

# SUBJECT AREA CONTENT

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Management System: [Worker Safety and Health](#)

## Subject Area: Injury and Illness--Notification and Analysis

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Effective Date: <b>Sep 24, 2010</b> ( <a href="#">Rev 3.4</a> )	Subject Matter Expert:	Management System Executive:	Management System Steward:
Periodic Review Due: <b>Sep 24, 2015</b>	<a href="#">John Ellerkamp Jr</a>	<a href="#">Ed Nowak</a>	<a href="#">Gail Mattson</a>

### Introduction

This subject area describes the notification and analysis process for occupational injuries or illnesses.

All injuries or illnesses to workers (i.e., employees, contractors, guests or students) sustained while performing work in accordance with their jobs at BNL, regardless of how minor the injury or illness seems (including those that occur while the employee is on business travel) must be

- Reported to supervisor;
- Evaluated by medical personnel (e.g., BNL Occupational Medical Clinic or Fire/Rescue), prior to leaving the BNL site;
- Analyzed in accordance with this subject area.

All recordable injuries and first aid cases must be analyzed, regardless of severity. An analysis is expected to be conducted utilizing a graded approach, based on actual or potential severity, frequency of similar events, or value of lessons to be learned (see the section [Application of Graded Approach](#) in the [Graded Approach for Requirements](#) Subject Area for additional guidance). The Safety and Health Services Division (SHSD) can provide guidance on the depth/adequacy of an investigation.

**Note:** Construction contracts may specify certain exceptions to this process. However, the contractor is responsible for immediately notifying Laboratory project/safety personnel of all recordable injuries, and to conduct a thorough and timely accident investigation, determine the cause(s), and implement corrective and preventive measures. The Laboratory reserves the right to monitor all such investigations and causal analysis processes for all recordable injuries, and further reserves the right to conduct it's own analysis.

It is important that during the course of this process, to always keep in mind that the supervisor's primary responsibility is to the worker's welfare, and that the primary purpose of the analysis is to prevent recurrence. The owner of the Injury Illness Analysis Report is the supervisor.

For the purpose of this subject area:

- The term 'worker' includes employees, contractors, guests, and students.
- The term 'supervisor' refers to the worker's direct supervisor, or BNL project manager, as appropriate.

For assistance, contact the following

- Safety and Health Services Division (ext. 8800);

- ESH Coordinator.

## Contents

### Section

### Overview of Content (see section for full process)

#### [1. Discovering an Injury/Illness and Notifications](#)

- Report injuries or illnesses immediately to your supervisor and OMC.
- Seek medical attention at OMC or Fire-Rescue and do not leave site prior to notification.
- Communicate basic information related to incident.
- Report unusual situations to BNL's Legal Office or HR&OM Division.

#### [2. Preserving the Scene for the Analysis](#)

- Preserve evidence by securing the scene.

#### [3. Conducting an Analysis](#)

- Ensure the line supervisor is directly engaged.
- Assign a Lead Investigator to coordinate the analysis.
- Determine level of investigation/analysis needed.
- Interview injured worker and witnesses as soon as possible.
- Document the scene of injury/illness.
- Obtain all documentation pertinent to the injury or illness.
- Determine causality.
- Develop corrective actions and lessons learned as appropriate.
- Develop and distribute basic information via email.
- Complete and distribute the Injury/Illness Analysis Report.
- Develop a safety alert bulletin slide.
- Follow procedure for injuries/illnesses occurring during off-hours or on travel.

#### [Definitions](#)

#### **Exhibits**

#### [Injury/Illness Notification and Analysis \(On-site\) Flowchart](#)

#### **Forms**

None

## Training Requirements and Reporting Obligations

This subject area contains training requirements.

All SHSD Investigators and line organization lead investigators must have completed the following two courses that

are approved by the SHSD Safety Engineering Group Manager:

- ASSE Incident Investigation Training or DOE HSS SAF 230 Accident Investigation.
- Events and Causal Analysis Factors and Human Performance Improvement are part of both training courses.

ESH Coordinators, SHSD investigators, all supervisors, and those personnel assigned by their managers as lead investigators must complete the computer-based training program entitled "TO-NOTIFY-ILL".

Reporting obligations to DOE and other external agencies are addressed through the following means:

- Safety and Health Services Division (Safety Engineering Group) internal procedures;
- This subject area; and
- [Occurrence Reporting and Processing System \(ORPS\)](#) Subject Area.

