

<b>Name of Employee</b>	Mohammed Mainuddin	<b>Badge No.</b>	30040452		<b>Actual Severity:</b>	1
<b>Safety Awareness Training Date</b>	2/19/2019	<b>Proof of Training</b>	Induction		<b>Worst Potential Severity:</b>	2
<b>Name of Line Manager</b>	Mustafa Ali	<b>Badge No.</b>	3104094	<b>Profession/ Designation</b>	Project Manager	
<b>Name of Supervisor</b>	Ibrahim Sabry	<b>Badge No.</b>	31032055			
<b>Division / Department</b>	Civil Department	<b>Project Name</b>	097-C76 R	<b>Project Location</b>	JUC	
<b>Place of the Incident/Injury</b>	Area (PART 3)	<b>Date of Incident</b>	4/18/2021	<b>Time of Incident</b>	07:48	
<b>Nature of the Incident/Injury</b>	<b>Occupational Incident/Injury</b>	No	Near Miss	<b>Other, Please specify :</b>		
	<b>Road Traffic Incident/ Injury</b>	No	Yes			
<b>Brief Description of the Incident/Injury</b>	Mr. Mahinudin (carpenter) was working with the Circular Saw, there were some plywood with protruding nails lying on the ground beside him which he didn't noticed. When he stepped forward to cut the plywood he accidentally stepped on the protruding nail. The nail penetrated inside the shoe but didn't hit the foot of the worker. Fortunately no injury occurred. See attached photo.					
<b>Details of the Injury (Specify affected body parts)</b>	N/A					
<b>First Aid Given?</b>	No	<b>Name of First Aider</b>				
<b>Name of Hospital where patient was treated/transferred</b>				<b>Address/Location of the hospital</b>		
<b>Medical leave given by administering Hospital/Clinic or Doctor</b>	No	<b>Number of Days</b>		<b>Hospitalization</b>	No	
<b>Property damage</b>	No	<b>Estimated percentage of damage</b>		<b>Estimated Cost of damaged (SAR)</b>	N/A	
<b>Property Details</b>	<b>Type / Function of the property</b>	N/A		<b>Location of affected property</b>	N/A	
	<b>Name of Manufacturer</b>	N/A				
	<b>Model of the Property</b>	N/A		<b>Plate Number</b>	N/A	
	<b>Vehicle Registration Number</b>	N/A		<b>Company Fleet Number</b>	N/A	



Was Pre- Task / Toolbox meeting conducted	Yes	Was the person using required Personal Protective Equipment (PPE)	Yes			
Specify the Personal Protective Equipment (PPE)	Helmet, safety shoes, vest, gloves and goggles, Safety Harness					
What was the injured person/employee doing at the time of the incident?	Working on circular saw					
What was the machine/equipment doing at the time of the incident?	NA					
What was the material/s / substance/s doing at the time of the incident	N/A					
<b>Immediate Cause/s of the Incident/injury:</b> .Protruding Nail in the plywood caused the nearmiss.						
Root Cause/s of the Incident/injury:	People: Worker not paid attention while stepping forward.					
	Process / Procedure: De nailing of plywood was not done after de shuttering.					
	Equipment: Tools were okay for the task.					
	Workplace: Workplace housekeeping was not done as per the requirements.					
Corrective Action to prevent reoccurrence:	Elimination: N/A					
	Substitution: N/A					
	Engineering Control: All protruding Nail plywood should be Denailed after deshuttering work.					
	Administrative Control: Ensure Proper housekeeping in the workplace area. Ensure proper supervision for the work.					
	PPE: Ensure safety shoes with metal sole plate.					
Were there any witnesses?	None	Type of witness/s	Employee		Public	
Witness Details -		Badge Number		Mobile Number		



Witness Statement:

Initial Investigation Conducted by: Krishna Pillai

*Behind @ys*

Noted by:

Date

4/18/2021

Additional Details:



Investigation Report Verified by:

Noted by:

Date

4/18/2021