Industrial Accident / Incident Reporting Mechanism for Capital Works New Works Construction Sites

Presenters:
Mr. Timothy CT LAU (M/SH)
Mr. Kong Kwok Ming (COW/A3)
Overview

- Accident and incident management
- Legal and contractual obligations of Contractor
- Reportable accident, fatal/serious incident, non-serious accident, dangerous occurrence, near miss
- Accident / incident reporting workflow
  - Accident / incident report Form (DCMP - F787)
  - Supplementary information on accidents on construction sites
  - Dangerous occurrence report form
  - Fatal accident / serious incident report (DCMP - F758)
  - Weekly report for hospitalization (DCMP - F7100)
- Summary
Prevention is better than cure

Site accidents and incidents reflect the effectiveness in the implementation of safety management system on individual sites, which may serve as a reactive indication or fore-warnimg of any deficiencies in site safety management.

Tackle potentially high risk activities being the common causes of serious accidents – reporting of near miss / incidents on site (though not serious by immediate effect, may have potentially serious consequence, such as those involving but not limited to falling from height, falling object, being struck by moving object, tower crane lifting, public safety etc.)

Foster proper accident/incident management, by triggering action parties to provide timely reporting, develop response and implement actions to ensure successful recovery from incidents.

Contractor has to share lessons learnt from incidents, together with the development and implementation of appropriate corrective actions directed to preventing or mitigating the risk of similar occurrences in the future.

Be vigilant on all fronts to prevent accidents / incidents.
Legal and Contractual Obligations of Contractor

- Contractors have statutory obligation to report to the Labour Department occupational injuries (including industrial accidents) and Dangerous Occurrence (DO) that have occurred on site.

- Report accidents and dangerous occurrence as defined in the Factories and Industrial Undertakings Regulations to the Labour Department in prescribed forms (Form 2 with Supplementary Information Sheet & Dangerous Occurrence Report Form).

- Copy such reports to the CM according to GCC Clause 27.

- Notify the Housing Department (HD) Site Staff of all ‘reportable accidents’ as defined under the Factories and Industrial Undertakings Regulations and any other incidents to be reported under the accident/incident reporting procedures of HD.

- Follow the accident/incident reporting procedures of HD.

- Notify HD site staff immediately (i.e. within the day of the accident/incident) of –
  - Serious accident / incident
  - Reportable accidents, dangerous occurrence and near miss /incidents on site (though not serious by immediate effect, may have potentially serious consequence)
  - Death of person

- For accident / incident with serious consequence or potentially serious consequence on site, dangerous occurrence and death of persons, CTO-in-charge has to report ipso facto to respective CM and AD immediately by email.
- Provide statistics and analysis of accidents/incidents, investigate and ascertain contributory factors and root causes, identify the trends and recommend means of prevention and improvement.
- Provide necessary information to the Nominated Sub-contractors’ Safety Supervisors for preparing Nominated Sub-contractors’ accident report and investigation.
- Provide means to communicate accident statistics information, recommendation to prevent recurrences and lessons learnt from previous accidents / incidents to all persons working on the Site.
- For injury involving hospitalisation for over a week, contractor has to provide weekly report to CM via HD site staff.
- Report to monthly site meetings findings and actions.
Reportable accident:

- Under the Factories and Industrial Undertakings Ordinance, refers to injuries arising from industrial activities, which incurs incapacity of the person injured for more than 3 days.
Serious (including fatal) incident:

- Loss of life at a construction site;

- Serious bodily injury at a construction site:
  (a) resulting in a loss or amputation of a limb; or
  (b) which has caused or is likely to cause permanent total disablement to the injured.

- Dangerous occurrence or incident at a construction site leading to or resulting
  in an injury that is considered serious, or damage to works or property on or
  adjacent to the construction site that poses a potential threat to public safety.
Dangerous Occurrence:

- Bursting of a revolving vessel, wheel, grindstone etc.
- Collapse or failure of a crane, derrick, winch etc.
- Explosion or fire causing damage to the structure etc.
- Electrical short circuit or failure of electrical machinery, plant or apparatus, attended by explosion or fire or causing structural damage etc.
- Explosion of a receiver or container used for the storage at a pressure greater than atmospheric pressure of any gas etc.
- Collapse in whole or part from any cause whatsoever of any roof, wall, floor, structure etc.
- Total or partial collapse of any overburden, face, tip or embankment in a quarry.
- Overturning of, or collision with any object by, any bulldozer etc.
Near Miss Incident:

- A work related event during which injury, ill health, or fatality could have occurred, but didn’t actually occur.

