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.
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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.
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 Director 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 Director

This person is responsible for:
• 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) Utilize the Near Loss/Loss report for all incidents.
2) Complete any additional reports or paperwork requested by the customer and route to the customer within 24 hours.
3) Conduct additional investigation and complete any additional investigation reports that may be needed including the “Incident Alert Report”
4) The Factor, Root Cause, Solutions (FRCS) is a document that will be prepared by the Brieser Safety Department after every incident. This document addresses the root cause and offers
lessons learned. It is then emailed to the entire workforce and is discussed at the job site as part of a morning toolbox talk.

5) 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.

6) Update Incident Review worksheet.

7) Follow up with the insurance company regarding the injured employee weekly.

8) Verify that the customer has all information needed.

9) Review Supervisor’s Incident Investigation Report and all other supplemental reports and completes the Illinois Form 45

10) If incident results in the loss of more than 3 days from work, send the Form 45 to the Illinois Industrial Commission

11) Send information to the insurance company with a copy to the agent

12) Set up individual incident report file

13) 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

14) 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.

15) 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 Director 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.
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 Director ASAP office (815) 521-0900; cell (630) 816-2283

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 Director 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 Director.
   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?
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.
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, Superintendent 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**
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.

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 Director after first aid or medical treatment is provided, the
Supervisor’s Incident Investigation Report must be completed and delivered to the Safety Director'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 Director 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 NEAR LOSS/LOSS 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 NEAR LOSS/LOSS Incident Report completely. The form must be delivered to the Safety Director's office on the day of the incident. It is essential that the NL/L 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.
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 NEAR LOSS/LOSS Report completely or for ALL Near Misses and turn into the office.

Filling out the Near Loss/Loss:

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.
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,
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 thorough 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 Director 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 Director 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**
✓ 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 Director'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 Director when being transported to a clinic or hospital (non-ambulance).
4) The injured employee's nearest relative must be notified by the Safety Director or designee after first aid has been rendered and he/she is on their way to the hospital.

Medical Protocol Procedure

1) Contact: Safety Director at (630) 816-2283. Workers' Compensation requires prior approval for benefits to be assigned. The Safety Director must be notified of any employee alleging injury or illness.
2) Billing must be directed to our office attention Safety Director.
3) All appointments must be followed by a phone contact with Safety Director 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.
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. The Safety Director should be aware that this MAY RESULT IN THE DENIAL of any claim for Worker's Compensation benefits and may be cause for discharge.
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
Administrative Information (Please complete all blanks)

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<tr>
<th>Title of Near Loss/Loss:</th>
<th>□ Near Loss or □ Loss</th>
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<td>First Line Supervisor:</td>
<td>Incident# (if known):</td>
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<td>☐ Brieser Employee</td>
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<td>☐ Operations ☐ Mechanical ☐ SSH&amp;E</td>
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<td>Shift (Crew)/Craft:</td>
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<td>Job Task related to the Near Loss / Loss (Select One)</td>
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<td>☐ Cleaning – Hydroblasting</td>
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<td>☐ Equip Start Up/Shutdown</td>
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Phase of Work

| ☐ Emergency Prep/Response |
| ☐ Maintenance |
| ☐ Normal Operations |
| ☐ Projects |
| ☐ Turnarounds |
| ☐ 3rd-Party truck delivery |

Equipment Type

| ☐ Electrical |
| ☐ Machinery |
| ☐ Mobile equipment |
| ☐ Other (______) |

Description: WHAT happened, HOW it happened, and WHEN and WHERE in the WORK SEQUENCE did it happen?

Potential Consequence: What is the WORST THING that COULD HAVE HAPPENED if no barriers/mitigations were in place?

Consider: Injury Severity (e.g. Death, Life-Altering, Minor), Process Safety, Fire, Environmental Release & Clean-Up, Product Quality, Reliability, etc.

What barriers/mitigations were successful in preventing a worse consequence from occurring?

