



MGL-PRO-070 Rev 13

Vestas Zenviron Consortium

HSE Incident Management Procedure

PURPOSE

Vestas Zenviron Consortium (VEZ) is committed to the provision of effective incident management. This is achieved through:

- efficient emergency and medical response in the event of a health, safety and/or environment incident; and
- timely notification and reporting to relevant stakeholders and external parties.

A robust incident analysis and corrective/preventive action management process follows in order to prevent reoccurrence.

SCOPE

This procedure applies to at all VEZ operations, including client sites to which VEZ provide a service and/or labour hire and subcontractors engaged by VEZ.

Document Owner		
Name	Title	Date
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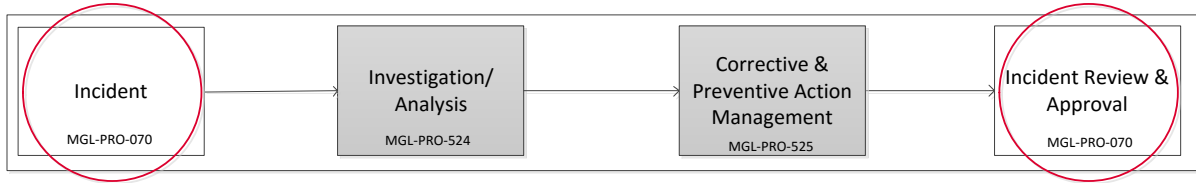
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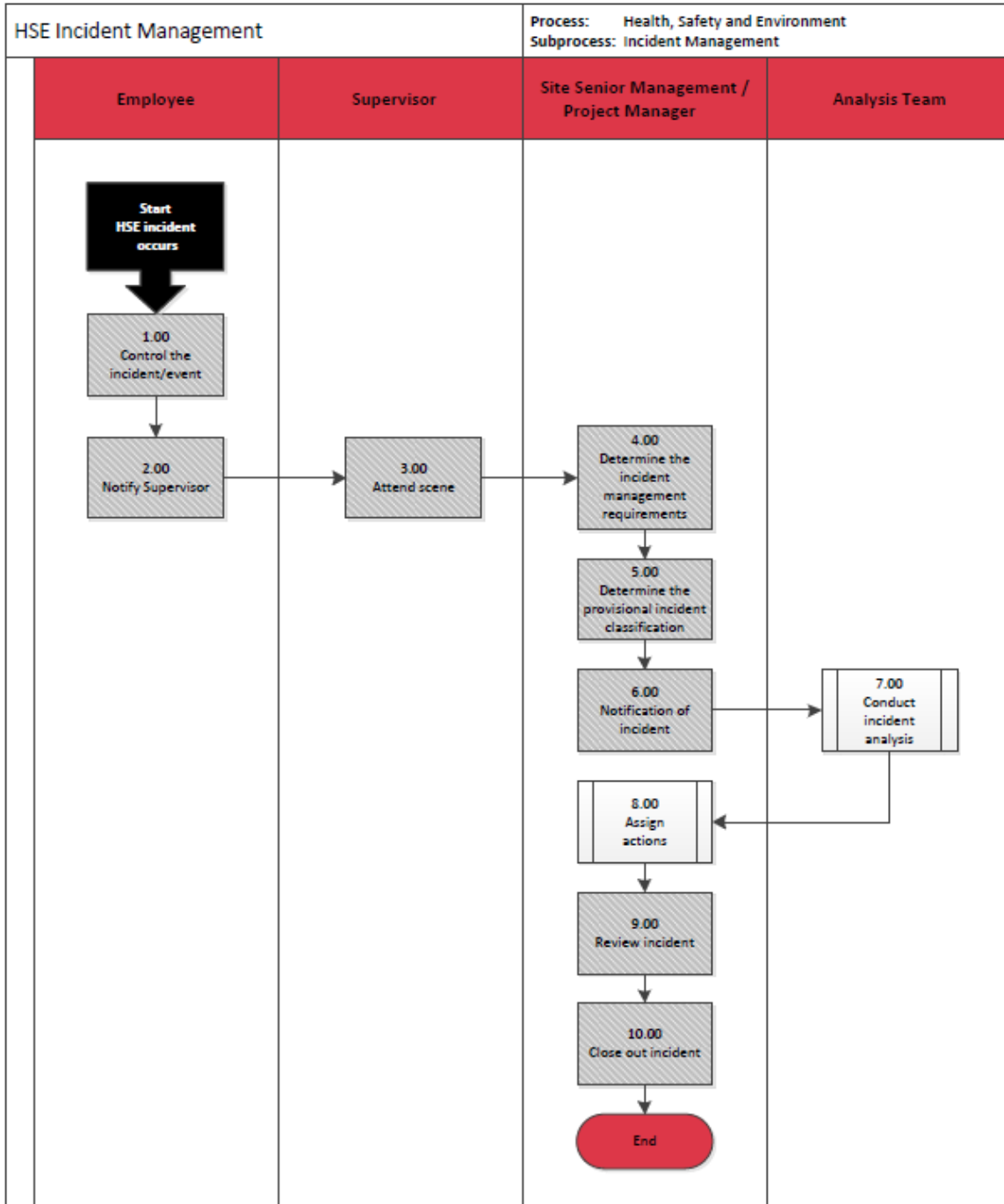
RELATED HSE PROCESSES – PROCESS MAP

Figure 1: Process Map of Related HSE Processes



HSE INCIDENT MANAGEMENT - PROCESS MAP

Figure 2: Process Map of HSE Incident Management



PROCEDURE – HSE INCIDENT MANAGEMENT

Responsibility	Step	Action
	0.00 Start	<p>Process is triggered when an HSE incident occurs, such as:</p> <ul style="list-style-type: none"> • near hits; • incidents resulting in injuries and/or illnesses; • environmental incidents; • asset damage incidents; or • non-conformance events. <p>Incidents are not limited to events that involve employees, but include contractors, assets and the environment.</p> <p>NOTE: drug and alcohol breaches identified in random and blanket testing, for the purpose of this procedure, will not be required to be reported in Cintellate. Drug and alcohol breaches are managed in line with <i>MGL-PRO-064 Personnel Counselling and Discipline</i> procedure.</p>
Employee	1.00 Control the incident/event	<p>The site and incident/event is controlled to minimise the potential for consequences to escalate.</p> <p>When controlling an incident the following preservation priorities should be considered at all times:</p> <ol style="list-style-type: none"> 1. Self-preservation; 2. Injured personnel and other personnel; 3. Equipment / assets; and 4. Environment.
	1.01 Re-establish a safe environment	<p>Re-establish a safe environment by taking appropriate actions immediately to verify the surrounding environment is safe and secure, and that any additional hazards are controlled and contained effectively.</p>
	1.02 Initiate emergency response	<p>Initiate the appropriate level of emergency response, e.g. administer first aid and/or contact emergency response personnel.</p> <p>Injured workers may require transport to a medical facility to receive further treatment.</p> <p>Refer to <i>MGL-PRO-401 Emergency Response Procedure</i> for further information.</p>
Employee	2.00 Notify Supervisor	