- Contractor has to notify HD site staff immediately (i.e. within the day of the accident/incident) incident with potentially serious consequence, such as those involving but not limited to:
  - falling object,
  - falling from height,
  - being struck by moving object,
  - tower crane lifting,
  - public safety, etc

- For incident with potentially serious consequence on site, CTO-in-charge has to report ipso facto to respective CM and AD immediately by email.
## Accident / Incident Reporting Workflow

<table>
<thead>
<tr>
<th>Immediate Actions</th>
<th>Within 7 Days</th>
<th>Follow Up Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Accident</strong> <em>(i.e. deaths or injuries which incur incapacity of the injured person for more than 3 days)</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>(1) Serious / Fatal Accident</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contractor to notify-</td>
<td>Contractor to submit –</td>
<td>Contractor to –</td>
</tr>
<tr>
<td>- HD Site Staff immediately <em>(i.e. within the same day of the accident).</em></td>
<td>- Form 2 and Supplementary Information on Accidents on Construction Sites <em>(SIS)</em> to LD with copy to CM.</td>
<td>- submit Investigation Report to CM.</td>
</tr>
<tr>
<td>- Police and LD within 24 hours.</td>
<td>- Accident / Incident Report Form <em>(DCMP-F787)</em> to CM.</td>
<td>- report findings and recommendations to Site Safety Committee &amp; Monthly Site Meeting.</td>
</tr>
<tr>
<td>CTO-in-charge to report ipso facto to respective CM, AD and DD(DC) immediately by email and telephone.</td>
<td>CM to submit –</td>
<td>- provide weekly report to CM for injury involving hospitalization over 1 week.</td>
</tr>
<tr>
<td></td>
<td>- Fatal Accident/ Serious Incident Report <em>(DCMP-F758)</em> to CRC.</td>
<td>CM to –</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- interview contractor.</td>
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<tr>
<td></td>
<td></td>
<td>- issue warning letter.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- trigger report to CRC.</td>
</tr>
</tbody>
</table>
**Immediate Actions** | **Within 7 Days** | **Follow Up Actions**
---|---|---
**Non-Serious Accident**
- For accident with potentially serious consequence such as: falling object, falling from height, being struck by moving object, tower crane lifting, public safety,
- **Contractor** to notify HD Site Staff immediately (i.e. within the same day of the accident); and
- **CTO-in-charge** to report ipso facto to respective CM and AD immediately by email.
- **Contractor** to submit –
  - Form 2 and SIS to LD with copy to CM.
  - Accident / Incident Report Form (DCMP-F787) to CM.
- **Contractor** to –
  - report findings and recommendations to Site Safety Committee and Monthly Site Meeting.
  - provide weekly report to CM for injury involving hospitalization over one week.
- For accident with potential serious consequence,
- **CM** to –
  - interview contractor.
  - issue warning letter.
  - trigger report to CRC
<table>
<thead>
<tr>
<th>Immediate Actions</th>
<th>Within 7 Days</th>
<th>Follow Up Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Incident</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Dangerous Occurrence</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Contractor</strong> to -</td>
<td><strong>Contractor</strong> to submit –</td>
<td><strong>Contractor</strong> to –</td>
</tr>
<tr>
<td>● notify HD Site Staff immediately (i.e. within the same day of the incident).</td>
<td>● Form 2 and SIS to LD with copy to CM (injury case).</td>
<td>● submit Investigation report to CM.</td>
</tr>
<tr>
<td>● notify LD within 24 hours and submit Dangerous Occurrence Report Form.</td>
<td></td>
<td>● report findings and recommendations to Site Safety Committee and Monthly Site Meeting.</td>
</tr>
<tr>
<td>● submit Accident/Incident Report Form (DCMP-F787) to CM within 24 hours.</td>
<td></td>
<td>CM to –</td>
</tr>
<tr>
<td><strong>CTO-in-charge</strong> to report ipso facto to respective CM and AD immediately by email.</td>
<td></td>
<td>● interview contractor.</td>
</tr>
<tr>
<td></td>
<td>CM to submit –</td>
<td>● issue warning letter.</td>
</tr>
<tr>
<td></td>
<td>● Fatal Accident/Serious Incident Report (DCMP-F758) to CRC for serious incident.</td>
<td>● trigger report to CRC</td>
</tr>
</tbody>
</table>
### Accident / Incident Reporting Workflow