What barriers/mitigations would have prevented this incident and/or a worse consequence from occurring?

Consider: PPE, Human Intervention, Alarms, Barricades, Procedures, etc.

Consider: PPE, Human Intervention, Alarms, Barricades, Procedures, etc.

First Line Supervisor Approval – Name and Date (required before entry into IMPACT)

Enter name of First Line Supervisor approving this INCIDENT FORM  Date Approved:

---

1. Submit completed NL/LI INCIDENT FORM to the Safety Department and the Second Line Supervisor (SLS).
2. FLS and SLS will agree on actual and potential severity of the incident.
3. If an investigation is required or requested, complete the Near-Loss / Loss INVESTIGATION FORM.
Near-Loss/Loss
INVESTIGATION FORM

Use this form to document the investigation findings and proposed actions to prevent a recurrence of the event.

Administrative Information (Please complete all blanks)

Title of Near Loss/Loss: ____________________________ Date of Near-Loss/Loss: ____________________________ Incident# (if known): ____________________________

Second Line Supervisor (Incident Owner): _______________________________________________________________

Gather the Facts

Documentation of facts (including procedures, standards, permits, drawings, diagrams, photos, data, records, correspondence, etc.) should be maintained by the investigation team.

Form the Investigation Team

Date the Investigation Team was assigned: ____________________________

<table>
<thead>
<tr>
<th>Name</th>
<th>Job Title</th>
<th>Investigation Team</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Describe the “equivalent of the Questionable Item(s)”

Determine the Factors, Root Causes and Solutions

1.) Write the “equivalent of the Questionable Item(s)” at the top the Root Cause Flow chart
2.) Complete the Flow chart by answering all 7 Factor questions with the appropriate people involved in the;  
a.) When answering No to Factors 1-4, the Root Cause(s) must explain why the “equivalent of a questionable item(s)” occurred,
   b.) When answering Yes to Factors 5-7, circle the Root Cause(s) given
3.) Write Solution(s) that addresses Root Cause(s) following the solution guidance given on the FRCS form

Transfer the Solution(s) from the Flow chart to the below Table.

<table>
<thead>
<tr>
<th>Factor #</th>
<th>Person Responsible for Solution*</th>
<th>Solution(s) <em>(COPY&amp;PASTE the solutions directly from the Root Cause Flow Chart)</em></th>
<th>Solution Due DATE</th>
<th>Solution Completed DATE</th>
<th>Verified &amp;Validated DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Person Responsible must be consulted and agree to the Solution and Due Date before adding name to form

First Line Supervisor Quality Check (required before Second Line Supervisor Approval)

Enter name of First Line Supervisor (FLS) (this may be the Investigation Team Leader) ____________________________ Date of FLS Quality Check: ____________________________

Second Line Supervisor Approval of Investigation

Enter name of Second Line Supervisor (SLS) approving this INVESTIGATION FORM ____________________________ Date of SLS Review/Approval: ____________________________

Results of First Line Supervisor Verification & Validation of Solutions:


1. Submit completed NL/L INCIDENT and INVESTIGATION to the office
QUALITY REVIEW (QR) FORM

<table>
<thead>
<tr>
<th>Quality Reviewer:</th>
<th>Date of Quality Review (QR):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title of Near Loss/Loss:</td>
<td>Date of Near Loss/Loss:</td>
</tr>
</tbody>
</table>

Provide written comments for each of the NL/LI questions below.