## External/Internal Requirements

Requirement Number	Requirement Title
<a href="#">20 CFR Parts 1 and 30 (EEOICPA)</a>	Interim Final Rule Implementing the Energy Employees Occupational Illness Compensation Program Act (EEOICPA)
<a href="#">29 CFR 1904</a>	Labor/Recording and Reporting Occupational Injuries and Illnesses
<a href="#">29 CFR 1910</a>	Labor/Occupational Safety and Health Standards
<a href="#">29 CFR 1926</a>	Labor/Safety and Health Regulations for Construction
<a href="#">BSA Contract No. DE-AC02-98CH10886 - Clause H.26 (AL-2013-09, June 28, 2013)</a>	Workers Compensation Insurance
<a href="#">O 225.1B (Mar 4, 2011)</a>	Accident Investigations.
<a href="#">O 350.1 Change 3 - Chapter VII</a>	CRD - Contractor Human Resource Management Programs - Risk Management and Liability Programs
<a href="#">P 450.4A (Apr 25, 2011)</a>	Integrated Safety Management Policy

## References

DOE Order 231.1B Environment, Safety and Health Reporting, Contractor Requirement Document

29 CFR 1904 and OSHA Recordkeeping Manual, Section 1904

Public Law 91-596, OMB No. 1220-0045, BLS-9300-IDCF

[Emergency Preparedness](#) Subject Area

[Event/Issues Management](#) Subject Area

[Injury/Illness Analysis Program Area](#), [Safety Engineering Group](#) homepage, [Safety and Health Services](#) Web Site

[Lessons Learned](#) Subject Area

[Occurrence Reporting and Processing System \(ORPS\)](#) Subject Area

## Standards of Performance

All staff and guests shall share information based on experience (e.g., lessons learned) to promote continuous improvement in business and work practices.

All staff and guests shall carry out appropriate emergency responses and off-normal event follow-up activities.

All staff and guests shall promptly report accidents, injuries, ES&H deficiencies, emergencies, and off-normal events in accordance with procedures.

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## PROCEDURE: DISCOVERING AN INJURY/ILLNESS AND NOTIFICATIONS

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Management System: [Worker Safety and Health](#)

Subject Area: [Injury and Illness--Notification and Analysis](#)

### 1. Discovering an Injury/Illness and Notifications

Effective Date: **Sep 24, 2010**

Subject Matter Expert: [John Ellerkamp Jr](#)

Management System Executive: [Ed Nowak](#)

### Applicability

This information applies to BNL staff and non-BNL staff who discover that they or another individual have sustained an occupational injury or discover that they have an occupational illness, including after normal work hours or while on business travel.

Information is also provided for individuals involved in the notification process including Occupational Medical Clinic (OMC) staff, Fire Rescue, line supervisors, line managers, Environmental Safety and Health (ESH) Coordinators, and the Safety and Health Services Division (SHSD).

**Note:** Construction contracts may specify certain exceptions to this process. However, Laboratory project management/safety personnel must immediately be notified of all injuries by the contractor.

### Required Procedure

Workers who sustain an occupational injury or discover that they have an occupational illness, regardless of how minor the injury or illness seems at the time are to inform their supervisor and seek on site medical attention,

immediately.

<p><b>Step 1</b></p>	<p>If the event is perceived as an emergency, activate an appropriate alarm and/or call ext. 2222 or 911. Follow the procedure in the section <a href="#">Emergency Response - All Staff</a> in the <a href="#">Emergency Preparedness</a> Subject Area.</p> <p><b>Note:</b> The exhibit <a href="#">First Actions at Scene of Event</a> in the <a href="#">Event/Issues Management</a> Subject Area may be used as a checklist</p>
<p><b>Step 2</b></p>	<p>Report the injury/illness, regardless of how minor the injury or illness seems at the time, to your supervisor immediately (if supervisor is unavailable, report it to the next higher level of management), or to the ES&amp;H Coordinator who must notify the Department Chair/Division Manager and Associate/Assistant Laboratory Director (ALD), as appropriate.</p>
<p><b>Step 3</b></p>	<p>Seek medical attention at the Occupational Medicine Clinic (OMC) immediately*. If the OMC is closed, notify or proceed to Fire-Rescue (Building 599) for medical assistance. <b>Do not leave site without following this step.</b></p> <p>Workers on business travel are to inform their supervisor telephonically, seek medical attention at a local facility, as necessary, and report to the OMC immediately upon returning to BNL (see section <a href="#">3.3 Analysis of Injuries/Illnesses Occurring on Business Travel</a>).</p>
<p><b>Step 4</b></p>	<p>Perform subsequent communications as delineated in the <a href="#">Injury/Illness Notification and Analysis Flowchart</a>.</p> <p><b>First Day Communication:</b></p> <p>Line organization distributes an email message describing basic information related to the incident, incorporating the following parameters:</p> <ul style="list-style-type: none"> <li>• Input/peer review from SHSD OSHA Recordkeeper or designee (ensures consistent language is distributed, and incorporated into ORPS, and DOE injury management systems);</li> <li>• Distributed as soon as accurate information is available, but ideally, no later than the end of the workday or by noon of next workday.</li> <li>• Distribution (minimum) for             <ul style="list-style-type: none"> <li>◦ First Aid Incidents - Line management and ESH personnel, ORPS Categorizer, SHSD OSHA Recordkeeper, Safety Engineering Group Manager; SHSD Manager, SHSD Investigator, ALD for ES&amp;H.</li> <li>◦ Recordable/Non-ORPS Reportable - Those listed for First Aid incidents above, and ALD of affected worker, Laboratory Director and Deputy Directors.</li> <li>◦ ORPS Reportable - Depending on the detail of information included in the ORPS notification message, additional communication may not be necessary. The line organization and SHSD OSHA Recordkeeper may confer regarding the need for an additional message.</li> </ul> </li> </ul> <p><b>Note:</b> OMC or Fire Rescue (on off hours) is ultimately responsible for notifying the ORPS Categorizer (ext.1234, or cell phone at 631-433-0443) and Safety and Health Services Division (SHSD), or ensuring notification has been made.</p>
<p><b>Step 5</b></p>	<p>If the worker becomes aware of a work-related injury/illness after leaving work, they must attempt to contact the supervisor at that time and report to the OMC immediately upon arriving at BNL on their next scheduled workday.</p>

