

# Section 4 Brieser Construction SH&E Manual

October

# 2017

The purpose for this procedure is to establish guidelines to notify management personnel in writing about conditions that appear hazardous, to identify potential hazards before a job task is started and for reporting and investigating incidents.

## Job Hazard Analysis & Incident Reporting

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## **JOB HAZARD ANALYSIS & INCIDENT REPORTING**

Brieser Construction

### **Purpose**

The purpose for this procedure is to establish guidelines to notify management personnel in writing about conditions that appear hazardous, to identify potential hazards before a job task is started and for reporting and investigating incidents.

An incident includes:

1. A serious or minor injury or occupational illness to a Brieser Construction Company employee.
2. A serious or minor injury or occupational illness to a non-employee or visitor.
3. Property damage to Brieser Construction Company equipment.
4. Property damage to non-company property or equipment involving a Brieser Construction Company employee.
5. Damage or structural failure to a building.

**All incidents must be immediately reported to the Safety Manager immediately.  
Bill Petersen (630)816-2283**

Brieser Construction and its management provide you the very best care possible. We also pledge that any incident reported immediately will be free from discipline and reprisal. We are fanatical about continually improving our safety culture and if we do not take the opportunity to learn from incidents we would defeat the purpose of our culture here at Brieser. We encourage every employee to willingly and purposely report all incidents. We do not look at incidents as a failure but rather an opportunity to improve.

This procedure is to be followed by all Brieser Construction employees when reporting and investigating all incidents involving; Illness, Significant Near-Misses, Near-Hits, First-Aid and Medical Clinic Treatment, Environmental Spills and/or Releases, Property Damage, Fire or Explosions and Vehicle Incidents.

### **Responsibilities**

*The Program Administrator: Brieser Safety Manager*

This person is responsible for:

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- Issuing and administering this program and making sure that all employee complaints, suggestions, hazard concerns and incidents are addressed and completed
- Entering data into the Safety Initiatives form. This form is used to assign responsible parties and track completion of any items listed in this policy.
- Ensuring that employees receive initial and annual training on the proper use of all forms presented in this policy
- Maintaining records of all forms used in this policy including details of all incidents.

*The Program Administrator: Human Resources Manager*

This person is responsible for:

- All medical records are kept on a need-to-know basis and are in a locked file or protected file.
  - 1) **Serious Injury or Illness**
    - a) Notify injured employee's family or next of kin.
    - b) Notify the customer where the incident occurred.
    - c) If a fatality occurs or 3 or more are hospitalized, verbally notify OSHA within 8 hours provide written notification 1-800-321-OSHA or the local area office.
    - d) Within twenty-four (24) hours after the in-patient hospitalization of one or more employees or an employee's amputation or an employee's loss of an eye, as a result of a work-related incident, you must report the in-patient hospitalization, amputation, or loss of an eye to OSHA.
    - e) By telephone to the OSHA toll-free central telephone number, 1-800-321-OSHA (1-800-321-6742).
  - 2) **Minor Injury or Illness**
    - a) Provide job foreman with further instructions.
    - b) Notify company doctor of injuries. Physicians Immediate Care is our local Occupational Health and Medical Facility
    - c) Notify the customer where the incident occurred

### **All Incidents**

- 1) Gather Supervisor's Incident Investigation Report and all other supplemental reports.
- 2) Initiate the Incident/Near Miss Checklist spreadsheet
- 3) Complete any additional reports or paperwork requested by the customer and route to the customer within 24 hours.
- 4) Conduct additional investigation and complete any additional investigation reports that may be needed including the "Incident Alert Report"
- 5) The Incident Alert is a document that will be prepared by the Brieser Safety Department after every incident. This document addresses the root cause and offers

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lessons learned. It is then emailed to the entire workforce and is discussed at the job site as part of a morning toolbox talk.

- 6) Obtain a clear diagnosis of ALL complaints, as well as an evaluation as to the possible connection to the incident history from the treating physician. Any alleged injury, which does not appear medically possible in relationship to the event, will be carefully analyzed and reviewed with the treating physician.
- 7) Update Incident Review worksheet.
- 8) Follow up with the insurance company regarding the injured employee weekly.
- 9) Verify that the customer has all information needed.
- 10) Review Supervisor's Incident Investigation Report and all other supplemental reports and completes the Illinois Form 45
- 11) If incident results in the loss of more than 3 days from work, send the Form 45 to the Illinois Industrial Commission
- 12) Send information to the insurance company with a copy to the agent
- 13) Set up individual incident report file
- 14) Within 6 working days from incident log all recordable injuries or illnesses on the OSHA 301, 300A and 300 Log and keep for 5 years
- 15) Orally report to OSHA the death of any employee from a work-related incident or the in-patient hospitalization of three or more employees as a result of a work-related incident within eight (8) hours.
- 16) Send additional reports, doctor bills, etc. to the insurance company and agent

*Project Managers, Superintendents/Foreman*

These people are responsible for:

- Knowing the hazards in their work areas and reviewing TSTI's before job start.
- Assuring that safe operations are maintained within their departments to prevent injuries.
- Enforcing that TSTI's is completed by the work crew at the job site before any tasks are performed.
- Report all incidents to the Safety Manager immediately.
- Determine the severity of the injury.

1) **Serious Injury**- An injury that could result in mortality, such as body disfigurement, loss of limb or body part or renders the employee incapacitated.

- a) **THE FIRST CONCERN** at the incident scene is to care for the injured person. Secure the incident scene and provide initial care for the injured person. **DO NOT MOVE A SERIOUSLY INJURED OR UNCONSCIOUS PERSON** unless he/she is in further danger.