<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Complete and accurate Administrative Information?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comments (req’d):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Wrote thorough description of Near Loss/Loss?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comments (req’d):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Identified “equivalent of questionable item(s)” for Near Loss/Loss?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comments (req’d):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Used Root Cause flow chart properly and answered ALL 7 Factor questions?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comments (req’d):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Identified Root Cause(s) by:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a.) explaining why the “equivalent of a questionable item(s)” occurred when answering NO to Factors 1-4, and</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b.) Circled the Root Cause(s) given when answering YES to Factors 5-7.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comments (req’d):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Solution narrative(s) addressed root cause(s) (i.e., specific action items, due dates, person responsible, etc.)?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comments (req’d):</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Quality Review Guidance: Conducting Quality Reviews is a critical stewardship activity to improve effectiveness at all levels of the organization. Answer each question on this form as you read through the NL/LI. Upon completion of the NL/LI Quality Review Form, provide positive and constructive feedback to the FLS and investigation team via a face-to-face meeting or phone call to improve the quality of future NL/LI’s. Results from Quality Reviews should also be shared with the line chain of command to hold the line chain accountable for improvement.
## Verification & Validation (V&V)
### of NL/LI Protocol & Solutions Form

<table>
<thead>
<tr>
<th>Verification and Validation (V&amp;V) completed by:</th>
<th>Date of V&amp;V:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title of Loss/Near Loss:</td>
<td>Date of Loss/Near Loss:</td>
</tr>
</tbody>
</table>

Provide written comments for the NL/LI in ALL three boxes below.

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
</table>

1. **Was the solution(s) implemented?**
   - **Comments (req’d):**

2. **Was the solution(s) effective?**
   - **Comments (req’d):**

3. **Were NL/LI process and protocol steps followed?**
   - 1) **Notify Supervisor:** Did employee notify supervisor of event? Did supervisor provide proper notification of incident to internal organization and outside reporting agencies as appropriate?
   - 2) **Risk Assessment:** Did we conduct an LPSA?
   - 3) **Starting the Investigation:** Was the investigation initiated in a timely manner? or was it delayed for next shift to begin?
   - 4) **Fact Gathering:** Did Supervisor direct the fact-gathering phase? Did they review job procedures/guidelines governing the task? Did they walk through the task with the employees involved to identify the “equivalent of questionable item(s)”?
   - 5) **Investigation Team:** Did the supervisor use the fact-gathering phase to put together the investigation team? Were the job experts and process owners on the investigation team knowledgeable of the task involved?
   - 6) **Description:** Was the problem clearly defined in the description versus describing the symptoms? Did the team update the initial notification after the investigation?
   - 7) **FRCS**
     - 1. Did the team identify the “equivalent of questionable item(s)”?
     - 2. Did the team use the FRCS and go through all 7 factors?
     - 3. Were the appropriate employees taken through the Root Cause flowchart?
     - 4. Was the root cause(s) identified for Factors 1-4 & was the root cause(s) circled for Factors 5-7?
     - 5. Did the solution narrative(s) address root cause(s) (i.e., specific action items, due dates, person responsible, etc.)?
   - 8) **Quality Check/Review and Approval:** Did the supervisor quality check the final form before approving and/or did appropriate approvers sign off on solutions prior to implementation?
   - 9) **Communication:** Were the findings and solutions communicated to others in the area who perform the same job or task as appropriate?
   - 10) **Implementation of Solution(s):** Was the solution implemented for other work crews that perform the same job or task as appropriate?
   - 11) **Verification and Validation of Solution(s):** Did the supervisor V&V the solution(s) with the employees prior to closing out the NL/LI? Did the employee(s) agree that the solution(s) was implemented and validate that the solution(s) was effective?
1. Submit copy of comple
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-AidsTM, gauze pads, etc.; or using butterfly bandages or Steri-StripsTM (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

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

Evaluator: ___________________________ Date: ________________

Team Evaluated: __________________ Company: __________________

Comments: __________________________

---

Job Locations

- [ ] Exelon-Dresden
- [ ] Midwest Generation
- [ ] Caterpillar-Joliet
- [ ] Exxon Pipeline
- [ ] Lyondell Chemical
- [ ] BP Pipeline
- [ ] Step Chemical
- [ ] Other ____________________________

Scan: Safety/TSTI Quality Eval Form

---

Brieser Construction  Page 25 Section 4

Safety, Health & Environmental Manual

Job Hazard Analysis & Incident Reporting
<table>
<thead>
<tr>
<th>Task</th>
<th>Project</th>
<th>Location</th>
<th>Date</th>
</tr>
</thead>
</table>