## Step 6

If the incident involves non-employees or members of the public and there is a reasonable basis for liability litigation, notify BNL's Legal Office (see the Potential for Litigation in the [Injury/Illness Analysis Program Area](#)).

The supervisor should consider notifying the Human Resources and Occupational Medicine Division if the analysis process reveals issues that could potentially involve disciplinary action.

See the Injury/Illness Analysis Tool (in the [Injury/Illness Analysis Program Area](#)) to assist in the analysis process.

## Guidelines

Managers have overall responsibility for coordinating the investigation and reporting requirements. Supervisors are responsible for the safety of their workers. This procedure should be performed by personnel with sufficient authority, training, and knowledge of reporting processes and requirements. Managers may have a standing committee, supervisor, or ESH Coordinator perform this procedure, or choose to use trained help from other organizations. Workers must be involved as much as possible to ensure their input into the corrective actions.

The manager may request the Assistant Laboratory Director for Environment, Safety and Health to appoint an independent committee or board to investigate and report in detail appropriate recommendations to the manager.

## References

[Emergency Preparedness](#) Subject Area

[Event/Issues Management](#) Subject Area

[Injury/Illness Analysis Program Area](#), [Safety Engineering Group](#) homepage, [Safety and Health Services](#) Web Site

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## PROCEDURE: PRESERVING THE SCENE FOR THE ANALYSIS

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Management System: [Worker Safety and Health](#)

**Subject Area: [Injury and Illness--Notification and Analysis](#)****2. Preserving the Scene for the Analysis**Effective Date: **Sep 24, 2010**Subject Matter Expert: [John Ellerkamp Jr](#)Management System Executive: [Ed Nowak](#)**Applicability**

This information applies to all employees, contractors, guests, and students at BNL.

**Required Procedure**

Not all scenes of injuries or illnesses will require that the scene be preserved. If you need assistance in making that determination, call the [Safety Engineering Subject Matter Expert \(SME\)](#).

However, you must preserve the accident scene and notify the [Safety Engineering SME](#) when the following occurs:

- An Incident Command post is established by Laboratory Protection for/at the scene;
- The injury/illness will require medical intervention;
- A required analysis will need to be performed to meet criteria established for the DOE Occurrence Reporting & Processing System [ORPS] and/or Computerized Accident/Incident Reporting System [CAIRS] (e.g., all electrical shocks; falls from heights);
- There is evidence that could be lost (moved, disturbed, evaporated, lose its value to an investigation, etc.) (e.g., the ladder involved in an incident was moved to a different location) prior to completing the analysis;
- Hazards remain that need to be mitigated to protect equipment, personnel, environment, or the public (e.g., gas escaping from frozen piping);
- Special barriers/controls and coordination with Laboratory Protection is necessary;
- There is a need to protect sensitive classified or unclassified controlled nuclear information material, or privacy information and related systems;
- Non-Emergency Response or non-investigative personnel have access to the area (general traffic or curious individuals with cameras or cell phones); or
- The investigator(s) have not yet arrived, or there is a need to leave area unattended.

The scene may also require investigation by a BNL Accident Investigation Committee (AIC), a DOE Accident Investigation Board (AIB), or involvement of other agencies, such as OSHA, National Transportation Safety Board, FBI, Suffolk County Police, etc. Access to such accident scenes must be absolutely controlled until the Agency Having Jurisdiction arrives and takes control of the scene.

**Step 1**

Individuals who are present at the time of an accident or injury must not contaminate the scene, remove, relocate, or clean anything until so directed by the Safety Engineering Group Manager, or designee, or the chair of an analysis team, who may either release the scene following the field portion of the analysis, or insist that it remain secured.