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- b) If serious injury or illness occurs at an industrial site request an ambulance or other emergency services response team from the host company.
  - c) If a serious injury or illness occurs at other locations, call for an ambulance.
  - d) Communicate the exact location on the job site where the injured person is located.
  - e) Provide general information regarding the nature of the injury (shock, amputation, fall, etc.) to the emergency responders when the call is made.
  - f) Assign someone to secure access to the injured employee and to meet the emergency responders at the job entrance to guide them to the injured employee.
  - g) Protect other employees and property
  - h) Notify the Safety Manager ASAP office(815) 521-0900; cell (815)679-8157
  - i) Secure the incident scene and complete a thorough investigation
- 2) **Minor Injury** - Minor injury or illness incidents include cuts and muscle strains which do not impair the ability to work. These injuries involve first aid treatment and must be reported.
- a) Assure that first aid treatment is provided.
  - b) Notify the Safety Manager for further instruction office (815) 521-0900; cell (630)816-2283.
  - c) Do not allow the injured employee to leave the jobsite alone.
  - d) Secure the incident scene and complete a thorough investigation.
- 3) **Preparation & Investigation**
- a) Posting Emergency Telephone Numbers.
  - b) Assuring that the first aid kit remains on site and is adequately stocked.
  - c) Report all incidents and injuries to the Brieser Safety Manager.
  - d) Determine severity of injury
  - e) Complete as many steps as possible outlined in the Incident Investigation section of this procedure.

### *Employees*

- Participate in the preparation of the TSTI each day.
- Report all incidents to your supervisor immediately.

### **Hazard Identification**

#### **How do I identify workplace hazards?**

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A job hazard analysis is an exercise in detective work. **Your goal as an employee and any subcontractor** under Brieser control is to discover the following:

- What can go wrong?
- What are the consequences?
- How could it arise?
- What are other contributing factors?
- How likely is it that the hazard will occur?

To make your job hazard analysis useful, document the answers to these questions in a consistent manner on the backside of your TSTI. Describing a hazard in this way helps to ensure that your efforts to eliminate the hazard and implement hazard controls help target the most important contributors to the hazard.

Good hazard scenarios describe:

- Where it is happening (environment),
- Who or what it is happening to (exposure),
- What precipitates the hazard (trigger),
- The outcome that would occur should it happen (consequence), and
- Any other contributing factors.

Please reference the backside of the Brieser TSTI. Risk Assessment is the evaluation of the chance of injury, illness, or disease resulting from exposure to a particular form of matter or energy. Simply put, now that you have completed your TSTI for your particular job task, we are asking that you implement one more layer of safety and that is assigning your task a Risk Assessment Code. **RISK=PROBABILITY OF EVENT AND SEVERITY OF OUTCOME.** First ask yourself and your team what is the most likely hazard to occur on this job?

An example out in the field for Brieser would be the task of installing concrete forms inside an excavation. Here let's consider lacerations due to the amount of wood cutting, use of hammers (line-of-fire) and use of knives as our most likely risk or injury that could happen. Now ask how severe would a laceration be if it occurred (given the fact that your following all the action items listed in the TSTI) let's rate this "Marginal" under the severity codes. Secondly ask what the probability a cut/laceration will occur is. Again, implementing all the TSTI action items let's select "Unlikely" under the Probability Code. This is saying that if a cut incident happened it would probably be anywhere from a First Aid to Lost Work but we are not anticipating this happening because I have all my hazard corrections in place. You would then cross-reference the two codes and I come up with "Low"

What do the codes mean? In the upper right hand corner of the chart lists these codes along with a brief explanation.

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H=HIGH - Operation is not permissible. This means the job is at such a high risk that work cannot start until Brieser's Safety Director assesses the job. Most likely this job cannot be performed safely.

S=SEVERE - High Priority Remedial Action. Again, this job cannot start until Brieser's Safety Director assesses the job. The crew and the Safety Director will re-assess this job and see if a safer way can be established. Most likely a job listed as Severe may be re-classified as Medium and work would then be permitted.

M=MEDIUM - Take Action. This means that a job task must be evaluated by a Brieser Foreman, Superintendant or Safety in order to proceed with work.

L=LOW - Acceptable. This means no further evaluation is needed beyond normal TSTI functions.

### ***TSTI (Total Safety Task Instruction)***

Brieser Construction employs a hybrid Job Hazard Analysis. This hybrid is called the TSTI (Total Safety Task Instruction) the TSTI is completed at the work site by the work crew. The form will be completed at the start of each day; all hazards shall be identified and mitigated prior to job start. Also the TSTI must be reviewed and updated if needed; at any point in the day when a new activity is undertaken and at any point in the day when new conditions effecting the execution of the work are evident. The TSTI form must be reviewed if a new crew member is assigned to the work activity after the work has started. Since the TSTI quality is a pro-active leading indicator of performance, Brieser's Safety Department and site supervision will be evaluating the TSTI quality on an ongoing basis.

### ***TSTI Quality Evaluation Form***

The TSTI Quality Evaluation Form is a leading indicator used at Brieser Construction to ensure a consistent delivery of information across the company that is needed to complete each task while achieving the lowest possible risk of injury.

## **Working Alone**



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In some circumstances, it may become necessary to assign a Brieser employee a task that will be performed alone. One instance would be the need to have an employee fuel generators used to power portable heaters to keep freshly poured concrete within customer specification. All situations cannot be identified therefore it is Brieser's policy that the Brieser TSTI or equivalent job hazard analysis shall address hazards and identify control measures to minimize risk associated with working alone. This jobsite analysis shall be reviewed with the V.P. of Operations before any employee can Work Alone.

If permission is granted the following rules shall be followed and noted on the TSTI;

- Workers must carry a cellular phone or electronic monitoring device always while working alone?
- A check-in/check-out process where employees are monitored or contacted at regular intervals will be identified
- The TSTI must address an individual or job title responsible for check-in with the lone employee at regular intervals. The program must address a backup form of communication in the event primary correspondence is unavailable as well as documentation including employee status at the check in intervals.
- The TSTI must specify procedures for emergency response including provisions for contacting appropriate local officials. The TSTI shall identify specific criteria to determine when an employee search is necessary.

## **Training**

All Brieser employees receive training in the hazard identification & correction process via the TSTI worksheet and continuing education in the field through auditing and use of the TSTI evaluation form located within this policy. All safety equipment including the use and care of proper PPE are covered via the Brieser Equipment Training located online at [www.brieserconstruction.com](http://www.brieserconstruction.com).