### Emergency Information
- **Evacuation Route** 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

<table>
<thead>
<tr>
<th>Personal Protective Equipment</th>
<th>Surrounding Work Area Hazard</th>
<th>Inspection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes - No Glove</td>
<td>Yes - No Poor Weather</td>
<td>Yes - No</td>
</tr>
<tr>
<td>Yes - No Dbl Hearing Protect</td>
<td>Yes - No Overhead Electrical</td>
<td>Yes - No Electrical Cords</td>
</tr>
<tr>
<td>Yes - No Filtered Lens</td>
<td>Yes - No Underground utilities</td>
<td>Yes - No GFCI</td>
</tr>
<tr>
<td>Yes - No Face Shield</td>
<td>Yes - No Heat/Cold Stresses</td>
<td>Yes - No Ladders</td>
</tr>
<tr>
<td>Yes - No Dbl Mtrx Face Shield</td>
<td>Yes - No Hot/Cold Objects</td>
<td>Yes - No Power tools</td>
</tr>
<tr>
<td>Yes - No Rubber Boots</td>
<td>Yes - No Low Lighting</td>
<td>Yes - No Hand Tools</td>
</tr>
<tr>
<td>Yes - No Toe Clips</td>
<td>Yes - No High Noise*</td>
<td>Yes - No Mechanical Equip.</td>
</tr>
<tr>
<td>Yes - No Fall Protection*</td>
<td>Yes - No Sharp Objects</td>
<td>Yes - No Rigging*</td>
</tr>
<tr>
<td>Yes - No Per. Monitor</td>
<td>Yes - No Overhead Work*</td>
<td>Yes - No Self Check -PPE</td>
</tr>
<tr>
<td>Yes - No Safety Vest</td>
<td>Yes - No Heavy Traffic*</td>
<td>Yes - No Fuel Containers</td>
</tr>
<tr>
<td>Yes - No FR Coveralls</td>
<td>Yes - No Adjacent Work*</td>
<td>Yes - No Work Truck</td>
</tr>
<tr>
<td>Yes - No FR Sleeves/Jacket</td>
<td>Yes - No Tight Spaces</td>
<td>Yes - No Specialized Permits</td>
</tr>
</tbody>
</table>

#### Jobsite Hazard Analysis Checklist

<table>
<thead>
<tr>
<th>Specialized Permits</th>
<th>Physical Hazards</th>
<th>Chemical/other Hazards</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes - No Lockout/Tagout</td>
<td>Yes - No Line of Fire</td>
<td>Yes - No Flying Particles</td>
</tr>
<tr>
<td>Yes - No Confined Spaces</td>
<td>Yes - No Rotating Parts</td>
<td>Yes - No Hazardous Energy</td>
</tr>
<tr>
<td>Yes - No Excavations</td>
<td>Yes - No Fall Potential*</td>
<td>Yes - No Hand Tool Hazards</td>
</tr>
<tr>
<td>Yes - No Hot Work</td>
<td>Yes - No Pinch Points</td>
<td>Yes - No Power Tool Hazards</td>
</tr>
<tr>
<td>Yes - No Rigging/Lifting</td>
<td>Yes - No Struck by/ Crushed by</td>
<td>Yes - No Sharp Objects</td>
</tr>
<tr>
<td>Yes - No PPE Matrix Review</td>
<td>Yes - No Electrical</td>
<td>Yes - No Holes, Pits, Shafts</td>
</tr>
<tr>
<td>Yes - No Fall Protection</td>
<td>Yes - No Unguarded Machinery</td>
<td>Yes - No Uneven Surfaces</td>
</tr>
<tr>
<td>Yes - No Respiratory Fit Test</td>
<td>Yes - No Fire/ Flammables</td>
<td>Yes - No Radiation</td>
</tr>
<tr>
<td>Yes - No Sound Level Survey</td>
<td>Yes - No Excessive Force</td>
<td>Yes - No Lifting</td>
</tr>
<tr>
<td>Yes - No Scaffold</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### TSTI Quality Review

