

WorkCover Incident Notification Form

NOTIFICATION No: <u>270199</u> Notification Type: <input type="checkbox"/> Emergency Response <input type="checkbox"/> Immediate <input type="checkbox"/> Complaint <input checked="" type="checkbox"/> Reportable <input type="checkbox"/> Not Reportable <input type="checkbox"/> MOU Agency	INCIDENT No:
--	---------------------

Caller: TINA MARCHINGTON
 Organisation: CFA
 Phone: 0427 402 490

Notification Date: 18-FEB-2014
 Notification Time: 01:06 PM

Incident Date: 10-FEB-2014
 Incident Time: 12:00 PM

Company/Employer/Person: CFA

Incident Site Address: HAZELWOOD OPEN CUT MINE - BRODRIBB RD MORWELL

Melways Ref:
 Vic. Roads Map Ref:

Site Contact - Name: NICK BROWN
 Position: INCIDENT CONTROLLER
Phone: 0418 551 744

Brief description of Incident:

CFA EMPLOYEES (14 TOTAL) RECEIVED CARBON MONOXIDE EXPOSURE WHILE PUTTING OUT A FIRE AT THE HAZELWOOD OPEN CUT MINE. EMPLOYEES SELF REPORTED TO HOSPITAL AND WERE TREATED AT SALE & LA TROBE REGIONAL HOSPITAL.

Person/s injured - Name/s: CAROL BARRY, PHIL GRAHAM, JOE STODDART, RYAN JOHNSTONE, MICHAEL KNIGHT, ROBERT GIBBS, KATRINA BARTRAM, MICK CACHIA, PETER CHRISTIANSEN, SAM STEVENS, DOUG STEELEY, GREG PRINGLE, ADAM QUINN, AIDAN MILBOURN.

Details of injury: CARBON MONOXIDE EXPOSURE.

Incident Category: <input checked="" type="checkbox"/> OHS <input type="checkbox"/> DG <input type="checkbox"/> Equipment Public Safety <input type="checkbox"/> Other	
OHS Incident Type: <input type="checkbox"/> Plant <input checked="" type="checkbox"/> Environment <input type="checkbox"/> Other	
DG Incident Type: <input type="checkbox"/> Fire <input type="checkbox"/> Explosion <input type="checkbox"/> Spill <input type="checkbox"/> Gas escape <input type="checkbox"/> Explosive pick up <input type="checkbox"/> Other	
DG Description: <u>CARBON MONOXIDE</u>	
Emergency Services in attendance: <input type="checkbox"/> Police <input type="checkbox"/> MFB <input type="checkbox"/> CFA <input type="checkbox"/> EPA <input type="checkbox"/> Ambulance <input type="checkbox"/> Other	

Advice given:

Name of officer receiving Notification: <u>Jason Flanagan</u>	
Further Action- Officer referred to: <u>Sean Byrne</u>	
Group Office: <u>MHU MAJOR HAZARDS UNIT</u>	
<input type="checkbox"/> Inspector to attend	<input type="checkbox"/> No attendance
Officer attending:	Time of arrival on site:

GM/PRIO/TL/ER CONTROLLER: _____ **DATE:** _____

Notification sent to: <input type="checkbox"/> GM <input type="checkbox"/> FSU <input type="checkbox"/> Local Office Date:..... Time:.....am/pm
--