## **Incidents**

### ***Minor Incidents***

If an employee is involved in a personal injury or occupational health incident that results in minor injuries or illnesses, a Brieser Construction Co. Supervisor shall assure that effective first aid or medical treatment is provided. Under no circumstances is a person to administer first aid or any other emergency care without proper training such as certified by Red Cross or equivalent. Notify Safety Manager after first aid or medical treatment is provided, the

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Supervisor's Incident Investigation Report must be completed and delivered to the Safety Manager's office the day of the incident.

### ***Serious Incidents***

After the employee has been provided with urgent medical care, the Supervisor must contact Bill Petersen, Safety Manager to assure that all necessary personnel are properly notified. The next step is to complete the Supervisor's Incident Investigation Report completely. The form must be delivered to the Safety Manager's office on the day of the incident. It is essential that the Supervisor's Incident Investigation Report be completed accurately with all of the information that is requested.

### ***Property/Equipment Damage or Vehicle Incident***

Initiate steps to bring incident under control. If incident occurs at an industrial site request the emergency services response team from the host company. If incident occurs at other locations, call for necessary emergency services. Take necessary steps to prevent additional damage to property or equipment. Follow the same reporting and investigation protocol as outlined in this policy for a Serious Incidents. The next step is to complete the Supervisor's Property/Equipment Incident Report completely. The form must be delivered to the Safety Manager's office on the day of the incident. It is essential that the Supervisor's Incident Investigation Report be completed accurately with all of the information that is requested.

### ***Near Miss Reporting***

A **near miss** is an unplanned event that did not result in injury, illness, or damage – but had the potential to do so. Most safety activities are reactive and not proactive. Many organizations wait for losses to occur before taking steps to prevent a recurrence. Near miss incidents often precede loss producing events but are largely ignored because nothing (no injury, damage or loss) happened. Employees are not enlightened to report these close calls as there has been no disruption or loss in the form of injuries or property damage. Thus, many opportunities to prevent the accidents that the organization has not yet had are lost. Recognizing and reporting near miss incidents can make a major difference to the safety of workers within organizations. In terms of human lives and property damage, near misses are cheaper, zero-cost learning tools for safety than actual injury or property loss.

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- An ideal near miss event reporting system includes both mandatory (for incidents with high loss potential) and voluntary, non-punitive reporting by witnesses. A key to any near miss report is the "lesson learned". Near miss reporters can describe what they observed of the beginning of the event, and the factors that prevented loss from occurring.
- The events that caused the near miss may be subjected to root cause analysis to identify the defect in the system that resulted in the error and factors that may either amplify or improve the result.
- To prevent the near miss from happening again, Brieser Construction must institute teamwork training, feedback on performance and a commitment to continued data collection and analysis, a process called continuous improvement.
- Near misses are smaller in scale, relatively simpler to analyze and easier to resolve. Thus, capturing near misses not only provides an inexpensive means of learning, but also has some equally beneficial spin offs.
- Captures sufficient data for statistical analysis; trending studies.
- Provides immense opportunity for "employee participation," a basic requirement for a successful EHS Program. This embodies principles of behavior shift, responsibility sharing, awareness, and incentives.
- One of the primary workplace problems Near Miss incident reporting attempts to solve directly or indirectly is to try to create an open culture whereby everyone shares and contributes in a responsible manner. Near-Miss reporting has been shown to increase employee relationships and encourage teamwork in creating a safer work environment.

Reporting and conducting complete incident investigations for near misses is encouraged. This will allow identification of root causes and preventive measures to avoid similar more serious future incidents. Complete the Supervisor's Incident Investigation Report completely or for simpler Near Misses (i.e. those that would not warrant an in depth investigation and is assigned to a Middle Manager of Brieser Construction) simply fill out the Near Miss Incident Alert Worksheet and turn into the office.

#### Filling out the Near Miss Alert Worksheet

This worksheet will be the responsibility of a Brieser Middle Manager, preferably where the Near Miss occurred. If a Middle Manager is not responsible for a site that the Near Miss is reported, then an alternate will be assigned by the V.P. of Operations to complete this form.

Fill out the top of the form with the information asked.

1. Describe where the Near Miss took place, include the date and time. Explain what happened and explain the possible injuries that could have resulted if this were not a Near Miss but rather an incident. Make-up a mock injury of sorts.

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2. Obtain permission from your customer and take digital photos of the scene to help explain to others within the organization what exactly happened. Number the pictures and explain what we are seeing in each photo.
3. Lessons learned: What went right? Obtain all safety documentation such as; vehicle inspections, JSA's, TSTI or any of the specialized permits Brieser uses. Examine these documents and determine what was done according to our safety paperwork. This could be the use of correct PPE as stated on the TSTI or that an Excavation permit was filled out properly satisfying all expectations listed. This section should explain what the individual(s) did right according to our established policy and procedures.
4. Lessons learned: Facts? This section should list only the facts of the Near Miss. What we know for sure should be listed here. A piece of equipment broke or a procedure or policy was not followed.
5. Lessons learned: What can we do to improve? This section should address any safety and health system that broke down or suggest a new system be put into place. This could be:
  - a. Engineering Controls-The first and best strategy is to control the hazard at its source. Engineering controls do this, unlike other controls that generally focus on the employee exposed to the hazard. The basic concept behind engineering controls is that, to the extent feasible, the work environment and the job itself should be designed to eliminate hazards or reduce exposure to hazards.

