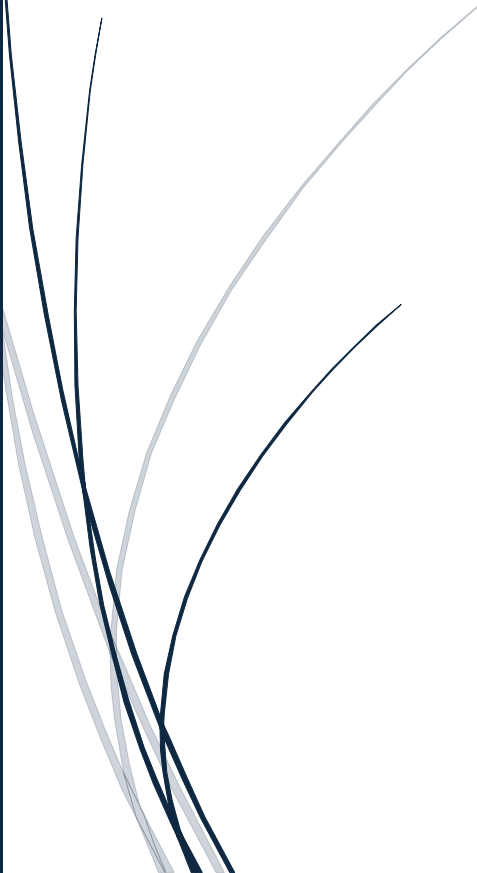




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WESR-EIR



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Electrical Injury Response & Reporting (EIR) — WESR

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Effective Date: TBD

Owner: PREI

Applies to: All personnel and activities within the WESR-controlled boundary

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1. Purpose & Scope

This add-on sets a standard **response, reporting and documentation** process for any **electrical injury** (electric shock, arc flash, or arc blast) occurring within the WESR scope. It integrates with WESR roles, safety documents and incident management. **Medical treatment takes precedence** over documentation at all times. Where this add-on is more stringent than baseline WESR, it prevails. Local law and site rules that are more stringent take precedence.

Applies to: employees, contractors, visitors; on-site and field operations; includes minor static shocks through to major injuries.

2. Definitions & Classifications

Electrical injury: physiological effects from contact with, or proximity to, electrical energy, including shock, arc flash and arc blast.

Severity reference (for initial triage/documentation; not a medical diagnosis): - **Mild Shock** — No disorientation, lightheadedness, loss of consciousness, sensation of irregular heartbeat, burn, or persistent local pain; no visible damage to skin/clothing; current path **not** through chest. Worker may feel transient discomfort (fatigue/ache). - **Moderate Shock** — Any of: disorientation, lightheadedness, brief loss of consciousness, sensation of irregular heartbeat, localized burn or persistent pain; visible damage to skin/clothing **and/or** possible current path through chest. - **Major Shock** — Any of: ongoing disorientation, suspected cardiac effects, significant burn/pain, loss of consciousness. Possible current path through chest.

Note: Any suspected electrical shock warrants **medical evaluation**.

3. Roles & Responsibilities

- **First Responder (nearest competent person):** Assess scene; ensure **it is safe to approach**; initiate emergency response; provide first aid within competence; coordinate until relieved by the PCWA or Incident Lead.
- **PCWA (Person in Charge of Work Activity):** Assumes scene leadership when present; confirms isolation/LOTO with the **PCEI**; ensures boundaries and access control; initiates documentation (EIR-Form).
- **PCEI (Person in Charge of Electrical Installation):** Ensures power is **removed/isolated**; verifies and documents isolation status; supports evidence preservation (e.g., lockout records, switching positions).
- **Incident Lead Investigator (ILI):** Leads incident investigation; defines evidence collection; liaises with HSE and engineering specialists.



- **Medical Liaison (ML):** Point of contact for medical professionals; transfers the **EIR-Form** and known exposure details; records outcome information received from medical services.
- **PREI:** Ensures program governance, notification thresholds, reviews and close-outs; allocates resources for corrective actions.

4. Immediate Actions (At the Scene)

- 1) **Secure the scene;** stop work.
- 2) **Do not approach** until hazards are controlled; ensure **power removed/isolated**.
- 3) **Render first aid** appropriate to competence (e.g., CPR/AED as indicated).
- 4) **Call/Signal for help** and summon emergency services per site protocol.
- 5) **Stabilise and transport** the injured person to the nearest treatment facility.
- 6) **No driving:** A person who has sustained an electrical shock **must not operate a vehicle** post-event; arrange escort/transport.
- 7) Begin documentation **only after** medical response is underway; do not delay treatment.

