



## **INVESTIGATION, NONCONFORMITY, CORRECTIVE AND PREVENTIVE ACTIONS**



## PURPOSE:

To establish, implement and maintain a procedure for:-

- Handling and Investigating the Non-Conformances.
- Taking actions to mitigate any Impacts/Risks caused and initiating, completing Corrective action & Preventive Action.
- Defining responsibility and authority for handling and investigating non-conformances.

## SCOPE:

It encompasses all the Activities, Processes Products & Services covered under EOHS Management System.

## RESPONSIBILITY:

Dept. Heads concerned are responsible for Monitoring, Investigating Non-Conformance and taking Corrective & Preventive actions in their particular area.

## DEFINITIONS: Nil

## PROCEDURE :

The non-conformance shall be identified as -

- Deviations from the documented procedure / instructions not followed.
- Unsafe practices / unsafe conditions.
- Accidental emissions / discharges.
- Deviation from the norms / specified limits.
- Spillage / Leakage / Emission / Accident / Incident due to improper handling / improper maintenance / deviation from operational control procedures and documented procedures.



- Any incident /accident having a significant impact / risk on the environment, or health or safety of persons.
- Non compliance to applicable legal requirements
- Improper handling of hazardous materials / waste
- Deviation from the specification mentioned in the operation control procedure

### **Investigations and Learning Points**

All accidents and incidents must be reported on 'Accident Incident Report Form' SBG the true cause of each incident is established and corrective action be raised to prevent recurrence. Investigation of all accidents should be carried out as soon as possible after the occurrence.

Where possible, the scene of such accidents should be left undisturbed until the initial rescue and recovery has been completed. Photographic evidence should be obtained immediately as this disturbs nothing and records facts, showing important features and general arrangements of the occurrence. Damaged items of plant should be retained. Careful notes should be made of conversations with witnesses and written statements obtained where possible if action by the Authorities is likely.

The following details should be obtained during the investigation:

- Name, occupation, Iqama and 'Computer number /employer of injured person (IP)
- Names, occupations and employers of all witnesses
- Full description of what happened (in time order)
- Work activity and people involved ,
- Plant and equipment involved
- State of equipment before the accident and after



- What were the immediate causes
- What were the underlying causes
- What is need to stop it happening again (with responsibilities and time scales)
- Relevant photographs, diagrams and paperwork should be obtained

For serious incidents / investigations a team led by the Health and Safety Manager /Director will advise but simple analytical techniques e.g. '5 why's' should be adequate for Site use,

The steps involved in initiating Corrective Action shall be -

- Investigate the cause of Non-Conformance
- Recording results of investigation
- Determination of Corrective Actions needed to eliminate the cause of Non-Conformance.
- Ensure that the Corrective Actions are effective.

The Steps involved in Preventive action shall be -

- Analyze all Processes to eliminate potential causes of Non-Conformances
- Initiate Preventive Actions
- Ensure that the Preventive Actions are effective.

The corrective and Preventive actions shall be taken appropriate to the magnitude of the problem and commensurate with the Environmental impact / OH&S risk encountered.

### **Near Miss and Damage Reports**

An incident is an unplanned, unwanted occurrence. It is caused by either an unsafe act or an unsafe condition or both. All accidents to personnel, incidents and damage to equipment are to be reported without delay to the Direct Manager and the Health & Safety Manager. An



accident is an incident where someone got hurt.

Classifications: Accidents are normally classified as:

- Minor injury: 1first aid treatment with no loss of time.
- Serious Injury: An injury that needs Hospital (expert) treatment and loss of work time
- Near miss: An incident which resulted in no injuries with none or minimal damage, but is a good warning of possible accidents or serious damage to come
- Dangerous Occurrence: an incident with no injuries but serious damage or stoppage of work and maybe could have been avoided if near misses had been reported and acted upon.

Example-

- Site vehicles narrowly avoid each other at a Site crossroads = near miss
- Site vehicles hit each other at a Site cross roads = damage or dangerous occurrence
- Site vehicles hit each other and injuries result = minor or serious injury

The extent of accident investigation is usually determined by the severity of the injury and it is vital that non-injury accidents ('Near Miss / Dangerous Occurrences) are treated in proportion to the loss or damage and/or by the potential loss. Incidents involving Subcontractors working on Company Sites will follow their own reporting procedures and also conform to SBG requirements.

Near misses & dangerous occurrences are too numerous to define and list. Anything that could have caused an injury including false alarms, should be reported & closed out, so that no opportunities for a repetition or injuries exist.



## **Accident resulting in minor injuries I First aid incidents I ill-health**

Details of the injury, how the injury occurred and treatment given will be recorded by the Nurse in the clinic. A copy of the report form must be passed to the health & Safety Manger for preventing reoccurrence and investigation purposes. Confidential information to be respected.

The Clinic will generally deal with the reporting of minor injuries and close liaison with the Safety team will ensure these are followed up, without the need for double reporting. Note that the Safety Team does not need medical details, only accident details.

In the event of every serious injury, the GOSI Procedure (instigated by the Clinic who will send the injured persons to Hospital for Medical Treatment) will be followed, and an Accident Report Form should be completed as these will generally be reported independently of the Clinic. A copy of the report form made by the work team must be passed to the Health & Safety Manger who will review the information and undertake a preliminary investigation to confirm the underlying causes and recommendations for remedial action.

## **Accident Resulting in Death**

Accidents resulting in death will be reported immediately following the format in Section 40 and the

CEO / President will be contacted by the Line manager(s).

The site of such an accident must be left undisturbed until advised otherwise by the Health & Safety . Director. The Health & Safety Director will be responsible for coordinating the



investigation into the accident. All other staff is required to cooperate with the investigation as required,

## **Accident Statistic Data**

Every month the Health & safety Manager will provide accident statistics data to the Project Management team and send this to the HSE Director.

## **Safety Committees and Worker Involvement**

As part of active monitoring of H&S performance and to gain involvement from all workers and provide feedback on accidents, incidents or ill-health issues, an H&S meeting will be held:

- The Project Health & Safety Committee will meet monthly
- Weekly meetings between SBG and contractors
- H&S meetings with Client representatives as required
- Toolbox talks meetings for the workers at least once per week
- Accidents and high potential Incidents H&S meeting

In addition a monthly Senior Management Inspection will take place on each Building by a senior manager with the HSE Manager who will coordinate and compare H&S matters common to all sites.

These meetings are designed to ensure continuity of approach across all Buildings and communication of good ideas and solutions

### **SAFETY COMMITTEE**

Project Director  
Site Project Manager  
Health & Safety Officer  
Construction Managers  
MWSH Responsible  
Subcontractor representatives  
Site Nurse

And other people who may be able to contribute

### **Committee Functions**

The committee will meet monthly (as circumstances permit or require) with the following core agenda:

1. Site inspections issues
2. Issues raised by workers
3. Matters requiring attention
4. Progress made since previous meeting
5. Monthly Safety Statistics



6. Review of accidents & ill-health
7. Review I update of procedures

**Objective and Target Monitoring**

- KPI's to be issued every month.
- Accident frequency rate
- GOSI percentage
- Seriousness rate
- Training

Any other Site produced KPI's that may reduce accidents and monitor the safety performance