Engineering controls can be simple in some cases. They are based on the following principles:

- i. If feasible, design the facility, equipment, or process to remove the hazard or substitute something that is not hazardous.
- ii. If removal is not feasible, enclose the hazard to prevent exposure in normal operations.
- iii. Where complete enclosure is not feasible, establish barriers or local ventilation to reduce exposure to the hazard in normal operations.
- b. Work Practice Controls-Safe work practices include Brieser Construction's general workplace rules and other operation-specific rules. This will include policy from the safety manual, TSTI, permits, site specific safety plans or JSA's. Determine if our current work practice adequately protect people and the environment for the particular task our are investigating
- c. Administrative Controls-These measures include training, additional relief workers, exercise breaks and rotation of workers.
- d. Personal Protective Equipment-When exposure to hazards cannot be engineered completely out of normal operations or maintenance work, and when safe work practices and other forms of administrative controls cannot provide sufficient additional protection, a supplementary method of control is the use of protective clothing or equipment. This is collectively called personal protective equipment,

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or PPE. PPE may also be appropriate for controlling hazards while engineering and work practice controls are being installed. Determine if the PPE involved in the Near Miss was defective, properly selected for the given task or perhaps maintenance of the PPE was misused.

### **Incident Investigation**

Incident investigation must be fact finding, not fault finding. The purpose is to learn the true cause of the incident so that similar incidents can be prevented and to determine facts bearing on legal liability. Another purpose of the investigation or fact finding is to prepare accurate documentation in case of possible litigation. Incident investigation must be initiated as promptly as possible, following the incident and corrective actions shall be documented and maintained for 5 years. Personnel must be trained in their roles and responsibilities for incident response and incident investigation techniques. All personnel involved in incident response must be trained in First Aid/CPR. Brieser Construction will supply the incident team with all the necessary equipment to complete a throughout investigation. Equipment may include the following items; pens/paper, tape measures/rulers, cameras, small tools, PPE and this section of the safety manual.

#### **KEY POINTS TO REMEMBER**

- 1) Get medical attention for all injured parties and notify the Safety Manager immediately.
- 2) Protect the scene's physical evidence.
- 3) Remove all damaged or faulty equipment or materials and preserve for further investigation.
- 4) Take photographs or videos of incident scene and mark them noting the date, area, description and name of person taking the photo. **NOTE:** No photographs shall be released to any third party, insurance company, vendor, lawyer, subcontractor, or owner without authorization of the Brieser Construction Co. legal counsel.
- 5) Obtain the names, addresses, and phone numbers of all witnesses.
- 6) Keep the press and news media as far away from the incident scene as possible.
- 7) No Employee shall make any statements to the media.
- 8) The **ONLY** person to make a statement for Brieser Construction Company shall be the President.
- 9) Submit all investigation reports to the Safety Manager the day of the incident.
- 10) Thorough, complete and careful investigation of the incident and preparation of the report will reduce the time needed for further investigation and reduce the probability of a similar incident in the future.

### **Routine Transport of employees to the Occupational Health and Medical Facility- Physicians Immediate Care**

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- ✓ The directions to the medical clinic must be posted at the trailer or readily available for all employees to see.
- ✓ A Company vehicle will be used as first aid transportation from the plant to the doctor's office, clinic or hospital. All employees are treated at the Occupational Health and Medical Facility unless it is life or limb threatening.
- ✓ Employees are not permitted to leave the jobsite without the Safety Manager's approval or to provide their own transportation for the initial visit to the doctor for a job-related injury.

### **Emergency Transportation**

The following guidelines are to be followed for emergency transportation:

- 1) Supervision within Brieser Construction Co. will decide what type of transportation will be used. If medical attention is necessary during transport, an ambulance will be used. If there is any doubt, an ambulance will always be the first choice. The ambulance phone number is posted at the jobsite or call 911.
- 2) The hospital emergency room or the clinic will be notified when the transportation vehicle leaves the plant. All available information regarding the nature and extent of the injury or illness should be given to the emergency room staff.
- 3) The injured employee will be accompanied by their Supervisor or designee as directed by our Safety Manager when being transported to a clinic or hospital (non-ambulance).
- 4) The injured employee's nearest relative must be notified by the Safety Manager or designee after first aid has been rendered and he/she is on their way to the hospital.

### **Medical Protocol Procedure**

- 1) Contact: Safety Manager at our office at (815) 521-0900. Workers' Compensation requires prior approval for benefits to be assigned. The Safety Manager must be notified of any employee alleging injury or illness.
- 2) Billing must be directed to our office attention Safety Manager.
- 3) All appointments must be followed by a phone contact with Safety Manager regarding medical updates, scheduled treatment, the choice of provider of treatment, possible graded return to work (prior to full release), copies of job functional capacity evaluations, and any missed appointments.
- 4) When an employee returns from the physician, hospital, or clinic, he/she must present a medical release to return to work.
- 5) Our primary medical provider has been contacted directly by the Director of Safety at Brieser Construction. An in person is arranged and the provider is given the details of this section, including Return to Work and OSHA recordkeeping rules. Other providers that are out of our local area are scrutinized by our WC Insurance broker who provides Brieser with a website to locate a preferred provider close to the jobsite.

<b>BRIESER CONSTRUCTION GENERAL CONTRACTORS</b>		DATE:	PROCEDURE:
		10-31-17	TBD
<b>CORPORATE SAFETY, HEALTH &amp; ENVIRONMENTAL MANUAL</b>		Revision:	PAGE:
		15	15
STANDARD OPERATING PROCEDURE:		<b>Job Hazard Analysis &amp; Incident Reporting</b>	
CROSS REFERENCE:	<b>OSHA Publication 3071 Job Hazard Analysis 2002 (revised) 29 CFR 1904 Reporting fatalities, hospitalizations, amputations, and losses of an eye because of work-related incidents to OSHA.</b>		

### **Graded return to work**

- ✓ Brieser Construction Company has written Job Descriptions for all positions. A functional capacity evaluation is on file for each job description.
- ✓ Graded increases in the return-to-work program are a routine aspect of all return-to-work cases.
- ✓ Brieser Safety Department ensures that modified work being offered is consistent with the medical restrictions listed by the health care provider. Workers must ensure that changes in the scope of the modified work must adhere to the medical restrictions. Modified work is temporary and should be managed with a goal to return the individual to full time work as soon as deemed medically fit.
- ✓ Modified work will be offered, wherever possible, to employees who are unable to return to their regular duties following a workplace injury or illness. The benefits of offering modified duty include, but are not limited to, reduced Workers Compensation costs, improved employee retention, enhanced employee morale, reduction in lost time days, and a strengthening of the company's relationship with its employees.
- ✓ Employees are informed of Brieser's Return to Work by communicating the company policy via a safety meeting or toolbox talk, reviewing the policy as part of the new employee orientation, and/or posting the policy in a conspicuous location at our jobsite trailers
- ✓ Supervisors are made aware of the restrictions to ensure the modified work meets the physician's orders.