5. Investigation & Evidence Control

- **Quarantine:** If safe, collect and quarantine tools used, relevant electrical safety equipment and any **Lockout Instruction/records**; preserve switching positions and HMI indications where possible.
- **Photograph** the lockout and injury scene; include device IDs, tag/lock IDs, instruments, and protective equipment.
- **Transfer custody** of items to the Incident Lead Investigator; maintain a simple chain-of-custody log.



6. Reporting & Notifications

- **Report** the incident in the incident database promptly with preliminary classification and location.
- **Notify** the designated electrical safety governance group/committee to support root-cause analysis, hazard assessment and mitigation.
- **Upload** the completed **Electrical Injury Report Form (EIR-Form-001)** and supporting media to the incident case file.

7. Medical Evaluation & Follow-Up

- **Mandatory medical evaluation** after any suspected electrical shock, regardless of initial symptoms.
- Provide the clinician with the **EIR-Form-001** containing: description of activity, suspected voltage (if any), AC/DC, arc involvement, explosion/enclosed-space, clothing ignition, fall/secondary injuries, PPE used, witnesses, loss of consciousness/CPR/defibrillation, and **estimated current pathway** through body.
- **Return-to-work** follows medical advice and company policy; record constraints and review before resuming similar tasks.

This section defines process expectations and documentation only; clinical decisions rest with medical professionals.

8. Forms & Records

- **EIR-Form-001 — Electrical Injury Report Form:** scene information + medical handover sheet; includes body-pathway sketch.
- **Photo Log & Evidence Register:** standardised filenames, timestamps, device/lock IDs.
- **Investigation Pack:** statements, diagrams, lockout documentation, instrument IDs/calibration, cause analysis and actions.
- **Records Retention:** retain per incident management policy (minimum 5 years unless stricter local law applies).



9. Process Flow (Timeline)

Event → Secure & Isolate → First Aid & Call EMS → Transport → Initial Report → Evidence Quarantine → Medical Handover (EIR-Form) → Full Report & Uploads → Investigation → Corrective Actions → Review & Close-Out.

10. Training, Drills & Readiness

- Annual drills for electrical injury response covering scene safety, isolation confirmation, first aid, and use of EIR-Form.
- Brief PCWA/PCEI/ILI/ML roles; verify understanding via tabletop exercises.
- Ensure availability of AEDs, first-aid kits, and printed EIR-Form pads at key locations.

Annexes (Forms & Checklists)

Annex A — EIR-Form-001 (Electrical Injury Report Form)

To the medical professional: This information sheet assists assessment of an **electrical injury (shock/arc flash/arc blast)**.

Injured person: _____ **Date/Time:** _____
Point of contact for more info: _____ **Phone:** _____

Scene information (tick/complete): - Activity at time of injury: _____

- Electrical shock received? ☐ Yes ☐ No ☐ Unknown
- Source type: ☐ Static discharge ☐ Live source ☐ Unknown
- If live: estimated voltage: _____ ☐ AC ☐ DC
- Arc flash involved? ☐ Yes ☐ No ☐ Unknown
- Explosion? ☐ Yes ☐ No ☐ Unknown In enclosed space? ☐ Yes ☐ No ☐ Unknown
- Clothes ignited? ☐ Yes ☐ No ☐ Unknown
- Fall/secondary impact? ☐ Yes ☐ No ☐ Unknown — Describe: _____
- PPE worn (describe): _____
- Exposure witnessed? ☐ Yes ☐ No ☐ Unknown
- Loss of consciousness? ☐ Yes ☐ No ☐ Unknown
- CPR given? ☐ Yes ☐ No ☐ Unknown Defibrillation? ☐ Yes ☐ No ☐ Unknown

Hand this sheet to emergency responders/medical staff with the injured person.



Annex B — Shock Symptoms Quick Reference

- **Mild:** no disorientation/lightheadedness/LOC/arrhythmia sensation/burn/persistent pain; no visible damage; no chest path; possible fatigue/ache.
- **Moderate:** any of disorientation/lightheadedness/brief LOC/arrhythmia sensation/burn/persistent pain; possible chest path; visible damage may be present.
- **Major:** significant symptoms or sustained effects; possible chest path.

Annex C — Evidence Preservation Checklist

- ☐ Area made safe and secured
- ☐ Power isolated and verified
- ☐ Tools/PPE/instruments quarantined
- ☐ Photos of locks/tags/devices/indications taken
- ☐ Lockout Instruction and records captured
- ☐ Witness details collected
- ☐ Chain-of-custody started

Annex D — Return-to-Work Decision Record

Medical clearance received: ☐ Yes ☐ No

Restrictions: _____

Review by (Manager/PCWA): _____ **Date:** _____

Annex E — Version History

Version	Date	Description of Changes
v1.0.0	TBD	Initial issue (WESR)