<table>
<thead>
<tr>
<th>Stand backs (circle)</th>
<th>M T W T F S S</th>
<th>Name (Print)</th>
<th>TSTI Review (circle)</th>
<th>M T W T F S S</th>
<th>Name (Print)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes - No Standing (circle)</td>
<td></td>
<td></td>
<td>Yes - No Sometimes Before Break</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes - No Standing (circle)</td>
<td></td>
<td></td>
<td>Yes - No Sometimes After Break</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes - No Standing (circle)</td>
<td></td>
<td></td>
<td>Yes - No Sometimes After Lunch</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes - No Standing (circle)</td>
<td></td>
<td></td>
<td>Yes - No Is the task assignment clear to all crew members?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes - No Standing (circle)</td>
<td></td>
<td></td>
<td>Yes - No Is this TSTI discussed at the task location?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes - No Standing (circle)</td>
<td></td>
<td></td>
<td>Yes - No Are all permits attached to this TSTI?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 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

<table>
<thead>
<tr>
<th>Job Steps</th>
<th>Potential Hazards</th>
<th>Actions to Eliminate or Reduce the Hazard</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Severity Codes</th>
<th>Probability Codes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Catastrophic</td>
<td>Frequent</td>
</tr>
<tr>
<td></td>
<td>Likely</td>
</tr>
<tr>
<td></td>
<td>Occasional</td>
</tr>
<tr>
<td></td>
<td>Seldom</td>
</tr>
<tr>
<td></td>
<td>Unlikely</td>
</tr>
</tbody>
</table>

| Critical                  | High              |
|                           | High              |
|                           | Serious           |
|                           | Medium            |
|                           | Low               |

| Marginal                  | Serious           |
|                           | Serious           |
|                           | Medium            |
|                           | Medium            |
|                           | Low               |

| Negligible                | Medium            |
|                           | Medium            |
|                           | Low               |
|                           | Low               |

- **Severity Codes**: Catastrophic-Death or total disability, Critical- Disability in excess of three months, Marginal - Minor injury, lost workday accident, Negligible - First aid or minor medical treatment
- **Probability Codes**: Frequent- Likely to occur repeatedly, 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
To determine root cause(s) of losses, near losses and questionable items & develop solutions to prevent recurrence, answer ALL of the following questions.

**Factor 1**
Is there adequate documentation explaining how to do this task? — if conscious decision not to have documentation, verify decision and continue to Factor 2.

**Factor 2**
If tools are needed for task, are they available, operable, safely maintained & is there proper workplace design?

**Factor 3**
Has your supervisor consistently told you to do this task, as well as ALL tasks, according to procedures or acceptable practices?

**Factor 4**
Are you familiar with task documentation & do you know how to do task according to documentation or acceptable practices?

Yes

No

Solution(s): Explain who will develop procedure, JLA, or SWP for this task (who writes, reviews, & approves, due date, etc.).

Solution(s): Explain specifically how tools will be made available, operable, safely maintained for task (who makes available, due date, etc.) and/or how workplace design will be made proper (who is responsible, due date, etc.).

Solution(s): Explain how FLS will consistently communicate face-to-face with person to do this task, as well as ALL tasks, according to procedures or acceptable practices.

Solution(s): Explain how person will be shown how to do task according to documentation or acceptable practices (who will show person, due date, etc.).

Why doesn't adequate documentation exist for this task? Identify root cause(s).

Why aren't tools available, operable, safely maintained and/or why isn't there proper workplace design? Identify root cause(s).

Why didn't this face-to-face communication occur consistently? Identify root cause(s).

Why doesn't person know how to do task according to documentation or acceptable practices? Identify root cause(s).

Continue to Factor 2.

Continue to Factor 3.

Continue to Factor 4.

Continue to Factor 5 on next pag