### **Home & Other off the job injuries:**

In the case of a home or other off-the-job injury, the employer may send an employee to be evaluated prior to his return to work.

### **Reporting of non-referred medical treatment**

Employees who obtain medical treatment for alleged work-related injuries without being referred by the Brieser Construction Co. Safety Manager should be aware that this MAY RESULT IN THE DENIAL of any claim for Worker's Compensation benefits and may be cause for discharge.

<b>BRIESER CONSTRUCTION GENERAL CONTRACTORS</b>		DATE:	PROCEDURE:
		10-31-17	TBD
<b>CORPORATE SAFETY, HEALTH &amp; ENVIRONMENTAL MANUAL</b>		Revision:	PAGE:
		15	16
STANDARD OPERATING PROCEDURE:		<b>Job Hazard Analysis &amp; Incident Reporting</b>	
CROSS REFERENCE:	<b>OSHA Publication 3071 Job Hazard Analysis 2002 (revised) 29 CFR 1904 Reporting fatalities, hospitalizations, amputations, and losses of an eye because of work-related incidents to OSHA.</b>		

## **First Aid Equipment & Supplies**

Every Brieser Construction Co. facility, truck and job site will be equipped with a first aid kit. The Facilities and Equipment Manager shall check contents of First Aid Kit before putting into service. The Job Foreman shall check each First Aid Kit weekly and ensure expended items are replaced. The size and the contents of the first aid kit will be determined by Brieser Construction Co. Other medical and first aid supplies will be ordered as necessary for the employees' safety. Personnel of Brieser Construction Co. do not dispense medication. The first aid kit will be in a weatherproof container with individual sealed packages for each type of item and equipped with the following items as a minimum:

- Band aids - 3/4" and 1"
- Gauze - 1" and 2"
- Sterile pads - 3" x 3" or 4" x 4"
- Eye wash
- Antiseptic wipes or cleansing towelettes
- Scissors
- Adhesive tape - 1"
- Gauze bandages - 1"
- Bandage compress - 4"
- Instant cold packs
- Breathing barrier
- Rubber gloves
- Bio Hazard Bag
- Large triangular bandages



**BRIESER CONSTRUCTION CO.  
SUPERVISORS PROPERTY/EQUIPMENT INCIDENT REPORT**

<b>EMPLOYEE NAME:</b> _____	<b>DATE OF HIRE</b> _____
<b>PAYROLL #:</b> _____	<b>TRADE:</b> _____
<b>CLAIM NUMBER:</b> _____	
<b>DATE OF LOSS:</b> _____	<b>DATE NOTIFIED:</b> _____
<b>TIME OF LOSS:</b> _____	<b>A.M./P.M.</b> _____
<b>INCIDENT LOCATION:</b> _____	
<b>DESCRIPTION OF INCIDENT:</b> _____	
<b>DESCRIPTION OF INJURY:</b> _____	
<b>CLAIMANT VEHICLE YEAR:</b> _____	<b>MAKE:</b> _____ <b>MODEL:</b> _____
<b>COMPANY VEHICLE YEAR:</b> _____	<b>MAKE:</b> _____ <b>MODEL:</b> _____

**WITNESS:**

<b>1.</b> _____ <b>Name</b> _____ _____ <b>Address</b> _____ <b>Telephone</b> _____	<b>2.</b> _____ <b>Name</b> _____ _____ <b>Address</b> _____ <b>Telephone</b> _____	<b>3.</b> _____ <b>Name</b> _____ _____ <b>Address</b> _____ <b>Telephone</b> _____
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**INCIDENT TYPE:**

\_\_\_\_\_ **HEAD ON, TURNING, SIDESWIPE, REAR END, BACKING, OVERHEAD, STATIONARY, INTERSECTION, PEDESTRIAN, OVERTURN, OTHER.**

**INCIDENT CAUSE:**

\_\_\_\_\_ **FOLLOWING TO CLOSE, SPEED, TOO FAST FOR CONDITIONS, IMPROPER/TURNING, BACKING, PASSING, TRAFFIC LANE, PARKING, MISJUDGED CLEARANCE, UNSAFE LOADING/UNLOADING, NO UNSAFE ACT, OTHER.**

**PREVENTABLE:**

\_\_\_\_\_ **YES/NO, ALLEGED, NO EMPLOYEE INVOLVED, WAITING FOR REVIEW.**

**INCIDENT SITE:**

\_\_\_\_\_ **COMMERCIAL, RESIDENTIAL, INDUSTRIAL, EXPRESSWAY, PARKING LOT**

**LIGHTING CONDITIONS:**

\_\_\_\_\_ **DAWN/DUSK, DAYLIGHT, DARK/NO LIGHT OR ARTIFICIAL, N/A, UNKNOWN**

**BRIESER CONSTRUCTION CO.  
SUPERVISORS PROPERTY/EQUIPMENT INCIDENT REPORT**

**WEATHER CONDITIONS:**

\_\_\_\_\_ CLEAR, RAINING, SNOWING, SLEETING, FOG, OTHER, N/A, UNKNOWN.