Responsibility	Step	Action
Supervisor	3.00	<p>Notify the relevant supervisor. In the event that the relevant supervisor is not available, notify an alternate supervisor, manager or HSE personnel.</p> <p>Attend scene</p> <p>Supervisor attends scene to ensure involved/injured persons are being cared for and that appropriate control measures have been undertaken.</p> <p>In the instance that VEZ is providing labour hire to a client, the VEZ Representative is to be informed of the incident/event.</p> <p>The VEZ Representative will then assume responsibility for the reporting, management and investigation of the incident/event, from a VEZ perspective.</p>
	3.01	<p>Preserve the incident scene</p> <p>For investigation purposes, the incident scene and any evidence should be preserved. This can be achieved by demarcating the area.</p> <p>NOTE: in the event of a fatality the scene must be preserved and secured until the police and regulatory authorities attend the scene, e.g. screens or barricades.</p>
Supervisor / VEZ Representative	3.02	<p>Establish initial facts</p> <p>Establish initial incident/event facts in order to assist in the investigation.</p> <p>Initial facts will vary, depending on the nature of the incident, however initial facts for all incidents will include, as a minimum:</p> <ul style="list-style-type: none"> • when the incident occurred; • where the incident occurred; • who was involved; • was anyone injured, and if so, what is the nature of the injury(ies) and their current medical condition; • has there been an impact on the environment; • was any plant, equipment, process affected; and • has a Life Saving Rule potentially been breached (refer to <i>MGL-GUD-228 Life Saving Rules Guideline</i>).
	3.03	<p>Advise Site Senior Manager / Project Manager and HSE Personnel</p> <p>Advise the Site Senior Manager / Project Manager and HSE personnel of the incident as soon as practicable.</p>
	3.04	<p>Obtain written statements</p> <p>Obtain signed written statements from the people who were involved or observed the incident, where applicable on <i>MGL-F-729 Incident Statement</i> form.</p> <p>NOTE: In the instance where a person involved in an incident declines to sign their statement, this is to be noted and co-signed</p>

Responsibility	Step	Action
Site Senior Management / Project Manager		by two VEZ representatives. A VEZ representative may be the Supervisor, Site Senior Manager / Project Manager or HSE personnel.
	4.00 Determine incident management requirements	Determine what incident management requirements may be applicable for the incident, such as: <ul style="list-style-type: none"> • crisis management; • legal advice; • accountability for the incident; • fitness for work assessment; and • Employee Assistance Program (EAP).
	4.01 Determine if crisis management is potentially required	In consultation with Executive management, determine whether the incident/event requires crisis management. Crisis Management is to be initiated in line with <i>MGL-PLN-018 Crisis Management Plan</i> if it is determined that it is required.
	4.02 Determine if legal advice is required	In consultation with the Divisional HSE Manager, determine if legal advice is required. In the event that legal advice is sought, the incident will become subject to legal professional privilege (LPP). NOTE: Should legal professional privilege be applied, all information and communications, including notification and reporting to regulatory bodies, pertaining to the incident must be in accordance with instructions by the Legal Advisor; and the investigation undertaken under their guidance. Refer to Appendix A for further information on the requirements of seeking legal advice.
	4.03 Determine accountability for the incident	In general, the site/division that has control and ownership of the location and work activities, at the time of an incident or injury is accountable for the recording, reporting, management and investigation. For circumstances such as Integrated Projects, refer to Appendix B for further information on incident accountability.
4.04 Determine if fitness for work assessment is required	An individual involved in an incident is required to undergo a fitness for work assessment where: <ul style="list-style-type: none"> • an incident involved significant damage to a vehicle or a Major Defined Asset (MDA); • the fitness for work of an individual may have contributed to the incident; or 	

Responsibility	Step	Action
Site Senior Management / Project Manager		<ul style="list-style-type: none"> the incident is an actual level 4 or 5, or potential level 5. <p>NOTE: individual/s must attend fitness for work assessment within 24 hours of the incident.</p>
	4.04	<p>Determine if employee assistance program (EAP) is required</p> <p>Consideration should be given to initiating the company employee assistance program in line with <i>MGL-GUD-009 Employee Assistance Program</i> guideline.</p>
	5.00	<p>Determine the provisional incident classification</p> <p>The incident classification is used to determine the appropriate level of management, notification, investigation and reporting of the incident.</p>
	5.01	<p>Incident classification</p> <p>All incidents are classified according to the actual and potential consequence as it relates to people, environment and assets. Refer to Table 1 for potential consequence classification and Tables 5 and 6 (Appendix C) for actual consequence classification. The potential consequence of the incident is used to prioritise how the incident is managed, notified, reported and investigated.</p> <p>The potential consequence level is the level determined as the most significant realistic consequence/s reasonably expected in similar circumstances.</p> <p>The actual consequence is the level determined as the most significant to the incident relating to people, environment and assets.</p> <p>Refer to Appendix C for guidance on how to classify the incident.</p> <p>Consultation with Divisional HSE Managers should be made if there is uncertainty about the classification of an incident, particularly where there is the possibility of a potential level 5 incident.</p> <p>NOTE: the incident classification is provisional pending the outcome of the investigation.</p> <p>Disputes regarding incident classification are escalated for resolution as required by Line Management and HSE.</p>

