

	GUIDELINE : Incident Management System	Page 1 of 6
		H&S&Q-GUID-003
		Rev: 09 (2022)

Purpose:

Should any incident/ accident occur, it is important that Afrimat respond to such incident/ accident in the correct manner. The process of responding to an incident/ accident is generally known as incident management. The aim of the incident management process is to understand the true root causes of an incident/ accident and to implement corrective actions to ensure that a similar situation is avoided in future. The incident investigation process is neither a head hunting exercise nor an exercise to blame specific people for things that happened or did not happen.

Formatted: Font color: Auto

Afrimat requires all employees to declare they access the work place injury free and exit the work place injury free. Every incident must be reported before the end of shift irrespective of the type of incident and if an injury occurred or not. No report of an injury will be accepted the next day.

Formatted: Font color: Auto

An Incident Management system is available where all incidents must be recorded in the same month it took place to ensure it is part of the statistics. The cut of date for the statistics is the 9th of each month. The incident report form for detailed investigations must be used. See annexure included

Formatted: Superscript

1. Afrimat is committed to investigate and report the following incidents:

- **All incidents resulting in near misses:**
 - This is regarded as an incident. Is an unintended event, which under slightly different circumstances, could have resulted in harm (injury, illness, damage)
- **All incidents resulting in property damage:**
 - Damage or destruction of company, public or private property caused either by a person who is not the owner of the property or natural phenomena
- **All incidents that relate to First aid:**
 - Any treatment that does not require any compensation claims from any compensation authorities.
 - Visits to a medical practitioner / physician or site first aid facility, solely for observation, counselling or first aid treatment such as:
 - Cleaning, flushing or soaking wounds on the surface of the skin.
 - Using wound coverings such as bandages, band-aids, gauze pads, etc; or using butterfly bandages or steri-strips.
 - First degree burns.
 - Using non-rigid means of support, such as elastic bandages, wraps, non-rigid back belts, etc.
 - Using temporary immobilisation devices while transporting an injured worker, e.g. splints, slings, neck brace, back boards, etc.
 - Removing foreign bodies from the eye using only irrigation.
 - Removing splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs or other simple means.
 - Using finger guards.
 - Drinking fluids for relief of heat stress
- **All incidents that relate to medical treatment:**

Formatted: Font color: Auto

Formatted: Font color: Auto

	GUIDELINE : Incident Management System	Page 2 of 6
		H&S&Q-GUID-003
		Rev: 09 (2022)

A Medical Treatment Injury is an occupational injury, there is no lost days and the persons got treatment from a medical provider beyond first aid measures.

- Any work-related injury resulting in a loss of consciousness.
 - Use of prescription medication, i.e. medication that can only be prescribed by a medical practitioner/ physician.
 - Use of stitches / sutures or staples to close a wound.
 - Any work-related injury requiring antibiotics.
 - Second degree burn– based on the treatment required and the risk of infection e.g. a small burn may only require first aid treatment, whereas if a broader area is affected then medical treatment may be required.
 - Removal of foreign bodies from the eye requiring more than irrigation or cotton swabs to remove them.
 - The use of casts, splints or other rigid stays to immobilise parts of the body.
 - A positive x-ray diagnosis for fracture(s).
 - Surgical removal of foreign material or dead skin, i.e. surgical debridement.
 - Removal of a fingernail or toenail.
 - Extensive, long term or ongoing physiotherapy or chiropractic treatment prescribed for rehabilitation purposes and not preventive measures. For example: a series of five or more treatments by a physiotherapist or chiropractor or treatment carried out longer than one month in duration.
 - Admission to hospital for observation for less than 12 hours.
 - Immunisation for tetanus
 - Analgesia (pain tablets) or anti-inflammatory medication
- **All incidents that relate to lost-time injuries (IOD's):**
 - A Lost Time Injury is an occupational injury or illness that causes the injured worker to be unable to work for any full shift, subsequent to that on which the injury occurred. The day of the injury is not counted as a lost day. If the next shift is leave or a weekend the days will still be counted and classified as a lost time injury according to COID processes
 - Occupational disease is from the date of compensation approval from RMA or COID
 - If an employee or 3rd party person is involved in an off-site accident (e.g. motor vehicle accident) whilst conducting business for Afrimat, then any resultant injury must be included as a lost time injury (regardless which party caused the accident)
 - **All incidents that relate to a fatal injury**
 - All fatal injury or accidents to be reported to the Group SHEQ Manager
 - Fatal injury of accidents that occur off the Afrimat premises by a 3rd party transport company must also be reported and the 3rd party investigation submitted to Afrimat for comments and additions
 - All fatal injury or accident investigation information to be reported to the Sustainability Manager and CEO

	GUIDELINE : Incident Management System	Page 3 of 6
		H&S&Q-GUID-003
		Rev: 09 (2022)

▪ **Environmental incidents:**

Environmental incident include but is not limited to :

- All incidents having a negative impact on the environment
- Any Environmental legislation contravened
- Dust fall out over exposures

The severity of the incident determines response time to correct the nonconformance

Finding	(Not that bad/urgent, but need to be rectified/repared	3 months	Report in Afrimat Incident reporting system
Important	(Need to be rectified/repared)	1 month	Remediate
Significant	(Rectify/Repair immediately) –	1 week	Record on Afrimat Incident Report System and Investigate
Critical	(Stop the site or section of site and rectify/repair immediately)	1 to 2 days.	Investigate and complete incident form. Inform the authorities

Formatted: Justified

Formatted: Indent: Left: 2.22 cm, No bullets or numbering

▪ **Occupational Diseases and variance cases:**

- NIHL variance 3% pro-active investigation and any other % higher than 3 %
- Decreased lung function FEV1/FVC % less than 70% investigate proactively, FEV1FVC of individual exceeds an annual average of 200ml(0.2l) between tests