**CORRECTIVE ACTION TO BE TAKEN TO PREVENT RECURRENCE:**

\_\_\_\_\_ DOCUMENTED VERBAL INSTRUCTION, RETRAIN, DISCIPLINE,  
TERMINATION, OTHER, NONE

**DID EQUIPMENT MALFUNCTION?** \_\_\_\_\_ **YES** \_\_\_\_\_ **NO; IF YES, DESCRIBE:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DESCRIBE DAMAGE TO EQUIPMENT OR PROPERTY:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EMPLOYEE STATEMENT:**

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**SUPERVISOR'S STATEMENT:**

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**FOLLOW-UP ACTION:**

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\_\_\_\_\_

\_\_\_\_\_  
**SUPERVISOR'S SIGNATURE AND DATE**

**BRIESER CONSTRUCTION CO.  
WITNESS/INJURED INCIDENT REPORT**

**This form must be completed in full and sent to the *Safety* Manager within 24 hours of injury. This report must be signed by the Foreman and Superintendent.**

Brieser Construction Company is vitally interested in the health and safety of all employees. We, therefore, request your assistance in completing this report to help us prevent future incidents to yourself or your fellow employees.

Name of Injured Person: \_\_\_\_\_

Date of INCIDENT: \_\_\_\_\_ Hour: \_\_\_\_\_

Witness: \_\_\_\_\_ Job Title: \_\_\_\_\_

Department: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Describe fully, in your own words, how the INCIDENT happened:

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Recommendations (to avoid a recurrence)

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\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Witness/Injured Signature)

**BRIESER CONSTRUCTION CO.  
SUPERVISORS INCIDENT/INJURY INVESTIGATION REPORT**

<b>EMPLOYEE NAME:</b> _____	<b>DATE OF HIRE:</b> _____	
<b>PAYROLL #:</b> _____	<b>TRADE:</b> _____	
<b>CLAIM NUMBER:</b> _____		
<b>DATE OF INCIDENT:</b> _____	<b>DATE NOTIFIED:</b> _____	
<b>TIME OF INCIDENT:</b> _____	<b>A.M./P.M.</b> _____	
<b>INCIDENT LOCATION:</b> _____		
<b>DESCRIPTION OF INCIDENT:</b>		
<b>TYPE OF INCIDENT:</b>		
<input type="checkbox"/> NEAR MISS <input type="checkbox"/> FIRST AID <input type="checkbox"/> INCIDENT ONLY <input type="checkbox"/> RECORDABLE <input type="checkbox"/> LOST TIME <input type="checkbox"/> ENVIRONMENTAL		
<b>TIME LOST:</b>	<b>ESTIMATED</b>	<b>ACTUAL</b>
<b>RESTRICTED:</b>	<b>ESTIMATED</b>	<b>ACTUAL</b>

WITNESS: PLEASE FILL OUT *WITNESS/INJURED REPORT*

1. _____ Name _____ _____ _____ Address _____ Telephone	2. _____ Name _____ _____ _____ Address _____ Telephone	3. _____ Name _____ _____ _____ Address _____ Telephone
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**INCIDENT TYPE:**

\_\_\_\_\_ FALL SAME/DIFFERENT LEVEL, STRUCK AGAINST/BY, OVEREXERTION,  
 \_\_\_\_\_ CAUGHT BETWEEN, INHALATION, VEHICLE, ELECTRICAL, SLIP/TRIP, OTHER.

**INCIDENT CAUSE:**

\_\_\_\_\_

\_\_\_\_\_

**NATURE OF INCIDENT:**

\_\_\_\_\_ SPRAIN/STRAIN, CONTUSION, BURN, DISLOCATION, FRACTURE, HEART  
 \_\_\_\_\_ ATTACK, HEARING LOSS, CUMULATIVE DISORDER, AMPUTATION  
 \_\_\_\_\_ DERMATITIS, OTHER.

**BODY PART EFFECTED:**

\_\_\_\_\_ HEAD, FACE, EYES, EARS, NECK, SHOULDER, ARM, ELBOW, HAND WRIST,  
 \_\_\_\_\_ FINGER, BACK, CHEST, HIPS, LEGS, KNEE, ANKLE, FOOT, TOES, MULTIPLE  
 \_\_\_\_\_ BODY PARTS, INTERNAL ORGAN.

**UNSAFE CONDITION? EXPLAIN:**

\_\_\_\_\_

\_\_\_\_\_

**UNSAFE ACT? EXPLAIN:**

**BRIESER CONSTRUCTION CO.  
SUPERVISORS INCIDENT/INJURY INVESTIGATION REPORT**

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**PREVENTABLE:**

\_\_\_\_\_ YES/NO, ALLEGED, NO EMPLOYEE INVOLVED, WAITING FOR REVIEW

**WAS PERSONAL PROTECTIVE EQUIPMENT APPLICABLE:**

\_\_\_\_\_ YES/NO, EXPLAIN: \_\_\_\_\_

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**LIGHTING CONDITIONS:**

\_\_\_\_\_ DAWN/DUSK, DAYLIGHT, DARK/NO LIGHT OR ARTIFICIAL, N/A, UNKNOWN

**WEATHER CONDITIONS:**

\_\_\_\_\_ CLEAR RAINING, SNOWING, SLEETING, FOG, OTHER, N/A, UNKNOWN

**CORRECTIVE ACTION TO BE TAKEN TO PREVENT RECURRENCE:**

\_\_\_\_\_ DOCUMENTED VERBAL INSTRUCTION, RETRAIN, DISCIPLINE, TERMINATION  
\_\_\_\_\_ NONE, OTHER

**EMPLOYEE STATEMENT:**

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**SUPERVISOR'S STATEMENT:**

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**FOLLOW-UP ACTION:**

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**SUPERVISOR'S SIGNATURE AND DATE**

**BRIESER CONSTRUCTION CO.  
PHOTO MOUNTING SHEET**

**Claim Number:** \_\_\_\_\_  
**Date of Occurrence:** \_\_\_\_\_



Date Taken: \_\_\_\_\_  
By: \_\_\_\_\_  
Description: \_\_\_\_\_

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Date Taken: \_\_\_\_\_  
By: \_\_\_\_\_  
Description: \_\_\_\_\_

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**BRIESER CONSTRUCTION CO.  
PHOTO MOUNTING SHEET**

**Claim Number:** \_\_\_\_\_  
**Date of Occurrence:** \_\_\_\_\_



Date Taken: \_\_\_\_\_

By: \_\_\_\_\_

Description: \_\_\_\_\_

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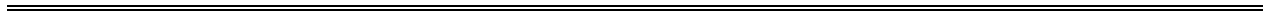
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Date Taken: \_\_\_\_\_

