Lithko CONTRACTING

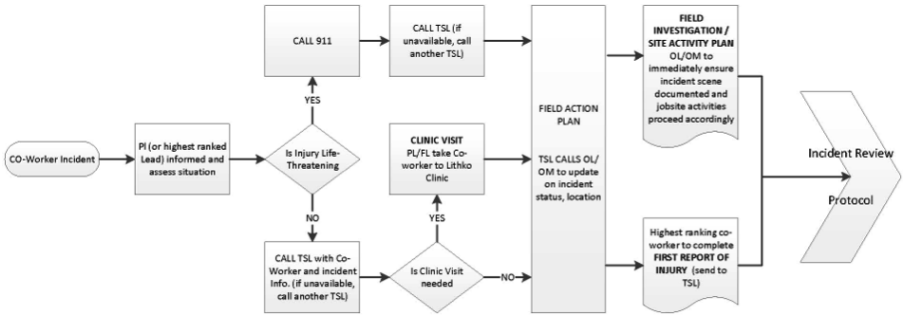
OPERATIONAL ACTIVITY TRAINING
PHASE: MISCELLANEOUS

OPERATIONAL ACTIVITY: INCIDENT PROTOCOL REVIEW

The following operational activity training should serve to review the Incident Protocol. The steps below should be followed anytime a co-worker is involved in an injury. This OAT should be reviewed at the beginning of each project and periodically with our crews to ensure our co-workers act swiftly when an incident happens.

INCIDENT PROTOCOL:

Anytime a co-worker is injured on a job, the Incident Protocol must be followed. When helping co-workers that have been hurt on the job be sure you do not put yourself in a situation where you are exposed to unnecessary hazards to help.



- **Ensure no other co-workers are exposed to the hazard that caused the incident.**
- Always **get PL involved in incident protocol**.
- **Determine if a call to 911 is needed.** Once 911 is called, you must also call a TSL.
- **Contact TSL.**
- **Do not work in the area** where the incident occurred **until PL lets you know all is clear.**
- **Work with OL/OM and/or TSL to collect photo's needed to document jobsite conditions** during time of incident.
- **Collect witness statements** that may help to clarify how the injury occurred.
- It is the **responsibility of all co-workers to report injuries immediately** to the Lead on-site.

WHAT IF I CAN'T REACH THE PROJECT LEAD:

If the PL is not onsite and cannot be reached by cell phone, the Field Lead will act as the point person for protocol. If 911 is not needed, the TSL should always be your first call once the Lead on-site is notified.

KEEP CALLING – Your job isn't done until you've reached your TSL, your OM, or if all else fails, your Area Lead!

KEY INFORMATION:

Job site address: _____

PL Phone #: _____

FL Phone #: _____

TSL Name and Phone #: _____

Closest Approved Clinic: _____

Location of First Aid Kit and Neutralite: _____

CONCLUSION:

In order to ensure we are providing the best possible care for an injured co-worker, we must understand the steps to follow and be prepared to react. Verify the "Key Information" above and check your First Aid and Neutralite supplies monthly.

DATE COVERED: _____

SIGNATURE: _____ _____ _____

_____ _____ _____

_____ _____ _____