Table 1: Potential Consequence

Potential Consequence Level	People	Environment	Assets
<p>PEOPLE: refers to the level of impact an incident poses to the health, safety and wellbeing of people, whether they be employees, contractors, visitors or members of the community.</p> <p>ENVIRONMENT: refers to the level of impact an incident poses to the environment. The scale of impact is measured against the area contaminated and length of time the contamination affects the surrounding environment</p> <p>ASSETS: refers to the level of impact an incident poses to VEZ, client or third party property (including rental equipment). Assets refer only to tangible (financial and fixed) assets. Financial assets include such items as accounts receivable, bonds, stocks and cash, while fixed assets include such items as plant and equipment.</p>			
Level 5 (Catastrophic)	Fatality	Widespread impact requiring remediation >1 year	> AUD \$2.5 million
Level 4 (Severe)	Extensive irreversible impairment	Widespread impact requiring remediation of <1 year OR surrounding area impact requiring remediation of > 2 years	< AUD \$2.5 million > AUD \$250,000
Level 3 (Major)	Major reversible impairment with long term recovery (>1 month to years), OR moderate irreversible impairment	Surrounding area impact requiring remediation of >1 month, <2 years	< AUD \$250,000 > AUD \$50,000
Level 2 (Moderate)	Moderate reversible impairment with medium term recovery (> 1 week to 1 month)	Immediate area impact requiring remediation of < 1 month	< AUD \$50,000 > AUD \$5,000
Level 1 (Minor)	Minor inconvenience, short term recovery (days to 1 week)	Immediate area impact, no remediation required	< AUD \$5,000

- **Non Work Related Injuries**

Potential Workers Compensation Cases: Non work related incidents that result in injuries that have potential for a workers compensation claim eg camp injuries, should be given a potential consequence rating.

Other: Other Non Work-Related incidents eg injuries/illnesses incurred at home, may be recorded as “No potential loss”.

- **Potential Health Exposure**

Where a potential exposure to materials, chemicals or agents may cause illness, such as asbestos, synthetic mineral fibres or sewage. These exposures may or may not result in development of an illness at a later stage (Refer table 7 for guidance on classifications associated with potential health exposures)

5.02 Incidents resulting from uncontrolled activities

Incidents resulting from uncontrolled activities do not contribute to VEZ HSE statistical reporting.

Refer to Appendix C.2 for a definition and guidance on incidents arising from uncontrolled activities.

5.03 Reclassification

An incident may be reclassified for a number of reasons including, but not limited to:

- the outcome of a pending investigation;
- the outcome of additional treatment required for the management of an incident/injury;
- the initial consequence level or type had not been identified correctly.

5.04 Recurrence

An injury will be deemed to be a recurrence in the situation where an employee has been certified:

- **fit for full duties** and:
 - experiences recurring symptoms within 30 days of return from injury rehabilitation; and
 - there has been no new causal event.
- **fit for restricted duties** and:
 - has returned to work from injury rehabilitation; and
 - experiences recurring symptoms; and
 - there has been no new causal event.

Injuries where the employee has been re-injured in the same body location through a new causal event or where the injury occurs beyond 30 days of being certified as fit for full duties are deemed to be a new work-related incident.

In both circumstances, the incident is to be investigated to confirm that it has not been the result of a new causal event, and then either recorded as a new incident with reference to the original incident or entered as part of the existing incident.

5.04 Delays to Diagnosis

Where reporting of a medical diagnosis is delayed due to the need to travel to the required medical facility for diagnosis, or the availability of medical equipment or specialist, the period of the delay shall not be considered towards lost time in the determination of injury classification.

**Supervisor / VEZ
 Representative**

6.00 Notification of incident

Refer to Table 2 for further information on notification requirements and timeframes.

6.01 Verbal notification

Verbally notify line management and relevant stakeholders, such as HSE personnel, Health and Rehabilitation Coordinators and Group Assets of the incident to ensure that related processes are initiated in a timely manner, e.g. injury management.

Refer to Table 2 to identify what roles should be notified and the applicable notification timeframe.

NOTE: formal notification will be issued through Cintellate to provide a documented record of notification.

Table 2: Incident Notification Requirements

Potential Consequence Level	Timeframe and role to be notified				
	Supervisor	HSE Personnel	Site Senior Management	Senior Management (offsite)	Managing Director
Level 5	Immediately	Immediately	Immediately	Immediately	Immediately
Level 4	Immediately	Immediately	Immediately	Immediately	Immediately
Level 3	Immediately	Immediately	Immediately	Within 8 hours or before the end of the shift	n/a
Level 2	Immediately	Immediately	Within 8 hours or before the end of the shift	Within 8 hours or before the end of the shift	n/a
Level 1	Immediately	Within 8 hours or before the end of the shift	Within 8 hours or before the end of the shift	Within 8 hours or before the end of the shift	n/a

6.02 Statutory notification requirements

Where applicable, notification to external parties may need to occur:

- client notification and involvement; and
- statutory / legislative notifications.

Certain types of incidents are required to be reported to statutory authorities for recording purposes. All incidents shall be reported within the terms and requirements of the relevant statutory authority.

Senior Management, in consultation with the Divisional HSE Manager, is responsible for determining and reporting incidents required by relevant statutory authorities.

Where a statutory notification is required, details of the notification are recorded including:

- reportable injury/disease (as defined in the applicable legislation e.g. Work Health and Safety Act etc.);
- recordable environment incident (e.g. Department of Mines and Petroleum);
- reportable environmental incident (as defined in the applicable Environmental Protection Act etc.);
- if statutory notice is received (e.g. prohibition/improvement notices). Refer to *MGL-PRO-246 Issue of Improvement and Prohibition Notices by an OHS Regulatory Body* procedure for further information;
- the relevant Regulatory Authority (e.g. WorkSafe);

- person sent / received by; and
- date sent / received.

6.03 Create incident notification

Report incident/event in Cintellate within eight hours of the occurrence or prior to the end of shift.

MGL-F-065 Incident Notification form is utilised when Cintellate is unavailable. The notification form is intended only for notification purposes. Further information required will be identified as part of the incident analysis.

The completed notification form may be forwarded to the applicable HSE department for entry into Cintellate on behalf of the site when the system is not available, or can be entered by the site once the system is available.

6.04 Cintellate System notification

Relevant parties will be formally notified via the Cintellate system, such as Line Managers, HSE personnel and Group Assets. This does not remove the requirement for verbal notification as per Appendix D.

Health and Rehabilitation Coordinators will be notified of injuries and the following processes may be initiated:

- *MGL-PRO-072 Injury Management and Rehabilitation*; and
- *MGL-PRO-076 Workers Compensation Claims Management*.