By: \_\_\_\_\_

Description: \_\_\_\_\_

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## **BRIESER CONSTRUCTION CO. FIRST AID TREATMENT EXAMPLES**

- Using a non-prescription medication at nonprescription strength (for medications available in both prescription and non-prescription form, a recommendation by a physician or other licensed health care professional to use a non-prescription medication at prescription strength is considered medical treatment for recordkeeping purposes);
- Administering tetanus immunizations (other immunizations, such as Hepatitis B vaccine or rabies vaccine, are considered medical treatment);
- Cleaning, flushing or soaking wounds on the surface of the skin;
- Using wound coverings such as bandages, Band-Aids™, gauze pads, etc.; or using butterfly bandages or Steri-Strips™ (other wound closing devices such as sutures, staples, etc., are considered medical treatment);
- Using hot or cold therapy;
- Using any non-rigid means of support, such as elastic bandages, wraps, non-rigid back belts, etc. (devices with rigid stays or other systems designed to immobilize parts of the body are considered medical treatment for recordkeeping purposes);
- Using temporary immobilization devices while transporting an INCIDENT victim (*e.g.*, splints, slings, neck collars, back boards, etc.);
- Drilling of a fingernail or toenail to relieve pressure, or draining fluid from a blister;
- Using eye patches;
- Removing foreign bodies from the eye using only irrigation or a cotton swab;
- Removing splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs or other simple means;
- Using finger guards;
- Using massages (physical therapy or chiropractic treatment are considered medical treatment for recordkeeping purposes); or
- Drinking fluids for relief of heat stress.

**ANY TREATMENT BEYOND THIS FIRST AID LIST WOULD BE CONSIDERED MEDICAL TREATMENT AND MAY LEAD TO OSHA RECORDABILITY AND/OR RESTRICTED OR LOST TIME.**



### TSTI Quality Evaluation Form

Activity	1	2	3	4	5	Rating	Weight	Score
<b>Task Assignment</b>	Crew Assigned to a location <b>without</b> pre-discussion on task	Vague, difficult to clearly identify task or exact location	Clear, but not reviewed with all crew members	Clear review with all crew members	Clear review with all crew members, tested <b>for understanding</b>		1	0
<b>Information Availability</b>	Conducted or started <b>without</b> all required information				All required info avail. - Permit, dwgs., etc.		1	0
<b>Location</b>	Discussion outside of work location <b>without</b> pre inspection			Discussion outside of work location <b>with</b> pre inspection	Discussion <b>at</b> the work location <b>with</b> pre inspection of area		1	0
<b>Interactive Discussion</b>	Discussion without all crew members present - One person writing, others missing or engaged elsewhere	Discussion with <b>most</b> crew members present	<b>All</b> crew members present, <b>no</b> group discussion	<b>Most</b> crew members present, <b>with</b> group discussion	<b>All</b> crew members present, <b>with</b> a good, interactive group discussion		2	0
<b>Hazard Identification</b>	Generic items only: - PPE - Slips & falls - Weather - Pinch points	Generalized discussion related to work activities		<b>Good</b> hazard ID with interactive discussion - What could go wrong related to work steps	<b>Excellent</b> hazard ID w/ interactive discussion - What could go wrong related to work steps - Other trade impacts - Operations impacts - Worse case scenario		5	0
<b>Documented Risks</b>	Mostly generic: 4 Gas/ Monitor/Toxics - PPE - Slips & Falls - Pinch points			Somewhat generic but some distinct hazards included	<b>Specific</b> hazards clearly identified and <b>documented</b> . - "What if" - "Worst case" - "If this happens"		5	0
<b>Documented Controls</b>	Some attempt to document risk control. - Wear H2S monitor - Watch footing - Watch pinch points - Wear PPE			Somewhat generic but some distinct controls documented	Clear " <b>instructional</b> " controls documented which could include "stop and reevaluate"		5	0
							<b>Score:</b>	<b>0</b>

Evaluator: \_\_\_\_\_

Date: \_\_\_\_\_

Team Evaluated: \_\_\_\_\_

Company: \_\_\_\_\_

Comments: \_\_\_\_\_

<b>Job Locations</b>	<input type="checkbox"/> Exelon-Dresden	<input type="checkbox"/> Midwest Generation	<input type="checkbox"/> Caterpillar-Joliet	<input type="checkbox"/> Exxon Pipeline
	<input type="checkbox"/> Stepan Chemical	<input type="checkbox"/> Lyondell Chemical	<input type="checkbox"/> Aux Sable	<input type="checkbox"/> BP Pipeline
	<input type="checkbox"/> Other _____			

Scan: Safety/TSTI Quality Eval Form

Task								
Project			Location				Date	
<b>Emergency Information</b>							Date	
Evacuation Route			Alarm				Date	
Assembly Area			Tornado Shelter				Date	
Nearest Fire Ext.			Nearest Eye Wash				Date	

**Task Hazard Checklist**

All items must be checked Yes or No. If Yes the hazard must be noted on JSA on back page. Item with an asterisk (\*) need additional permitting

