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| **Gold Fields Location** | **Classification** |
| **REGION:** |  |  | **SPI: Serious Potential Incident** |
| **SITE:** |  |  | **Serious Injury: Safety** |
| **DEPARTMENT:** |  |  | **Serious Incident: Environment** |
| **DATE / TIME:** |  |  | **Serious Incident: Community** |
| **Incident Title:** |  |  | **Recordable Injury (MTI, RWI or LTI)** |
| **INX#** |  |

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| **Part A: Incident Alert** |

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| **Description of incident:** Describe succinctly what happened to enable understanding  |
| **Actual Injury / Impact of Incident:** Describe the actual injury or impact (use role descriptors not peoples names) |
| **Potential Injury / Impact of Incident:** Explain the reasons for the high potential. |
|  |
| **Sketch / Photos:** Provide annotated photos of the scene to enable understanding of the incident.**Ubicación final de la roca a 10.4m del muro interno de la via.** |
| **Part B: Investigation Findings: Lessons Learnt** |
| **Incident Description:** Provide a brief but full explaination *describing what happened*. |
| **Describe what went wrong!** Outline facts only, *how the incident happened*. Focus on contributing and causal factors. |
| **Describe what must be fixed (Lessons Learnt):** To *prevent* the incident from happening again! |
| **MUE / Critical Hazard:** List the Critical Hazards and explain which *Critical Controls* were associated with the incident. |
| **Describe the Courageous Safety Leadership displayed / absent?** **Describe the Vital Behaviours enacted / absent.** |

| **#** | **Critical Preventative Actions****(List Actions specifically designed to prevent re-occurrence)** | **Hierarchy of Controls** | **WHO****(Responsible)** | **WHEN****(Date)** |
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| **#** | **Secondary Corrective Actions****(Opportunities – 5 maximum)** | **Hierarchy of Controls** | **WHO****(Responsible)** | **WHEN****(Date)** |
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| **Responsible Manager (‘s)**  |
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| **Name and Signature** | **Contact Details** |
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| **Name and Signature** | **Contact Details** |

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| **Feedback:** *To be completed by the Supervisor providing the briefing to workforce.* |
| **Discussion: Has anybody seen this type of incident before?** **Is this a fatality risk for our work crew/team?** **How do we manage it?** |
| **Work Group / Team** | **Feedback** |
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| **Responsible Superintendent / Supervisor** |
|  |  |
| **Name and Signature** | **Contact Details** |