input type="checkbox"/> Supervision failure to detect or report the hazardous condition	<input type="checkbox"/> Supervision failure to detect deviations from procedure	<input type="checkbox"/> Construction deadlines	<input type="checkbox"/> Failure to Supervisor responsibility / accountability	<input type="checkbox"/> Supervisor/Employer failed to review procedure
<input type="checkbox"/> Supervisor not trained in accident prevention / hazard identification	<input type="checkbox"/> Failure to initiate corrective action for known hazardous conditions	<input type="checkbox"/> Other			

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DATA COLLECTION / PEEPO CHART (LIST ITEMS EVIDENCE ATTACHED)

<p>People <u>Items to Consider:</u> Training, Experience, Health Record, Supervision Attitudes, Communication, History Teamwork, Alertness, Records, Roster, Ability</p>	<p>Environment <u>Items to Consider:</u> Illumination, Precipitation, Contaminants, Housekeeping, Noise, Temperature/ Humidity, Wind/ Turbulence, Vibration, Acceleration or deceleration, Radiation, Work Surface/ space / Access, Electricity, Air pressure, Wildlife.</p>	<p>Equipment <u>Items to Consider:</u> Design, Construction, Testing, Inspection, Maintenance, Modification, PPE, Maintenance Records.</p>	<p>Procedures <u>Items to Consider:</u> Utilization, Content, Conditional Criteria, Validated, Work Procedure, Work plans and Methods, Communication / Induction, Reviews/Checks, Control / Authorization, Revisions, JSEA's, SWI's, SOP's</p>	<p>Organization <u>Items to consider:</u> Organizational Culture, Training Program, Visible Support, Operational Pressure, People Management, Provision of Equipment, Adequate Facilities, Feedback System, Leadership, Planning & Communication.</p>
<p>12-year-old MOP on a bicycle with little experience</p>	<p>Uneven surface</p>	<p>None of these were a factor.</p>	<p>Signed JSEA</p>	<p>None of these were a factor.</p>

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Organisational Factors	Task / Environmental Conditions	Individual / Team Actions	Absent or Failed Defenses	Incident

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ROOT CAUSE			
A 12-year-old girl failed to stay on the footpath and in addition to that failed to choose an appropriate spot to remount the pavement. Leading to falling off her bicycle and receiving minor injuries.			
INVESTIGATION CONCLUSIONS			
The sub-contractor has followed the signed JSEA and has done everything in his power to comply with their requirements.			
CORRECTIVE ACTIONS / RECOMMENDATIONS			
Details	Type	Actioned By	Date
	NIL	N/A	10/04/2024
CHANCES OF ACCIDENT RECURRING			
<input checked="" type="checkbox"/> Unlikely <input type="checkbox"/> Possible <input type="checkbox"/> Likely			
FATAL RISK INVOLVED?			
<input type="checkbox"/> Work Safely at Heights	Never work at heights without fall protection or prevention		
<input type="checkbox"/> Keep Clear	Stay clear of dangers like unsupported trenches, overhead loads and open edges		
<input type="checkbox"/> Respect plant and Equipment	Stay clear of moving plant. If you are not trained or authorized to use it, DON'T!		
<input type="checkbox"/> Look out for Services	Do not use faulty or damaged electrical equipment. If in doubt get it checked		

SIGN-OFF							
HSE Rep Signature:		Date:		Supervisors Signature:		Date:	
Signature Safety Advisor / Coordinator Signature:		Date:		Area Managers Signature:		Date:	

Incident to be discussed at the next H&S Committee Meeting.

JUST CULTURE REQUIRED (CONSEQUENCE)			
YES		NO	
SAFETY ALERT REQUIRED			
YES		NO	

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RANKING OF CONSEQUENCE							
ISR	Financial Impact Loss of Profit Increased Capital	Delay	People Impact	Environmental Impact	Legal Ramifications'	Community Media Reputation Impact	Consequence Descriptor
1	\$0 to \$100,000	No impact or less than 3 days	No injuries requiring any treatment.	Minor localised environmental harm rectified within hours. No protected habitat or species affected	Minor breaches of regulations	Minor impact; awareness / concern from specific individuals	Insignificant
2	\$100,000 and \$500,000	Between 3 and 10 days	First aid treatment.	Minor transient environmental harm that requires days for recovery. No protected habitat or species affected.	Minor legal issues and non-compliance	Limited impact; concern/complaints from certain groups / organisations	Minor
3	\$500,000 to \$1M	Between 10 and 20 days	Medical treatment required, Return to work Case.	Significant environmental harm that requires weeks for recovery. Environmental incident involving protected species or habitat.	Serious breach of regulations with investigation and report to authorities, fine possible	Local impact: public concern / regional publicity / media coverage localised within neighboring communities	Moderate
4	\$1M to \$5M	Between 20 and 40 days	Injuries resulting in; lost time, permanent disability, amputation, or surgery.	Very serious long term environmental harm or contamination that takes years to recover. Damage to protected species or habitat.	Major breach of regulation and major litigation	Suspected reputational damage; local / regional public concern and reactions. National media coverage.	Major
5	\$5M +	40 + days or Indefinite Delay / Stoppage	Single or multiple fatalities.	Severe environmental harm or contamination resulting in permanent environmental damage. Endangered species and habitat destroyed	Significant prosecution and fines. Serious litigation. Class actions	Noticeable reputational damage; national / international public attention and media coverage	Catastrophic