**Note:** Following any of the above listed conditions, contact Safety Engineering. They will make the decision on whether the scene must continue to be preserved. They will take over the authoritative control of the scene and either release it after evidence is collected, or require Laboratory Protection to continue to secure the scene for as long as it is deemed necessary. The scene and access to it will be officially controlled by the Safety Engineering Group Manager, or designee.

For all injuries and illnesses, concurrence from Safety Engineering is required to release any scene.

**Note:** The scene will be secured after the injured person(s) is removed from the scene. Investigators may enter once the scene is made safe (see the section [Application of the Graded Approach](#) in the [Graded](#)

	<a href="#">Approach for Requirements</a> Subject Area for additional guidance).
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<b>Step 2</b>	Individuals who have witnessed (or were present at the time of) an accident or injury must provide true and accurate information to the analysis team.
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## References

[Graded Approach for Requirements](#) Subject Area

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## PROCEDURE: CONDUCTING AN ANALYSIS

**Management System:** [Worker Safety and Health](#)

**Subject Area:** [Injury and Illness--Notification and Analysis](#)

### 3. Conducting an Analysis

Effective Date: **Sep 24, 2010**

Subject Matter Expert: [John Ellerkamp Jr](#)

Management System Executive: [Ed Nowak](#)

## Applicability

This information applies to individuals that may be involved in the analysis of an occupational injury/illness including workers, supervisors, project managers, ESH Coordinators, and ES&H Directorate professionals.

## Required Procedure

Conducting an Analysis contains three subsections:

[3.1 Analysis Process](#)

[3.2 Analysis of Injuries/Illnesses Occurring Off-Hours](#)

[3.3 Analysis of Injuries/Illnesses Occurring on Business Travel](#)

Line management is responsible for completion of a thorough and accurate analysis consistent with this subject area and other applicable institutional requirements. The line manager's signature on the analysis report confirms satisfaction with the analysis. Analysis of recordable events must involve collaboration between the line organization

and the ES&H directorate. Reports not meeting the acceptance criteria established in this subject area will be rejected by SHSD. A Report Rejection Form will be sent to the supervisor for re-work and re-submittal.

For ORPS reportable events, the injury/illness analysis process must incorporate notification/reporting aspects required by the ORPS process (see the [Occurrence Reporting and Processing System \(ORPS\)](#) Subject Area, or contact the [ORPS Coordinator](#) for guidance.

All recordable injuries and first aid cases must be analyzed, regardless of severity. The analysis is expected to be conducted utilizing a graded approach, based on actual or potential severity, frequency of similar events, and/or value of lessons to be learned.

**Note:** The Safety and Health Services Division (SHSD) may provide guidance on depth/adequacy of an analysis (see the section [Application of the Graded Approach](#) in the [Graded Approach for Requirements](#) Subject Area for additional guidance).

### 3.1 Analysis Process

<p><b>Step 1</b></p>	<p>Utilizing a graded approach, the line organization lead investigator or the analysis team for recordable incidents reports to the scene of the injury or illness as soon as possible, ready to initiate the analysis. Ensure the line supervisor of the affected worker is directly engaged and involved in the analysis.</p> <p>For recordable incidents, the analysis team typically consists of the following</p> <ul style="list-style-type: none"> <li>• Lead investigator (may be ES&amp;H Coordinator or ES&amp;H Representative);</li> <li>• Injured worker's supervisor;</li> <li>• SHSD Investigator (assigned by SHSD);</li> <li>• Union Representative (for injuries involving bargaining unit employees--see note below).</li> </ul> <p>See Suggested Site Analysis Response Items (go to the <a href="#">Injury/Illness Analysis Program Area</a>).</p> <p>The team should include a member that is knowledgeable in the process/task being performed at the time of the incident, whenever possible. Additional team members may include specific subject matter experts as necessary.</p> <p><b>Note:</b> Union representative participation on the analysis team is encouraged, but not mandatory. Initiation of the analysis should not be delayed to await team member assignment.</p>
<p><b>Step 2</b></p>	<p>Line organization assigns a Lead Investigator to coordinate the analysis and ensure</p> <ul style="list-style-type: none"> <li>• The line supervisor of the affected worker is responsible for the analysis, including being directly engaged in and involved in the analysis process;</li> <li>• Appropriate communication and collaboration with SHSD;</li> <li>• Timeliness and quality of analysis.</li> </ul> <p>See the section <a href="#">Application of the Graded Approach</a> in the <a href="#">Graded Approach for Requirements</a> Subject Area for additional guidance.</p> <p><b>Note:</b> A hard copy of the Injury/Illness Analysis Report Form (see the <a href="#">Injury/Illness Analysis Program Area</a>) may be used as a guide or checklist for conducting the analysis.</p> <p><b>Note:</b> It is important that during the course of the analysis, to always keep in mind the purpose, which is to prevent recurrence and to show concern for any injured workers.</p>