**Pre-Task Preparation**

Personal Protective Equipment		Surrounding Work Area Hazard		Inspection	
Yes - No	Gloves	Yes - No	Poor Weather	Yes - No	Right tool for the job
Yes - No	DbI Hearing Protect	Yes - No	Overhead Electrical	Yes - No	Electrical Cords
Yes - No	Filtered Lens	Yes - No	Underground utilities	Yes - No	GFCI
Yes - No	Face Shield	Yes - No	Heat/Cold Stresses	Yes - No	Ladders
Yes - No	DbI Mtrx Face Shield	Yes - No	Hot/Cold Objects	Yes - No	Power tools
Yes - No	Rubber Boots	Yes - No	Low Lighting	Yes - No	Hand Tools
Yes - No	Toe Clips	Yes - No	High Noise*	Yes - No	Mechanical Equip.
Yes - No	Fall Protection*	Yes - No	Sharp Objects	Yes - No	Rigging*
Yes - No	Per. Monitor	Yes - No	Overhead Work*	Yes - No	Self Check -PPE
Yes - No	Safety Vest	Yes - No	Heavy Traffic*	Yes - No	Fuel Containers
Yes - No	FR Coveralls	Yes - No	Adjacent Work*	Yes - No	Work Truck
Yes - No	FR Sleeves/Jacket	Yes - No	Tight Spaces	Yes - No	Specialized Permits
Yes - No		Yes - No		Yes - No	Barricades
				Yes - No	Safety Mtg
				Yes - No	First Aid Kit/BBP
				Yes - No	Drinking Water
				Yes - No	Fire Extinguisher
				Yes - No	Fall Protection*
				Yes - No	Respirators*
				Yes - No	Scaffold*
				Yes - No	Excavations*
				Yes - No	Welding Equip.*
				Yes - No	MSDS Obtained
				Yes - No	Housekeeping

**Jobsite Hazard Analysis Checklist**

Specialized Permits		Physical Hazards			Chem/Ergonomic Hazards		
Yes - No	Lockout/Tagout	Yes - No	Line of Fire	Yes - No	Flying Particles	Yes - No	Toxic/Corrosive
Yes - No	Confined Spaces	Yes - No	Rotating Parts	Yes - No	Hazardous Energy	Yes - No	Excessive Dust
Yes - No	Excavations	Yes - No	Fall Potential*	Yes - No	Hand Tool Hazards	Yes - No	Chem. Reaction
Yes - No	Hot Work	Yes - No	Pinch Points	Yes - No	Power Tool Hazards*	Yes - No	Plants/Insects
Yes - No	Rigging/Lifting	Yes - No	Struck by/Crushed by	Yes - No	Sharp Objects	Yes - No	Vibration
Yes - No	PPE Matrix Review	Yes - No	Electrical	Yes - No	Holes,Pits,Shafts	Yes - No	Repetitive task
Yes - No	Fall Protection	Yes - No	Unguarded Machinery	Yes - No	Uneven Surfaces	Yes - No	Fumes
Yes - No	Respiratory Fit Test	Yes - No	Fire/Flammables	Yes - No	Radiation	Yes - No	Poor Posture
Yes - No	Sound Level Survey	Yes - No	Excessive Force	Yes - No	Lifting	Yes - No	Carcinogens
Yes - No	Scaffold						

**TSTI Quality Review**

Stand backs (circle)	MTWTFSS	Name (Print)	TSTI Review (circle)	MTWTFSS	Name (Print)
Yes - No	Sometime Before Break		Yes - No	Sometime Before Break	
Yes - No	Sometime After Break		Yes - No	Sometime After Break	
Yes - No	Sometime After Lunch		Yes - No	Sometime After Lunch	
Yes - No	Is the task assignment clear to all crew members?		Yes - No	Was this TSTI discussed at the task location?	
Yes - No	Are all permits attached to this TSTI?		Yes - No	All hazards identified understood by crew?	

**Review for next day**

Yes - No	Is this TSTI being used for consecutive days?	Yes - No	Have I added or subtracted hazards from JSA?
Yes - No	If above is YES have I reviewed and added date?	Yes - No	Did I discuss this TSTI with my crew
Yes - No Will I be performing activities such as creating concrete or wood dust, welding/cutting/grinding, High noise If yes to the above question please contact Safety to schedule personal monitoring.			

JSA - Job Safety Analysis										
Job Steps				Potential Hazards			Actions to Eliminate or Reduce the Hazard			
H	Operation not permissible	Risk Assessment Code →				<b>Severity Codes</b>				
S	High priority remedial action					Catastrophic-Death or total disability				
M	Take Action	<b>Probability</b>					Critical- Disability in excess of three months			
L	Acceptable	Frequent	Likely	Occasional	Seldom	Unlikely	Marginal - Minor injury, lost workday accident			
<b>S e v e r i t y</b>	Catastrophic	High	High	High	Serious	Medium	Negligible - First aid or minor medical treatment			
	Critical	High	High	Serious	Medium	Low	<b>Probability Codes</b>			
	Marginal	Serious	Serious	Medium	Medium	Low	Frequent- Likely to occur repeatedly			
	Negligible	Medium	Medium	Low	Low	Low	Likely- Likely to occur several times			
								Occasional- Likely to occur sometime		
							Seldom- Not likely to occur			
							Unlikely- May assume exposure will not happen			
I acknowledge receiving these instructions, understand the instructions and fully comply with the assigned job task.										
Employee Signature					Employee Signature					

<b>Near Miss Incident Alert Worksheet</b>		
<b>Date</b>		<b>Middle Manager Assigned to Manage this Near Miss</b>
<b>Site</b>		<b>Name:</b>
<b>EWGI</b>	<b>Contributors</b>	<b>Names:</b>

**Please refer to the Near Miss Reporting paragraph in Section 4 of the Brieser Safety Manual for an explanation of how to fill this report out.**

**1. Describe when and how the Near Miss happened.**


**2. Take pictures (email to: [bpetersen@brieserconstruction.com](mailto:bpetersen@brieserconstruction.com))**


**3. Lessons learned: What went right?**


<b>Near Miss Incident Alert Worksheet</b>		
<b>Date</b>		<b>Middle Manager Assigned to Manage this Near Miss</b>
<b>Site</b>		<b>Name:</b>
<b>EWGI</b>	<b>Contributors</b>	<b>Names:</b>


**4. Lessons Learned: Facts- list only the facts of the Near Miss. The contributing factors.**


**5. Lessons Learned: What can we do to improve?**


<b>ROUTING</b>	<b>SAFETY ADMINISTRATOR</b>	<b>Complete the <u>Brieser Incident Alert</u> and email to field</b>
	<b>SCAN</b>	<b>SAFETY/NEAR MISS REPORTING/MMDDYY:SITE:MIDDLE MANAGER</b>