6.05 Serious Incident Briefing

Serious Incident Briefings are required to be issued for all incidents with potential consequence rating of Level 4 or 5 (excluding Potential Health Exposure incidents), or where there is a risk of legal prosecution or litigation. These are to be issued to provide timely briefings and updates regarding serious incidents to the Executive Management Team and for management reporting purposes.

The initial Serious Incident Briefing shall be provided within 48 hours of incident occurring using *MGL-F-2526 Serious Incident Briefing Form*. The relevant business unit General Manager is accountable for ensuring that briefings and updates are issued in accordance with this procedure.

Essential information should include, where applicable, the following:

- Summary of events as known at the time (not investigation outcomes yet)
- Available information on any injuries or damage and treatment in progress
- Immediate actions taken including site response e.g. site stand-down

- If legal counsel sought and whether legal privilege is in force (Note: details provided here need to be mindful of any legal privilege and avoid attribution of cause)
- Any regulator contact or notices
- Any union response
- Any client response

Serious Incident Updates shall be provided when there is a significant status change using *MGL-F-2526 Serious Incident Briefing Form*. Updates shall provide status on information on the initial Serious Incident Briefing, any further developments and any further actions being undertaken.

Analysis Team 7.00 Conduct incident analysis

Conduct incident analysis to identify causal factors and root cause/s of the incident and corrective actions to address the root cause/s.

Incident analysis findings are to be recorded and communicated.

Actual level 4 and 5 and potential level 5 incident investigations may be documented in *MGL-F-727 Serious Incident Analysis Report*.

Refer to Table 3 and *MGL-PRO-524 HSE Incident Analysis (Investigation)* procedure for further information.

Table 3: Incident Analysis Requirements

Potential Consequence or Actual Injury Level	Type of investigation analysis and timeframe	Serious Incident Review Forum	Approval
Potential consequence level 5	Full TapRoot® completed in 10 days	Divisional Serious Incident Review and Executive HSE Meeting	Managing Director
Potential consequence level 4	Full TapRoot® completed in 10 days	Divisional Serious Incident Review and Executive HSE Meeting	Executive General Manager
Potential consequence level 3	Full TapRoot® completed in 10 days	Not required	General Manager
Potential consequence level 2	Simple analysis completed in 7 days	Not required	Superintendent, Site/Construction / Project Manager (site based)
Potential consequence level 1	Simple analysis completed in 7 days	Not required	Supervisor
Potential Health Exposure consequence level 3-5	Full TapRoot® completed in 10 days	Not required	General Manager
Actual Lost Time Injury	Full TapRoot® completed in 10 days	Divisional Serious Incident Review and Executive HSE Meeting	Executive General Manager
Actual Case Injury (RWI or MTI)	Full TapRoot® completed in 10 days	Divisional Incident Review	General Manager
Non Work-related injuries/illnesses potentially subject to workers compensation claim eg camp related injuries	Simple analysis completed in 7 days	Not required	Supervisor

Note: Where the actual injury level requires a different level of incident analysis, review, and approval to the potential consequence, the higher requirements shall apply.

Site Senior Management / Project Manager	8.00 Assign actions	<p>Corrective and preventive actions are assigned and recorded in Cintellate.</p> <p>Actions are monitored to ensure that they are completed and reviewed to validate their effectiveness.</p> <p>Refer to <i>MGL-PRO-525 Corrective and Preventive Action Management</i> procedure for further information.</p>
Senior Management	9.00 Review incident	<p>9.01 Serious incident review forum</p> <p>Incidents are reviewed in management forums, as per Table 3.</p> <p>Serious incidents and actual Lost Time Incidents require an incident review by the Executive HSE Committee, led by the relevant General Manager, with support from the Site / Project Manager, where required.</p> <p>The following information is required to be provided as part of Serious Incident Reviews:</p> <ul style="list-style-type: none"> • Overview <ul style="list-style-type: none"> ○ Division, Site and Location of incident ○ Date and Time of the incident ○ People Involved ○ Current status of injured personnel, if applicable • Incident Summary • Findings of the Investigation and Analysis <ul style="list-style-type: none"> ○ Causal Factors ○ Root Cause Description ○ Actions • Key Learning Outcomes
	9.02 Review and Approval	<p>Once the incident analysis is completed and corrective/preventive actions are assigned, within Cintellate, the incident is:</p> <ul style="list-style-type: none"> • reviewed by key reviewers; and • approved by the applicable Approver.
Senior Management	10.00 Close out incident	<p>The incident is closed out after the corrective actions have been completed and verified for their effectiveness.</p>
	11.00 End	<p>Process is considered completed when the investigation has been completed, actions addressing investigation findings have been</p>

completed and the relevant Management has approved the incident.

DEFINITIONS

Term	Definition
Incident	An occurrence that has resulted in, or has the potential to result in, an injury or occupational health illness to people or adverse consequences to assets or the environment, or a combination of these.
Serious Incidents (SI)	Level 4 and 5 'Actual' or 'Potential' incidents.
Subcontractor	A subcontractor is an external entity engaged by and responsible to VEZ to perform work involving labour where VEZ has control over the location within which the work is occurring.

REFERENCED DOCUMENTS

Document No.	Document Name
MGL-F-065	Incident Notification
MGL-F-727	Serious Incident Analysis Report
MGL-F-729	Incident Statement
MGL-F-2526	Serious Incident Briefing
MGL-GUD-009	Employee Assistance Program
MGL-GUD-228	Life Saving Rules
MGL-PRO-246	Issue of Improvement and Prohibition Notices by an OHS Regulatory Body

PROCESS TOUCH POINTS

Document No.	Related Process
MGL-PLN-018	Crisis Management Plan
MGL-PRO-064	Personnel Counselling and Discipline
MGL-PRO-072	Injury Management and Rehabilitation
MGL-PRO-076	Workers' Compensation Claims Management
MGL-PRO-080	Records Management
MGL-PRO-401	Emergency Response Procedure
MGL-PRO-524	HSE Incident Analysis (Investigation)
MGL-PRO-525	Corrective and Preventive Action Management

RELATED SYSTEMS

System Name	Role	Level
Cintellate	Manager Supervisor Lead Analyst	Approver/Reviewer User User

APPENDICES

Appendix Reference	Appendix Name
A	Obtaining legal advice
B	Incident accountability
C	Incident classification

RECORDS

HSE records are maintained in line with the following:

- *MGL-PRO-080 Records Management* procedure; and
- *MGL Records Retention Schedule*.