<b>Step 3</b>	<p>Once notified that a worker has reported an occupational injury or illness to the OMC, the supervisor, or other line manager/designee, must report to the Occupational Medicine Clinic (OMC) to support, accompany the injured person, and ascertain the degree of injury.</p> <p>If the employee is transported off-site, the supervisor or line manager/designee reports to the OMC with the employee on their next scheduled workday.</p>
<b>Step 4</b>	<p>To determine if the incident is recordable, contact one of the following Safety and Health Services Division (SHSD) staff (make every attempt to speak directly to a person whenever possible; try not to leave a message):</p> <ul style="list-style-type: none"> <li>• <a href="#">OSHA Recordkeeper</a>; or</li> <li>• <a href="#">Safety Engineering Group Manager</a>; or</li> <li>• <a href="#">Safety &amp; Health Services Division Manager</a>.</li> </ul> <p>The SHSD can provide guidance regarding a graded approach to the analysis process. See the section <a href="#">Application of the Graded Approach</a> in the <a href="#">Graded Approach for Requirements</a> Subject Area for additional guidance.</p> <p>First Aid Incidents - The line organization conducts the analysis without an assigned SHSD Investigator, or asks SHSD for help/assistance with the analysis.</p> <p>Recordable Incidents - The SHSD assigns an SHSD Investigator to provide expertise and assistance to the supervisor and line organization.</p> <p><b>Exception:</b> In the event of a very serious injury or illness, the SHSD or an ALD may decide that a special investigator or team of special investigators will conduct the analysis. In these cases, they will determine the scope and assign staff to conduct the analysis to completion. In these cases, the assigning personnel reports to the scene of the event and provide assistance to the analysis.</p>
<b>Step 5</b>	<p>Interview the injured worker as soon as possible. At the request of an injured bargaining unit worker, a union representative may be present.</p> <p><b>Note:</b> Ideally one, but no more than two investigators, should interview a worker/witness at a time. If there is more than one injured person, obtain a separate statement from each individual. The Injured Worker's Statement Form available at the <a href="#">Injury/Illness Analysis Program Area</a> or OMC.</p> <p><b>Note:</b> It is important to obtain the information as soon as possible after the event takes place, when the details are fresh in his/her mind.</p> <p>When dealing with injured employees, it is important to show concern for their injury or illness and explain the purpose of the analysis. Consider human performance and wearing of required PPE as part of the analysis, where appropriate.</p>
<b>Step 6</b>	<p>Contact witnesses individually and conduct an interview. Witness Forms are available to document their account of the event (see the <a href="#">Injury/Illness Analysis Program Area</a>).</p> <p>If the witness refuses to provide a statement, or sign the form, document their refusal, stating their reason on the form, and sign your name.</p> <p><b>Note:</b> Witness information is not required.</p>

<p><b>Step 7</b></p>	<p>Photograph/document the scene and any transient evidence (such as water on the floor, sunlight, lighting, weather conditions, etc.).</p> <p>Use a photo log to document the position from where the photograph was taken (such as the distance to the subject of the photograph, or other measurements).</p>
<p><b>Step 8</b></p>	<p>Incorporate applicable requirements found in the <a href="#">Event/Issues Management</a> Subject Area, as appropriate (e.g., Fact Finding Meetings, etc.), along with the aspects of this procedure.</p>
<p><b>Step 9</b></p>	<p>Obtain all documentation pertinent to the injury or illness, as appropriate to the graded approach, such as</p> <ul style="list-style-type: none"> <li>• Training records;</li> <li>• Inspection and maintenance records;</li> <li>• Owner's manuals (for equipment);</li> <li>• Safety rules or procedures;</li> <li>• Work Planning documents; <ul style="list-style-type: none"> <li>◦ Work Permits</li> <li>◦ Procedures</li> <li>◦ Job Risk Assessments</li> <li>◦ Facility Risk Assessments</li> <li>◦ Hazard Analyses</li> <li>◦ Experimental Safety Reviews</li> </ul> </li> </ul>
<p><b>Step 10</b></p>	<p>Identify and evaluate controls that apply (or should apply) to the activity that was in process at the time of the event.</p>
<p><b>Step 11</b></p>	<p>Determine the direct, contributing, and root cause(s) of the event, as appropriate.</p> <p><b>Note:</b> First aid incidents may only require identification of an apparent cause.</p> <p><b>Note:</b> The DOE Facility Representative may be invited to causal analysis meetings/discussions.</p> <p><b>Note:</b> If a formal causal analysis was conducted, a copy of the worksheet or analysis should be included.</p> <p>See the section <a href="#">Analyzing Event/Issues</a> in the <a href="#">Event/Issues Management</a> Subject Area for causal analysis methods.</p>
<p><b>Step 12</b></p>	<p>Identify the Integrated Safety Management (ISM) core function that is most clearly related to the direct cause of the incident/injury:</p> <p><b>Core Function 1: Define the scope of work</b> - Missions are translated into work, expectations are set, tasks are identified and prioritized, and resources are allocated.</p> <p><b>Core Function 2: Identify and analyze hazards associated with the work</b> - Hazards associated with the work are identified, analyzed, and categorized.</p>