▪ **Occupational Hygiene:**

- Over exposures in noise, personal dust, vibration, fumes, thermal stressors must be investigated [and the reports submitted to management for actions.](#)

2. The Afrimat incident management process shall – as a minimum, involve the following steps:

- Reporting of an incident:
 - All incidents need to be reported immediately to the person in charge of the site or section; if not possible then it must be reported the same day before end of shift to the Person in charge of the site or section.
 - The Responsible Person of a site must report the incident to the appointed Regional S.H.E. Manager or Group S.H.E. Manager the same day the incident occurred.
 - The incident detail is then reported to the Executive Head HR & Sustainability
 - The incident will be discussed at the bi-weekly MANCOM [teleconference-virtual meeting](#) to ensure prevention in other areas through the various MDs

	GUIDELINE : Incident Management System	Page 4 of 6
		H&S&Q-GUID-003
		Rev: 09 (2022)

- The incident should be reported on the prescribed documentation ([Capture it on the Incident Management system and complete the](#) H&S incident report form & Environmental incident report form)
 - The Employer is responsible to [report the incident to COID / RMA](#) and follow up submitted occupational injury or disease cases to COID/RMA or identify an individual to do so
- Incident investigation under the guidance of a qualified investigator, if possible a neutral person to that section/ site:
 - SHE Manager/ Officer
 - Environmental Conservation Officer (ECO)
 - SHE Representative
 - Union Representative
 - Management or Supervisors
 - Occupational Health Practitioner or Occupational Health Nurse Practitioners
 - Occupational Hygienist
- Incident investigation:
 - Gather statements the same day of the incident and obtain photos from different angles of the incident or accident
 - Set a date for this investigation, if possible within 5 days of incident. All parties involved to be informed of their attendance required.
 - Participants that may be involved in such an investigation:
 - Lead Investigator (always a neutral person who is not directly involved with the section/ department being investigated)
 - Witnesses (expert witnesses such as S.H.E. witness, Technical witnesses etc.)
 - Line Management (of the staff involved)
 - Staff Involved (directly involved in the accident/ incident)
 - Person that has worked in the same area or job
 - Union Representative
 - The site where the incident took place must be investigated by the Lead investigator and the designated SHE Manager/ Officer.
 - Gathering information during the site investigation:
 - Environmental Conditions (e.g. road conditions, immediate surroundings, weather, visibility, spills, etc.)
 - Were all the control systems and safety devices active and in place (correct use of PPE, guarding, Lockouts, etc.)
 - Physical Observations (e.g. skid marks, blood marks, etc.)
 - Photographs of site, surroundings and equipment
 - Occupational Hygiene exposure results
 - Man job specification for the position
 - Medical status of person fit, unfit, fit with restriction

	GUIDELINE : Incident Management System	Page 5 of 6
		H&S&Q-GUID-003
		Rev: 09 (2022)

- Gathering information during the formal investigation proceedings:
 - Technical Observations (e.g. GPS Tracking reports, condition reports, failure reports, etc.)
 - Questioning the person's involved in the incident on his/her/their recollection of events (cover the essence in the report & attach full statements as annexure)
 - Questioning the witnesses on their recollection of events during the incident (cover the essence in the report & attach full statements as annexure)
 - Questions that may be asked:
 - ❖ Is it a normal procedure/ practice?
 - ❖ Was it a new task that was performed?
 - ❖ Unusual task?
 - ❖ How many times the task has been performed previously?
 - ❖ How long has he/she been doing this task?
 - ❖ Has his/her superior explained the hazards or threats?
 - ❖ What can we do to improve this situation?
 - ❖ What can be done to prevent a recurrence?
 - Training and experience of the staff involved (S.H.E. training, Operators training, Certification, etc.)
 - Any other related matters/issues
- Incident root cause/s determination
- Incident contributing cause/s determination
- Identification of corrective actions to prevent re-occurrence
- Formal tracking of corrective action implementation
- Incident close-out (i.e. all identified corrective actions implemented and operational/working properly)
- The completed incident investigation report with identified corrective actions will be compiled by the Lead investigator and distributed to:
 - Site Management and SHE Representatives
 - Regional SHE Manager
 - Group SHEQ Manager
- A summary of all the incidents and its investigation findings will be compiled by the Group SHEQ Manager [for the group and Regional SHE Managers and/or She Officers will manage the business unit summaries and send it to the BU manager.](#)
 - Lost-time injuries, used to report on the LTIFR
 - Near misses & Property damage report (Including Environmental incidents)
 - First aid & Medical treatment cases report
 - Occupational Diseases reported on confidential Health Report

	GUIDELINE : Incident Management System	Page 6 of 6
		H&S&Q-GUID-003
		Rev: 09 (2022)

- The information [will](#) be used as a discussion point during monthly SHE meetings and daily Toolbox Talks.

3. Fatal accidents

All fatal accidents shall be investigated by the Group SHEQ Manager, the Regional SHE Manager and the Management (including the SHE Representative and Union Representative) of the specific site and region under the direct supervision of the CEO of Afrimat Limited.

4. Corrective action implementation and incident close-out

It shall be the responsibility of the appointed Responsible Persons to support any incident investigation in their own area of responsibility and to implement any corrective actions assigned to them.

Incidents shall be formally closed out by the Lead Investigator after all identified corrective actions have been verified by the Lead Investigator as Implemented & Operational.

Approved by:

Name: Collin Ramukhubathi

Position: Executive Director

Position: Executive Director

Position: Group SHEQ Manager

Name: Collin Ramukhubathi		
Position: Executive Director	Signature	Date
Name: L van den Berg		
Position: Group SHEQ Manager	Signature	Date