REVISION HISTORY

Revision	Changes	Date	Prepared By
6	Management System Documentation Review Project	24/06/09	J. Dalgleish
7	Reviewed as per MGL-PRO-488 – no changes required	24/07/12	Iona Williamson
8	Reviewed to include the VEZ Life Saving Rules	21/01/13	Claire Forsyth
9	Modification of Life Saving Rules investigation Requirements	08/05/14	Iona Williamson
10	Restructured and updated procedure to align with Cintellate system requirements. Inclusion of Serious Incident Briefing requirements. Modification of incident classification guidance.	22/07/2014	Iona Williamson
11	Inclusion of subcontractors in the scope, correction of TCI incident analysis requirements, amendment to non work related camp injury reporting requirements	17/03/2015	Rhiannin Cole, Jason Lamb
12	Re-inserted delay to diagnosis clause (modified from original)	17/11/2015	Jason Lamb
13	Addition of guidance in regard to reporting and classifications related to potential health exposures	30/05/2016	Rebecca Boyd

APPENDIX A – OBTAINING LEGAL ADVICE

A.1 When should legal advice be sought?

Legal advice should be sought when one or more of the following types of incidents occur and prior to the commencement of any investigation / analysis:

- fatality
- an actual disabling or permanent injury;
- environmental impact (widespread impact / long term remediation); and
- any incident that litigation is reasonably anticipated.

The following considerations should also be taken in to account prior to seeking legal advice:

- if there is a propensity for regulatory authorities to prosecute or to consider prosecuting similar events;
- the event as it relates to HSE legislation;
- the severity of the event; and
- the potential impact on VEZ reputation or brand.

A list of suitable external legal advisors may be obtained from Group HSE or Divisional HSE Managers.

A.2 What is legal Professional Privilege?

Legal professional privilege (LPP) is the legal right that protects confidential communications between a lawyer and a client from disclosure. Legal professional privilege may be applied when seeking or providing legal advice or for use in existing or anticipated legal proceeding.

The communication may be written, electronic or verbal and is to be used for the dominant purpose of seeking or providing legal advice, or for use in existing or anticipated proceedings.

This means that if a document or communication is 'privileged', it need not be disclosed to the other side in litigation and if the court decides, its very existence may be kept secret. This will enable the client the ability to provide full and transparent disclosure to the legal advisor without fear that the information will be used against them. And, in turn, enables the legal advisor the ability to provide competent and independent legal advice.

Legal professional privilege applies only to certain documents, e.g. correspondence, notes of meetings, discussion notes, minutes, file notes and letters of advice. Legal professional privilege may also apply to handwritten, typed and draft documentation.

Similarly legal professional privilege may be applied not only to communications between the client and the legal advisor, but between communications between the lawyers and third parties (on behalf of the client) or the between the client and third parties.

Legal professional privilege is governed by the Evidence Act 1995 and is commonly categorised as:

- Advice privilege; and
- Litigation privilege.

A.1.1. Advice privilege

At common law, advice privilege attaches to confidential communications between a legal advisor and client or third party for the dominant purpose of giving or receiving legal advice.

Legal advice in this context includes more than just telling the client the law; it also includes advice as to what may be prudent and sensibly done in the relevant legal context.

However, to attract privilege, the advice must be professional advice given by the legal advisor in their professional capacity, and the communications must be for the dominant purpose of obtaining legal advice.

A.1.2. Litigation privilege

At common law, litigation privilege attaches to confidential communications passing between a legal advisor or client and a third party if made for the dominant purpose of use in, or in relation to, litigation then existing or reasonably anticipated.

A.3 Claiming Legal Professional Privilege

A.3.1. Claiming Legal Professional Privilege

All communications and information relating to the incident is collated and distribution restricted, until the legal professional privilege has been resolved or waived.

All documentation produced for the purpose of obtaining legal advice or legal professional privilege is not to be reproduced in any other document unless the entire new document is being created for the dominant purpose of giving or receiving legal advice or in contemplation of litigation.

In order for a determination of legal professional privilege, the external legal advisor will need to be notified of the facts and nature of the incident. This information and any communications with the legal advisor are to be in accordance with their instructions.

In order to apply legal professional privilege, a formal agreement between VEZ and the external legal advisor will be obtained. The formal agreement will highlight the scope of legal professional privilege and any information that will be excluded from the agreement.

Joint legal professional privilege may be required between one or more interested parties, e.g. client and subcontractors. In these situations, the formal agreement will indicate the relationship between the interested parties and the responsibilities for each party in regards to maintaining legal professional privilege.

A.3.2. Maintaining Legal Professional Privilege

As a minimum, all documentation prepared should be identified as being prepared for the dominant purpose of obtaining legal advice and in contemplation of legal proceedings being undertaken and indicating that the information is confidential.

The legal advisor will provide guidance on the above requirement, including specific wording required as well as when and how to use it. Privilege is more likely to be maintained if the following practices are adopted in addition to the advice of the legal advisor:

- marking documents that include legal advice as '**Strictly Private and Confidential**' and '**Subject to Legal Professional Privilege**' to highlight the nature of the document;
- implement procedures to ensure that if a document is to be sent to a third party, it is done on an express basis of confidentiality;
- privileged documents (or communication of their substance) are not to be circulated wider than necessary and only on a confidential basis;
- when seeking the assistance of third parties in formulating a request for legal advice, make it clear that the information is required for the purpose of obtaining legal advice;
- legal files (both hardcopy and electronic) should be marked '**Legal in Confidence**';
- where a project legal team exists, legal advice that has been prepared by one legal advisor should be given to another legal advisor through the relevant Project Manager;

- care should be taken in making public statements or drafting correspondence in relation to legal advice; and
- should public disclosure of the fact that legal advice has been obtained, reference can be made to the fact that legal advice has been obtained on a particular issue, however the substance of the advice should not be revealed. This includes summarising or describing the conclusion of legal advice.

Circulation of drafts and any materials for inclusion in the report will be restricted to those internal VEZ employees involved in the preparation of the report, applicable managers and the Legal Advisor. Any broader distribution of information, especially to third parties could result in the loss of legal professional privilege.