**Core Function 3: Develop and implement hazard controls** - Applicable standards and requirements are identified and agreed-upon, controls to prevent/mitigate hazards are identified, the safety envelope is established, and controls are implemented.

**Core Function 4: Perform work within controls** - Readiness is confirmed and work is performed safely.

**Core Function 5: Provide feedback on adequacy of controls and continue to improve safety management** - Feedback information on the adequacy of controls is gathered, opportunities for improving the definition and planning of work are identified and implemented, line and independent oversight is conducted, and, if necessary, regulatory enforcement actions occur.

**Step 13** Develop SMART corrective action(s) that will address the root cause. For assistance, use Guidelines for the Development of Corrective Actions (see the [Injury/Illness Analysis Program Area](#)).

**Note:** A corrective action calling for a further analysis is not an acceptable corrective action

**Step 14** Determine the extent of condition and include additional corrective actions, if applicable. Use the exhibit [Extent of Condition/Cause Review](#) in the in the [Event/Issues Management](#) Subject Area for guidance.

Determine if the issues and corrective actions associated with the incident apply to other Laboratory organizations.

The line organization must ensure that all corrective actions are entered in the proper tracking system (e.g., Family or institutional level Assessment Tracking System [ATS]).

**Step 15** Line organization develops and distributes an email message describing basic information related to the incident, incorporating the following parameters:

- Input/peer review from SHSD OSHA Recordkeeper or designee (ensures consistent language is distributed, and incorporated into ORPS, and DOE injury management systems);
- Distributed as soon as accurate information is available, but ideally, no later than the end of the workday or by noon of next workday.
- Distribution (minimum) for
  - First Aid Incidents - Line management and ESH personnel, ORPS Categorizer, SHSD OSHA Recordkeeper, Safety Engineering Group Manager; SHSD Manager, SHSD Investigator, ALD for ES&H.
  - ORPS Reportable - Depending on the detail of information included in the ORPS notification message, additional communication may not be necessary. The line organization and SHSD OSHA Recordkeeper may confer regarding the need for an additional message.
  - Recordable/Non-ORPS Reportable - Those listed for First Aid incidents above, and ALD of affected worker, Laboratory Director and Deputy Directors.

**Step 16** Complete and distribute the Injury/Illness Analysis Report by the target timeframe of **five to seven working days from the event.**

**Report Distribution (electronic distribution preferred):**

- Original or electronic transmittal – OSHA Recordkeeper;
- Analysis team members;
- Line organization manager;

- Injured worker;
- SHSD Manager;
  - ALD for ES&H Directorate;
  - ALD for line organization;
  - Union Representative (for bargaining unit employee events).

**Note:** SHSD will review the report for quality, accuracy and timeliness. Unacceptable reports will be rejected and returned to the responsible supervisor accompanied by a rejection form which will identify why it was rejected and require re-work be submitted in 5 to 7 working days from the date rejected. Reports that are acceptable will receive no feedback.

**Step 17**

The line organization is responsible for developing a safety alert bulletin slide (also known as a “One Pager”) after completing the analysis for the following incidents:

- Recordable injuries/illnesses;
- First aid incidents that provide lessons learned information (SHSD Manager or line organization discretion).

Obtain line management approval and then forward safety alert bulletin slide to the ES&H Directorate for database input/processing.

**Note:** The safety alert bulletin slide is a summary of the analysis and includes a description of the incident, including injuries and location, department(s) involved, cause(s), corrective action(s), and photos, as appropriate.

**Step 18**

The line organization is responsible for developing and forwarding a lessons learned communication, if a lessons learned results from the incident (see the [Lessons Learned](#) Subject Area), and forwards it to the [Lessons Learned Coordinator](#) for distribution.. Not every incident will have a lessons learned.

## 3.2 Analysis of Injuries/Illnesses Occurring Off-Hours

**Step 1**

Analysis of an occupational injury/illness that occurs during non-routine work hours (i.e., other than 0800 to 1700 hours) will generally be initiated the next workday. **Note:** However, exceptions may occur depending on incident severity.

Fire Rescue, must evaluate the worker, as described in the section [Discovering an Injury/Illness and Notifications](#).

