

Incident and Injury Investigation Report



Name of Employee	Abdur Rahman	Badg No.	je 3	4537			Actual Severity:	N/A
Safety Awareness Training Date	10/19/2019	Proo Traii		nduction	Potential Severity:		Potential	N/A
Name of Line Manager	Mustafa Ali	Badg No.	ge 3	104094			nager	
Name of Supervisor	Ibrahim Sabry	Badg No.	ge 3	1032055				
Division / Department	Civil Department	Proje Nam	- 1	97-C76 R	Project Location	n	JUC	
Place of the Incident/Injury	Auditorium part 1	Date Incid		12/16/2020	Time of Incident 1030		1030	
Nature of the Incident/Injury	Occupational Notice Not			Near Miss	Other, Please specify:			
	Road Traffic Incident/Injury	No		Yes				
Brief Description of the Incident/Injury	platform where stee was working over th							r who
(Specify affected	N/A							
(Specify affected body parts)		Name of First	Aider	N/A				
(Specify affected body parts) First Aid Given? Name of Hospital where patient was	N/A No N/A	Name of First	Aider	N/A Address/Lof the hosp		N/A		
Details of the Injury (Specify affected body parts) First Aid Given? Name of Hospital where patient was treated/transferred Medical leave given by administering Hospital/Clinic or Doctor	No	Name of First Number of Days	Aider N/A	Address/Lo of the hosp	ital	N/A	No	
(Specify affected body parts) First Aid Given? Name of Hospital where patient was treated/transferred Medical leave given by administering Hospital/Clinic or	No N/A	Number of	T	Address/Lo of the hosp	ital tion		No N/A	
(Specify affected body parts) First Aid Given? Name of Hospital where patient was treated/transferred Medical leave given by administering Hospital/Clinic or Doctor	No N/A No	Number of Days Estimated percentage	N/A	Address/Lo of the hosp Hospitaliza	ital dition Cost of SAR)			
(Specify affected body parts) First Aid Given? Name of Hospital where patient was treated/transferred Medical leave given by administering Hospital/Clinic or Doctor Property damage	No N/A No No Type / Function of	Number of Days Estimated percentage of damage	N/A	Address/Lo of the hosp Hospitaliza Estimated of damaged (S	ital dition Cost of SAR)		N/A	
(Specify affected body parts) First Aid Given? Name of Hospital where patient was treated/transferred Medical leave given by administering Hospital/Clinic or Doctor	No No No Type / Function of the property Name of	Number of Days Estimated percentage of damage N/A	N/A	Address/Lo of the hosp Hospitaliza Estimated of damaged (S	ital ction Cost of SAR) affected	1	N/A	



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Was Pre- Task / Toolbo conducted	Vas Pre- Task / Toolbox meeting onducted		req	s the person us juired Personal otective Equipm PE)		Υe	es	
Specify the Personal Pr (PPE)	otective Equipment	Helmet, saf	ety shoes, v	est, gloves and g	oggles			
What was the injured p of the incident?	erson/employee doing	g at the time	N/A					
What was the machine, incident?	equipment doing at th	e time of the	N/A					
What was the material, the incident		at the time of	Scaffold pi	pes lying on the	scaffoldin	g platform		
Immediate Cause/s of t	he Incident/injury:							
Loose material kept on s	caffold near the open ga	ps						
	People: Lack of supervision and carelessness from the scaffolders to leave the loose scaffolding materials on the scaffolding after finishing their job							
	Process / Procedure - Loose material on platform, poor housekeeping							
Root Cause/s of the Incident/injury:	Equipment: N/A							
	Workplace: Workplace was not Ok as there were gaps in the scaffolding.							
	Elimination: N/A							
	Substitution: N/A							
Corrective Action to prevent reoccurrence:	Engineering Control: Close the gaps on platform as much as possible.							
	Administrative Control: Housekeeping, removal of scaffolding materials after erecting the scaffold. Avoid working downside of the working platform, barricade the area to restrict any movement of workers.							
	PPE: All necessary PPEs at site must be worn, in this case helmet and safety shoes must have to be worn if there is any person downside.							
Were there any witnesses?	Yes	Type of witness/s	Employe	e	√	Public		
Witness Details - Mehar	Zaman		Badge Number		Mobile Number		1	
Witness Statement : As p scaffolding tube fell from	oer witness they were on height near to them.	erecting scaffol	d structure	beneath the pl	atform w	hen one of	•	



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Initial Investigation Conducted by: Krishan Pillai

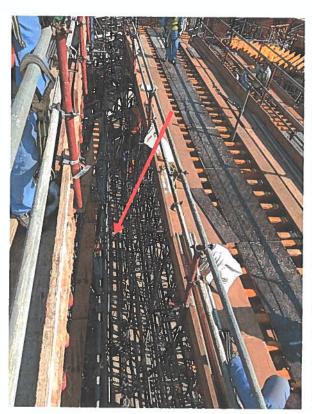
Noted by: Mustafa Ali

Date

12/16/2020

J.Krist

Additional Details:





Investigation Report Verified by:	Noted by:			7
		Date	12/16/2020	