A.3.3. Waiving Legal Professional Privilege

Legal privilege will be deemed to be waived if actions are inconsistent with the confidentiality which the privilege is supposed to protect. A waiver may occur either explicitly or implicitly, such as:

- committing a crime or fraud;
- inconsistency with the maintenance of the privilege;
- consenting to the release of certain privileged information;
- privileged information is mistakenly issued to a third party who reads or uses the information;
- communicating the full legal advice, substance of the legal advice or the conclusion of the legal advice without stating the legal reasoning.

Once legal professional privilege has been waived, privilege cannot be regained.

A.4 Undertaking investigation (root cause analysis) under Legal Professional Privilege

All investigations and communications should be undertaken under the guidance of the Legal Advisor and the analysis team should have a clear understanding of the purpose of the investigation.

Investigations should be undertaken for the purpose of obtaining the legal advice. The investigation should lead to the preparation of an appropriate factual report which is subject to legal professional privilege and in strict confidentiality.

A.5 Confidentiality

All electronic and hard copy evidence is stored under the guidance of the legal advisor. Strict adherence to legal instruction is required to ensure confidentiality of the communication and to maintain the privilege.

As a minimum, hard copy documents are scanned and stored electronically. The electronic data is stored confidentially within Cintellate, where access to the data is managed by the analysis team and access restricted by the system.

APPENDIX B – INCIDENT ACCOUNTABILITY

The site / division that has control and ownership of the location and work activities, at the time of an incident or injury, is accountable for the following relating to the incident:

- recording;
- reporting;
- management; and investigation.

Where an individual from a division completes work for an alternative division or business unit, and is under their direct control and supervision at the time of the incident, the alternative division is accountable for the incident, including the reporting, management and investigation.

Where a division of VEZ is contracted to another division (the Principal) both divisions are responsible for the investigation and reporting of any incident or injury that results from the actions of the subcontracting division.

In this situation the principal division has the overall accountability for the incident (i.e incident sign off) and the contracting division is accountable for any direct consequences or costs associated with the incident / injury.

In this case, the incident is to be reported against both divisions and reflected within each division's HSE performance data; and with the incident only reported once at the VEZ Level.

APPENDIX C – INCIDENT CLASSIFICATION

C.1 Actual and potential consequence

Table 5: Health and Safety Actual Consequences

Consequence classification	Definition	Inclusions / examples
Near Hit	An incident that has resulted in no personal contact or damage to property assets, or the environment but had the potential to do so.	<ul style="list-style-type: none"> Breach of hazard control Breach of a procedure where there is a risk of harm Breach of a Life Saving Rule where there is no actual loss Object falling from scaffold above narrowly missing worker below Excludes Drug and Alcohol breaches identified through random or blanket testing. Drug and alcohol breaches will be managed through human resource behavioural breach processes with due consideration of just process and actions in accordance with the seriousness of the breach.
Minor Injury - No Treatment (MI-NT)	An injury caused by an actual specific incident in which no treatment is required.	<ul style="list-style-type: none"> Visit to doctor or hospital for observation only or where negative diagnostic. Negative diagnostic procedures (i.e. x-ray, normal ECG); Minor insect bite requiring no treatment; Body part hit by moving object at low speed where no treatment is required; Body part hits an object at low speed in which no treatment is required.
First Aid Injury (FAI)	A First Aid Injury is defined as an injury where the level of treatment is not restricted to a Medical Practitioner and is inclusive of the level of treatment normally permitted to be provided by a First Aider, Paramedic or Occupational/ Registered Nurse.	<ul style="list-style-type: none"> Application of wound coverings such as bandages, Band-Aids™, gauze pads, butterfly bandages or Steri-Strips™. (The application of sutures (stitches), staples or other such wound closing devices are considered Medical Treatment); Use of non-rigid means of support (e.g. elastic bandages); Use of non-prescription medication; Removal of foreign bodies in the eye not embedded (i.e. by irrigation or use of cotton swab); Removal of foreign bodies in a wound by simple means (i.e. by use of tweezers, cotton swab, irrigation); Drilling of a nail to relieve pressure or draining fluid from blister; Use of single dose prescription medication administered on the first visit; Treatment includes RICE i.e. Rest, Ice, Compression, Elevation; 2 or less interventions by a licensed health care professional (i.e. Physiotherapist, Chiropractor) upon referral of a medical practitioner; Superficial dental treatment such as smoothing or polishing.
Medical Treatment Injury (MTI)	An injury where the level of treatment is restricted to a Medical Practitioner, Medical Professional or licensed Health Professional (on referral by a treating Medical Practitioner). Note: Treatment provided by a Medical Practitioner that is normally permitted to be provided by a First Aider, Paramedic or Occupational/ Registered Nurse is not classified as a Medical Treatment Injury.	<ul style="list-style-type: none"> Loss of consciousness; Application of sutures (stitches), staples or other such wound closing devices (wound coverings such as bandages, Band-Aids™, gauze pads, butterfly bandages or Steri-Strips™ are considered First Aid); Removal of foreign body embedded in the eye; Removal of foreign bodies from a wound where procedure is complicated (i.e. due to depth of wound); Use of prescription medication or prescription strength medication (except for a single dose administered on the first visit for a minor injury or discomfort); 3 or more interventions by a licensed health care professional (i.e. Physiotherapist, Chiropractor) upon referral of a medical practitioner, where it is not for preventative treatment; Treatment of partial or full thickness burns; Positive diagnostic procedure (i.e. diagnosis of a fracture, abnormal ECG); Dental treatment, excluding superficial treatment such as smoothing or polishing; Intravenous saline drip for treatment of heat stress; Excludes hospital observation where a negative diagnosis has been established.
Restricted Work Injury (RWI)	An injury requiring medical treatment where the treating Medical Practitioner has certified that an injured employee is unable to perform either one or more of their routine work functions or from working the full day on their next rostered shift. Routine work functions are the work activities that the person performs at least once a week.	
Lost Time Injury (LTI)	Where an employee is unable to work their next, or any subsequent, full rostered shift/workday due to a work related injury.	<ul style="list-style-type: none"> Where certified by medical practitioner as totally unfit for duties. Where hospitalised for treatment for a full rostered shift/workday. Excludes delay as a result of travel to the required medical facility, or availability of medical equipment or specialist.
Fatality	An incident that has resulted in the loss of an employee's life	n/a
Non-Work Related	Any injury that occurs outside of work hours and has no known link to work activities. Any injury, illness or incident that results solely from normal body movements, e.g. walking unencumbered, talking, sneezing, coughing, provided the action does not involve job related motion and the work environment does not contribute to the injury or illness	<ul style="list-style-type: none"> Sport activities Approved social activities Injuries resulting from travel to and from place of employment (work) Injuries resulting from business appointed accommodation Incident occurs at home due to the home environment, where approved work is being carried out, i.e. tripping over dog Acts of violence with occur off-site and out of work hours
Non-Conformance Event	Deviation from a procedure where there is no risk of harm.	<ul style="list-style-type: none"> Technical breach, such as failure to remove a personal danger tag. Excludes Drug and Alcohol breaches identified through random or blanket testing. Drug and alcohol breaches will be managed through human resource behavioural breach processes with due consideration of just process and actions in accordance with the seriousness of the breach.