The worker’s supervisor is to immediately notify (or ensure notification) of the

1. Occupational Medicine Clinic at ext. 3670;
2. ORPS Categorizer via cell phone at 631-433-0443;
3. Line management, as appropriate;
4. Line organization's ESH Coordinator;
5. One of the following Safety and Health Service Division (SHSD) staff (make every attempt to speak directly to a person whenever possible; try not to leave a message):
  - [OSHA Recordkeeper](#); or
  - [Safety Engineering Group Manager](#); or
  - [Safety & Health Services Division Manager](#).

The supervisor notifies the Union Representative (for bargaining unit workers).

Should the Occupational Medicine Clinic be informed first, the nurses will handle the abovementioned notifications.

For recordable incidents, SHSD provides guidance regarding incident investigation. The supervisor must preserve the scene and obtain incident information using a graded approach, as prescribed in this subject area.

The worker must report to the OMC, when it opens or prior to start of shift the next workday he/she is on site, whichever is sooner.

### 3.3 Analysis of Injuries/Illnesses Occurring on Business Travel

#### Step 1

Analysis of an occupational injury/illness that occurs while on business travel must be initiated promptly upon the supervisor receiving notification.

The supervisor is to immediately notify the following:

1. ORPS Categorizer via cell phone at 631-433-0443;
2. Occupational Medicine Clinic at ext. 3670;
3. Line management, as appropriate;
4. Line organization ESH Coordinator;
5. One of the following Safety and Health Service Division (SHSD) staff (make every attempt to speak directly to a person whenever possible; try not to leave a message):
  - [OSHA Recordkeeper](#); or
  - [Safety Engineering Group Manager](#); or
  - [Safety & Health Services Division Manager](#).

For recordable incidents, SHSD will provide guidance regarding incident analysis.

The supervisor notifies the

- Union Representative (for bargaining unit workers);
- Human Resources and Occupational Medicine Division (as necessary, for international travel, insurance issues, etc.).

These analyses generally do not require travel to the incident scene. However, exceptions may occur depending on incident severity.

The worker must report to the OMC immediately upon returning to BNL, along with the supervisor/designee.

## Guidelines

Workers are involved as much as possible to ensure their input into the corrective actions.

No more than two investigators should interview an injured worker/witness at a time.

## References

[Graded Approach for Requirements](#) Subject Area

[Injury/Illness Analysis Program Area](#), [Safety Engineering Group](#) homepage, [Safety and Health Services](#) Web Site

[Lessons Learned](#) Subject Area

[Occurrence Reporting and Processing System \(ORPS\)](#) Subject Area

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| [SBMS Home Page](#) | [Top of Subject Area](#) | [Instructions](#) | [Revision History](#) |

[https://sbms.bnl.gov/sbmsearch/subjarea/130/130\\_pro3.cfm](https://sbms.bnl.gov/sbmsearch/subjarea/130/130_pro3.cfm)