<table>
<thead>
<tr>
<th>Immediate Actions</th>
<th>Within 7 Days</th>
<th>Follow Up Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>(4) Near Miss Incident</strong></td>
<td><strong>Contractor</strong> to submit –</td>
<td><strong>Contractor</strong> to –</td>
</tr>
<tr>
<td>For accident with potentially serious consequence such as: falling object, falling from height, being struck by moving object, tower crane lifting, public safety etc</td>
<td>- Accident / Incident Report Form (DCMP-F787) to CM.</td>
<td>- submit Investigation report to CM.</td>
</tr>
<tr>
<td><strong>Contractor</strong> to -</td>
<td></td>
<td>- report findings and recommendations to Site Safety Committee and Monthly Site Meeting.</td>
</tr>
<tr>
<td>- notify HD Site Staff immediately (i.e. within the same day of the incident).</td>
<td></td>
<td>For incident with potential serious consequence, <strong>CM</strong> to –</td>
</tr>
<tr>
<td><strong>CTO-in-charge</strong> to report ipso facto to respective CM and AD immediately by email.</td>
<td></td>
<td>- interview contractor.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- issue warning letter.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- trigger report to CRC</td>
</tr>
</tbody>
</table>
### (5) Death of Person(s) not due to Industrial Accident

**Immediate Actions**
- Contractor to -
  - notify HD Site Staff immediately (i.e. within the same day of the accident).
  - notify Police and LD within 24 hours.
- CTO-in-charge to report ipso facto to respective CM and AD immediately by email and telephone.

**Within 7 Days**
- Contractor to submit –
  - Form 2 and SIS to LD with copy to CM.
  - Accident/ Incident report Form (DCMP-F787) to CM. (via site staff)

**Follow Up Actions**
- Contractor to –
  - report findings and recommendations to Site Safety Committee and Monthly Site Meeting.
Incident/ near miss

Remind CM to trigger report to CRC if CM considered necessary
<table>
<thead>
<tr>
<th>Time of incident</th>
<th>Place of incident</th>
<th>Type of incident</th>
<th>Work process</th>
<th>Sequence of events leading to the incident</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work process</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Place of incident</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Type of incident</td>
<td></td>
<td></td>
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</tr>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Time of incident</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Sub-standard actions which had contributed to the incident

Personal factors which had contributed to the incident

Organisational factors which had contributed to the incident

The probability of recurrence of the incident

Sub-standard condition which had contributed to the incident

Corrective action
Machinery involved

Transporting or construction machinery involved

Near miss / incident is a non-reportable incident not involving any injury
### Supplementary Information on Accidents on Construction Sites

#### Annex 3B

This form is required to be submitted under the Employees’ Compensation Ordinance for accident. The co-operation of employers is sought to complete Sections I, II and III. The information will be used for the purposes of the Government and the public bodies concerned.

<table>
<thead>
<tr>
<th>Commencement of Construction Work</th>
<th>Expected Date of Completion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commencement of Construction Work:</td>
<td>Expected Date of Completion:</td>
</tr>
<tr>
<td>Month / Year</td>
<td>Month / Year</td>
</tr>
</tbody>
</table>

#### Contractor’s name

- Contractor Name: [ ]
- Site Address: [ ]
- Contact Telephone: [ ]

#### Contract No.

- Contract No. (if available): [ ]
- Date of Accident: [ ]
- Contact Telephone: [ ]

#### Particulars of Project

<table>
<thead>
<tr>
<th>Nature of Project</th>
<th>Private Project</th>
</tr>
</thead>
<tbody>
<tr>
<td>Civil Engineering</td>
<td>Yes</td>
</tr>
<tr>
<td>Maintenance and Repair</td>
<td>No</td>
</tr>
</tbody>
</table>

#### Public Works or Government Project

- Architectural Services Department
- Buildings Department
- Drainage Services Department
- Electrical & Mechanical Services Department
- Highways Department
- Water Supplies Department
- Housing Department

#### Particulars of Place of Fall (If injured by fall from height)

- Bamboo scaffold
- Fragile structure
- Material hoistway
- Working platform/fallwork
- Unfenced edges & lift shaft opening
- Ladder
- Others

Please “x” in the appropriate boxes.
# Dangerous Occurrence Report Form

**Annex 4**

**DANGEROUS OCCURRENCE REPORT FORM**

To: The Commissioner for Labour, Hong Kong

In accordance with Regulation 18 of the Factories and Industrial Undertakings Regulations, details of a dangerous occurrence are submitted below:

<table>
<thead>
<tr>
<th>Name and address of Industrial Undertaking</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Date and Time of the Dangerous Occurrence</td>
<td></td>
</tr>
<tr>
<td>Nature of the Dangerous Occurrence</td>
<td></td>
</tr>
<tr>
<td>Circumstances</td>
<td></td>
</tr>
<tr>
<td>Structural/Plant Damage</td>
<td></td>
</tr>
<tr>
<td>Casualties</td>
<td></td>
</tr>
<tr>
<td>Extract of Work Suspended</td>
<td></td>
</tr>
</tbody>
</table>

*In case of injury, the accident reporting form (Form 3) must be followed within seven days.*

如在傷亡，必須於七天內補繳第二款的職工傷害証據。

*Signature*

**Notes:**

This form must be sent to the Commissioner for Labour within 24 hours of a Dangerous Occurrence. 此文件必須於危險事故發生後二十四小時內向勞工處報送。
Dangerous Occurrence Report Form

STATEMENT OF PURPOSE FOR THE COLLECTION OF PERSONAL DATA
BY OCCUPATIONAL SAFETY AND HEALTH BRANCH
LABOUR DEPARTMENT

Reporting Accident or Dangerous Occurrence and Giving Declaration

Purpose of Collection
1. The personal data provided by you in this form will be used by the Occupational Safety and Health Branch of the Labour Department for the following purposes:
   (a) activities relating to the administration of the Factories and Industrial Undertakings Ordinance and Occupational Safety and Health Ordinance and other legislation administered by the Labour Department;
   (b) activities relating to the investigation of accidents and dangerous occurrences by Occupational Safety Officers; and
   (c) activities relating to checking compliance with legislative requirements and carrying on legal proceedings.

Classes of Transmitters
2. The personal data you provide may be disclosed to relevant persons and authorities (e.g. Government Offices, and Departmental, Law, etc.) for the purposes referred to in paragraph 1 above.

Access to Personal Data
3. You have a right of access and correction with respect to personal data as provided for in Sections 18 & 22 and Principle 6 of Schedule 1 of the Personal Data (Privacy) Ordinance. Your right of access includes the right to obtain a copy of your personal data provided to this department.

Exemptions
4. Personal data collected, including the making of access and corrections, should be addressed to:
   - Divisional Occupational Safety Officer (HQ)
   - Occupational Safety - Operations Division
   - Occupational Safety and Health Branch
   - Labour Department
   - 15/F, Harbour Building, 88 Harcourt Road, Central, Hong Kong.
Weekly Report for Injury Involving Prolonged Hospitalization (DCMP-F7100)

(A) This box to be completed by Contractor and HD Site Staff

To: Contract Manager (Post) via HD Site Staff
From: Contractor
Name
Date
Signature by Site Agent
Name
Date
Signature by HD Site Staff

(B) This box to be completed by HD Contract Manager

To: CRC via CRC Secretary (Post)
From: Contract Manager
Name
Post
Date
Signature by Contract Manager

Contract No.: 
Project Title: 
Main Contractor: 
Date of Accident/Incident: 
Name of Injured Worker: Name in English (Chinese name)
Sex: *Male / Female Age: 
Occupation/Trade: 
Employment Status: ☐ Subcontracted Worker / ☐ Direct Labour / ☐ Self Employed
Latest Condition of Injury: (Refer to Medical Certificate)

Submission status of DCMP-F7107:
☐ submitted previously. 
☑ attached herewith.

Note: For injury involving hospitalization for over a week, contractor has to provide this weekly report to CM via site staff.
Accident / Incident Reporting:

- Accurate and timely.
- Covers all fatal and serious accidents, non-serious accidents, dangerous occurrence, death of person and near-miss incidents (with potentially serious consequence, such as those involving but not limited to
  - falling object,
  - falling from height
  - being struck by moving object,
  - tower crane lifting,
  - public safety, etc)

- Submit all required documents: Form 2, Supplementary Information Sheet, DCMP-F787, contractor’s Investigation Report, Weekly report for hospitalization (DCMP-F7100) etc.
Accident / Incident Reporting (cont’d):

- Corrective action in DCMP-F787 to be beefed up to address the root causes of the accident / incident:
  - job hazard analysis
  - hazard elimination, substitution, mitigation, control
  - review of working procedure
  - strengthening of site supervision
  - enhancement of safety awareness
THANK YOU