Table 6: Environment Actual and Potential Consequence Levels

Consequence Level	Defintion	Inclusions
Level 5 Catastrophic	Widespread impact requiring remediation >1 year	<ul style="list-style-type: none"> Catastrophic release of contaminant to highly visible or protected area e.g. spill of contaminants (>5,000L) into the Great Barrier Reef Marine Park Extinction of a species caused or likely within a generation
Level 4 Severe	Widespread impact requiring remediation of <1 year OR	<ul style="list-style-type: none"> Release of contaminants into a protected water body > 10,000 tonnes of CO_{2e} greenhouse gas release Fire requiring external response (e.g. bushfire)
	Surrounding area impact requiring remediation > 2 years	<ul style="list-style-type: none"> Destruction (non-repairable damage) to cultural heritage site or protected area Destruction of significant area >5ha of protected habitat or > 15 protected species fatalities in one incident Introduction of contaminant to groundwater system Carcinogenic/toxic contaminant released to community offsite Continuous (>48 hours) or regular (>twice daily) contamination to waterway above background water quality levels.
Level 3 Major	Surrounding area impact requiring remediation of >1 month to 2 years	<ul style="list-style-type: none"> Large dust release requiring cleaning of neighbourhood, with multiple public complaints received Illegal clearing or unauthorised clearing of a protected area 1,000-10,000 tonnes of CO_{2e} greenhouse gas release Single release of contaminants to immediate waterway Fire (off site or on site) ERT required to extinguish Multiple protected species fatalities Illegal dumping of hazardous controlled waste
Level 2 Moderate	Immediate area impact requiring remediation of < 1 month	<ul style="list-style-type: none"> Release of contaminants to ground requiring mechanical or chemical means to remove, replace or remediate contaminated soil A single protected species fatality that requires regulatory notification (by VEZ or Client) [if species is found but no known Company event then this could be uncontrolled] 100-1,000 tonnes of CO_{2e} greenhouse gas release Non approved clearing of vegetation that requires reinstatement / revegetation Fire on site (e.g. visible flames) with MGL response only [put out before ERT arrives if they are required to be called] Illegal controlled human waste disposal (sewerage) Breach of noise conditions leading to public complaint
Level 1 Minor	Immediate area impact, no remediation required	<ul style="list-style-type: none"> Spill to ground that does not require mechanical or chemical means of removal [REQUIRE – ie could be done with a shovel, however if machinery utilised due to ease of use then this would still be a level 1] Non-approved clearing of vegetation, with no remediation required Animal strike or interaction with vehicle, plant or equipment causing injury or fatality Smoulder fire (e.g. butt bin ash smoking put out with fire extinguisher or fire blanket) Illegal waste disposal / littering off site <100 tonnes of gas release Topsoil impact (loss of topsoil, loss of seed stock, compaction, general disturbance) Off tenure impact on vegetation / soils (driving tracks, compaction)
Near Hit (does not result in actual environmental damage)	A failure or release that could impact the environment if controls were not in place or a breach in conditions on site	<ul style="list-style-type: none"> Oil leak on bitumen / covered ground Uncontrolled release into a bund from a storage container / plant Unauthorised clearing into a buffer zone Uncontrolled release of potable water Breaching ministerial / approval conditions (e.g. fauna inspections, waste tracking records, mandated inspections, license reports not submitted) Breaching weed/seed procedures Failure to stop work as required by contract or licence conditions for fauna (marine, migratory birds) Accessing cultural heritage site without approval

Table 7: Potential Health Exposure Consequence

Potential Health Exposure	Potential Health Consequence	Recommended Consequence level
Asbestos	Exposure to asbestos can result in the development of serious illnesses such as malignant mesothelioma, lung cancer and asbestosis. Asbestos is only a risk to health when asbestos fibres become airborne and are inhaled into the lungs. The risk to health increases with the number of fibres inhaled and with frequency of exposure. A one off exposure in the workplace is likely to be associated with low risk to health. Symptoms will generally appear 10-50 years post exposure.	<p>Repeated exposure to disturbed asbestos fibres: Level 5</p> <p>One off exposure: Level 1</p>
Synthetic Mineral Fibres	<p>Synthetic mineral fibres (SMF) is a term used to describe a fibrous product manufactured by the process of blowing or spinning a molten mineral raw material into a fibrous 'woollen' product that is used for insulation.</p> <p>Short term exposure may cause:</p> <ul style="list-style-type: none"> discomfort, tickling and dryness of the nose, throat and respiratory tract, especially for those who suffer hay fever, asthma or bronchitis; temporary skin irritation, particularly where there is rubbing from clothing such as cuffs and collars; and severe irritation to eyes. <p>Current scientific opinion is that SMF caused chronic health effects will not occur under typical "modern-day" operations, provided adequate precautions are taken in the workplace</p>	Short term health effects Level 2
Lead	Lead poisoning occurs when lead is ingested or lead dust is breathed in. Lead poisoning symptoms usually appear over a period of months or years of exposure. Low levels of exposure can cause a range of symptoms that are treatable with removal from the lead. High levels of lead in a person's body can cause seizures, kidney damage and nervous system damage, which depending on exposure levels can be reversible. Removal from the source will usually result in full recovery from moderate exposure. In more severe cases, chelation therapy is required.	<p>Moderate exposure: Level 1</p> <p>High exposure: Level 4</p>
Silica	Exposure to silica occurs through inhalation, and can result in silicosis of the lungs, which significantly affects lung function. In its chronic form, symptoms develop 10 years or more after exposure to relatively low concentrations. Acute silicosis occurs where exposure concentrations are the highest, and can cause symptoms to develop within a few weeks to 4-5 years after initial exposure. Silicosis is a progressive condition that gets worse over time. There is no cure, can be treated to reduce symptoms. After diagnosis, sufferers may live a few months to several years.	Level 5
Sewage / Black Water	Hepatitis A can result from exposure to (and ingestion of) raw sewage. Symptoms are usually mild and resolve on their own. Most patients recover within 3-6 months. Vaccinations are recommended for any personnel working in areas where there is a potential exposure to relevant toxins.	Level 3