## DEFINITIONS

### Definition: [Injury and Illness--Notification and Analysis](#)

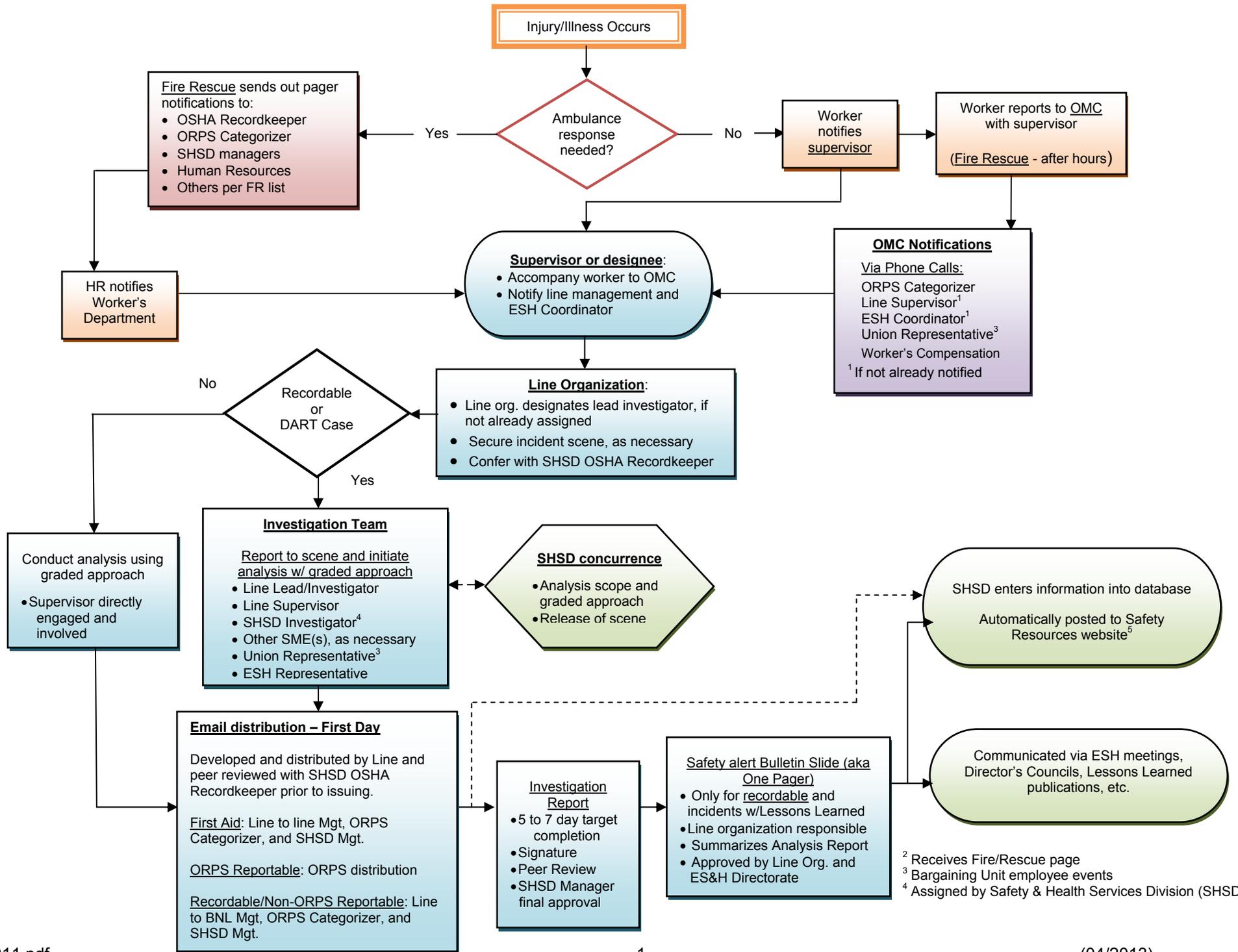
Term	Definition
contributing causes	A cause that contributed to an incident but, by itself, would not have caused the incident.
corrective actions	Actions taken to remedy a problem, prevent recurrence of an incident, and/or preclude similar incidents.
direct cause	The initiating event of an incident; the release of energy that caused an injury.
extent of condition	When the same problem/condition exists elsewhere or when the same root or underlying causes of the problem/condition may cause a recurrence elsewhere.
first aid	Limited to one-time treatment and subsequent observation and involves treatment of minor injuries only.
near miss	An event that did not cause a recordable injury or illness but had the potential to do so. In a near miss, the potential for injury was present, but injury did not actually occur. However, injury might occur at the next occurrence of the circumstances, unless the circumstances are corrected.
occupational injury/illness	Injury or illness that occurs while the affected person is performing work in accordance with their job.

recordable	Occupational injury/illness cases are recordable if they result in death, medical treatment beyond first aid, lost or restricted workdays, loss of consciousness, or a permanent change of job.
root cause	<p>The causal factor(s) that, if corrected, would prevent recurrence of the accident. The system failures that permitted, encouraged, allowed, failed to identify and correct, failed to follow-up, failed to anticipate or predict – the unsafe act or condition that preceded the release of energy.</p> <p>For example, "Inadequate system design which allows a failed electrical device to lead to a major, uncontrolled fire," or "Poor vehicle maintenance (bald tires) leading to skidding accidents".</p>
safety alert bulletin	A communication intended to provide a brief summary of the event and any precautionary information to others in the Laboratory to prevent recurrence.
serious injury	Injuries that can only be treated by a physician, or other licensed medical practitioner; impair normal bodily function; cause the individual to rest for the remainder of the shift; result in damage to the physical structure (i.e., fractures), or involve complications requiring follow-up medical treatment.
SHSD investigator	A subject matter expert (SME) or other person who has received formal accident investigation training and is assigned by the SHSD to either (1) provide expertise and guidance to the supervisor; or, (2) to participate in a special investigation.
Supervisor	Refers to the worker's direct supervisor, BNL project manager, or sponsor, as appropriate.
very serious injury or illness	This is an actual, or a potential life style altering event. Examples of very serious injuries include: fatalities, amputation, hospitalization of >48 hours commencing within 7 days of the injury, loss of sight, spinal injuries, brain and head trauma, lacerations that cause hemorrhages, nerve, muscle or tendon damage, burn or scald injuries effecting more than 5% of the total body area, or other injuries deemed very serious by the ALD for ESH.
worker	Includes employees, contractors, guests, and students.

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# Injury/Illness Notification and Analysis (On-site) Flowchart



<sup>2</sup> Receives Fire/Rescue page  
<sup>3</sup> Bargaining Unit employee events  
<sup>4</sup> Assigned by Safety & Health Services Division (SHSD)