<p>Contaminated Grey Water</p>	<p>Contact with wastewater or its products may cause exposure to pathogens (disease causing microorganisms) which can potentially lead to a number of illnesses for example:</p> <ul style="list-style-type: none"> • Gastroenteritis (diarrhoea or vomiting); • Giardiasis and Cryptosporidiosis (severe stomach cramps, diarrhoea or vomiting); • Viral infections such as hepatitis (liver infections); • Infections of the skin or eyes. <p>Illnesses contracted from greywater tend to be short term and treatable.</p>	<p>Level 1</p>
<p>Vector borne diseases</p>	<p>Vector-borne diseases are caused by disease-producing microorganisms that are transmitted by blood-sucking mosquitoes, ticks and fleas known as vectors. Vector-borne diseases include infections such as Ross River virus, dengue fever, malaria and Chikungunya. Whilst some vector-borne diseases can be potentially lethal, this is very uncommon when medical treatment is gained. With rest and medical treatment symptoms associated with most vector borne diseases, will resolve within 6-12 months. Potential for exposure to a vector-borne disease will need to consider location where the person was when bitten, and World Health Organisation information in regard to outbreaks in these areas.</p>	<p>Personnel in high risk area: Level 4</p> <p>Personnel in low risk area: Level 1</p>
<p>Dust</p>	<p>The type and size of a dust particle determines how toxic the dust is. However the possible harm the dust may cause to your health is mostly determined by the amount of dust present in the air and how long you have been exposed to it. Dust particles small enough to be inhaled may cause:</p> <ul style="list-style-type: none"> • irritation of the eyes • coughing • sneezing • hayfever • asthma attacks. <p>Breathing in high concentrations of dust over many years is thought to reduce lung function in the long term and contribute to disorders like chronic bronchitis and heart and lung disorders.</p>	<p>Level 2</p>
<p>Hazardous Substances</p>	<p>The risk to a person's health of exposure to any hazardous substance will need to be assessed taking into account the following:</p> <ul style="list-style-type: none"> • the level of toxicity • the likely level of exposure during work activities • the types of processes used to handle the chemicals at work • the control measures in place, for example ventilation systems <p>The health risks of the substance being used can be assessed related to the above factors to determine overall potential health exposure level.</p>	<p>Level 2 (may vary depending on substance and related health effects)</p>

<p>Blood Borne Pathogens</p>	<p>A number of factors need to be considered in determining classification relating to potential exposure to blood borne pathogens including:</p> <ul style="list-style-type: none"> • Assessment of the significance of the exposure (Was there an injury that pierced the skin? Was there contact with non-intact skin with blood?) • The status of the source individual (is it known if the source individual is a carrier of a blood borne pathogen?) • The status of the exposed person with respect to blood borne pathogens (ie: vaccination). <p>Potential health exposures include HIV, Hepatitis B, or Hepatitis C. Hepatitis B and C can both be effectively managed with treatment. If untreated, scarring on the liver can result in liver cancer, however this is rare if managed. HIV can also be effectively managed, however is potentially fatal long term due to weakening of the immune system over time.</p>	<p>Potential exposure to HIV: Level 5</p> <p>Potential exposure to Hepatitis B/C: Level 3</p>
<p>Biological Pathogens</p>	<p>Biological bacterial pathogens can be transferred person to person via coughing or sneezing, or can also be present in contaminated water or food. Whilst biological pathogens have potential to result in long term health effects if untreated, with early identification and medication, a full recovery within days to weeks is expected. Biological pathogens include: tuberculosis, cholera, typhoid fever and tetanus.</p>	<p>Level 3</p>

C.2 Controlled and uncontrolled activity incidents

Due to the nature of VEZ' business activities, and the nature of interaction that VEZ has with clients, other contractors and other general activities that are beyond VEZ control and influence, not all incidents that affect VEZ can be controlled or significantly influenced by VEZ management.

As such, incidents can be further categorised by the level of control of the activity, i.e. controlled or uncontrolled.

All incidents involving VEZ personnel and VEZ activities shall be presumed to be 'Controlled' until evidence is established that render the incident 'Uncontrolled'.

The classification of an actual consequence 3 or potential consequence 4 and 5 incident as 'Uncontrolled' will be at the discretion of the Managing Director following consultation with the Group Manager HSE. Potential consequences 3 and under may be classified "Uncontrolled" by the relevant Divisional HSE Manager.

Table 8: Incidents Resulting from Controlled / Uncontrolled Activity

Term	Definition
Controlled	<p>Controlled Activity Incidents are incidents that occur within a VEZ controlled work environment. A VEZ controlled work environment is a work environment in which VEZ can set or influence HSE Standards and directly supervise or enforce the application of HSE standards.</p> <p>Work environment is defined as the establishment or other locations where one or more employees are working or are present as a condition of employment.</p> <p>For clarification, labour hire arrangements are considered to be controlled activities.</p>
Uncontrolled	<p>Uncontrolled Activity Incidents are incidents which affect or have the potential to affect the health, safety or wellbeing of VEZ personnel that is caused by a work environment not controlled by VEZ.</p> <p>Uncontrolled Activity Incidents must meet the following criteria:</p> <ul style="list-style-type: none"> • Occur in, or are the result of, a work environment in which VEZ cannot set or influence HSE Standards and directly supervise or enforce the application of HSE Standards; and • The Incident is not caused or contributed to by actions or activities of VEZ or any VEZ personnel; and • The incident was not reasonably foreseeable given an appropriate level of due diligence on VEZ' behalf.

For the purposes of performance reporting and analysis, uncontrolled activity incidents are not included in VEZ' actual incident statistics.