



Section 10.0 Policy

1.0 Introduction

Canadian Plains Energy Services (CPES) and its employees understand that the timely reporting of incidents, physical losses, substance releases and contravention of standards, whether internal or external, is extremely important to ensure the safety of its employees, contractors and the public. Employees will conscientiously observe all reporting requirements and will ensure that all incidents are reported to management at the earliest opportunity. More importantly, timely reporting of incidents will ensure that where required our employees receive medical treatment and that the corrective measures needed to prevent future incidents are implemented promptly.

2.0 Scope

An essential component of continuous Health, Safety and Environment (HS&E) performance improvement is the consistent reporting of incidents so that they can be properly investigated, lessons learned communicated, performance monitored, and systems and processes modified where required. All incidents including significant near misses and unsafe work refusals must be reported and investigated as required by CPES, our customers and regulatory requirements.

The requirements specified in this policy apply to all CPES employees, Independent Service Providers (ISPs) and subcontractors hired and supervised by CPES. All CPES Business Units (BU's) and departments are to comply with the requirements specified in this section.

Due to the fact that CPES performs work in numerous areas, there is a requirement to be familiar with all provincial and federal regulations. Different jurisdictions may vary on what type or severity of incident is reportable to them.

3.0 Objectives

The objective of this section is to provide a framework for the consistent response, notification, reporting, investigation and follow up of CPES incidents. It is also to use the information and "lessons learned" to improve our Health, Safety and Environment Management System (HSEMS), safe working conditions, environmental impact, regulatory compliance, customer service, and profitability.

4.0 Key Policy Statements

CPES' policy on Incident Management, Investigation & Follow Up supports the following statements:

- CPES will manage incidents to prevent further harm to people, property or the environment.
- Sites must be secured to protect the integrity of the evidence until approval to release the site is gained by the regulatory authority and/or CPES management through the site supervisor.
- Employees shall report all incidents and significant near misses to their supervisors immediately.
- Contractors shall report all incidents and significant near misses to the CPES manager or supervisor immediately.
- The severity or potential severity of the incident or near miss will determine the level of investigation to be conducted.
- Managers and supervisors shall ensure appropriate investigations are conducted, reports are completed, corrective actions identified and implemented where required.



INCIDENT MANAGEMENT, INVESTIGATION & FOLLOW UP

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- The Manager shall ensure all incidents are investigated; and where required, reported to the provincial or federal regulatory authority as required by legislation. The Manager shall:
 - a) Direct all incident investigations ordered by regulation,
 - b) Ensure incident reports are prepared and are complete,
 - c) Meet with investigating government inspectors, and
 - d) Share findings and corrective measures.
- The manager shall ensure appropriate corrective actions are taken to prevent reoccurrence.
- Workers' Compensation Board (WCB) reportable injuries shall be reported to the appropriate WCB office using the WCB's reporting procedures. Reports must be submitted within the time frame stipulated by applicable provincial jurisdiction (typically within 72 hours of the employer being notified of an injury).

In the case of catastrophic/significant/serious incidents, the written incident investigation report shall include a description of the incident, immediate causes, contributing factors and root causes of the incident that were identified. This report must also include corrective actions so that these incidents do not occur again.

First Aid attention to all injury incidents will be provided by qualified First Aiders.

Investigations will be conducted in a timely manner with an unbiased and accurate accounting of the facts. These investigations will be conducted by trained individuals and the cause analysis will follow an established investigation methodology.

Recommendations for corrective action will be followed up on to ensure effective implementation.

CPES's Leadership Team will monitor and evaluate health, safety, and environmental performance. Strategic and intervention initiatives will be based on Health Safety and Environment (HSE) performance and trends.

APPROVED: 
Aaron Karpan, President

April 1, 2021

Section 10.1 Definitions**1.0 Incident**

An unplanned incident or chain of events that has resulted in injury, illness or damage to assets, the environment, or company reputation. Also included are any regulatory or customer Health, Safety and Environment (HSE) notices of violation or citations relating to company activities. For the purposes of this document, incidents do not include the downgrading or failure of equipment from normal wear and tear and/or equipment maintenance or quality incidents that had no HSE consequence or potential.

1.1 Near Miss

A near miss (aka near hit) is an incident that could have resulted in illness, injury to people or damage to assets, the environment, company reputation, or consequential business loss, but did not (i.e an event without loss).

1.2 Injury

Any cut, fracture, sprain/strain, contusion, amputation, burn, etc. which resulted from a work-related incident. A one-time exposure to chemicals is also considered an injury. Repeated or extended exposure may result in disorders that are considered occupational illness. Work-related incidents, including overexertion that aggravate pre-existing conditions are injuries.

1.3 Occupational Illnesses

Occupational illnesses are any work-related abnormal condition or disorder, other than that resulting from an injury that is caused or mainly caused by exposures such as absorption, direct contact, ingestion or inhalation at work. Occupational illnesses can be acute (severe and of short duration) or chronic (an illness that lasts over a long period and sometimes causes a long term change in the body).

Examples of Injuries and Occupational Illnesses

- Hearing loss resulting from an explosion (an instantaneous incident) is classified as an injury, whereas if it results from exposure to noise over a period of time it is classified as an illness.
- Tendonitis resulting from a one-time blow to the tendons of the hand is considered an injury, whereas repeated trauma or repetitive movement resulting in the same condition is considered an illness.

1.4 Work-relatedness of Injury/Illness

An injury/illness is/are the adverse health effects to the person that occurs while an employee is performing work in accordance with his or her job. A causal relationship (work relatedness) is presumed to exist if;

- An incident or exposure in the work environment, either caused by or contributed to the resulting injury or illness, or significantly aggravating a pre-existing injury or illness.
- An injury or illness occurs to an employee when the individual is traveling on behalf of the company. For example, if an employee was injured while traveling to or from a field job, the injury would be considered work related. Similarly, if an injury occurred to an employee while the individual is on "rotational travel", on a designated route, it would be considered work related.
- Additional guidance in this area is provided by the Canadian Association of Petroleum Producers (CAPP) Guide to Health & Safety Performance Reporting (2013).

1.5 Employee

An employee is any person engaged in work activities for CPES and who is on the CPES payroll.



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1.6 Worker

Any person performing work on behalf of CPES at a worksite. This includes employees, Independent Services Providers (ISPs) and subcontractors.

1.7 Workplace Violence Incident

Workplace violence is an act of aggression, physical assault, or threatening behavior that occurs in a work setting and causes or has the potential to cause physical or emotional harm to customers, co-workers or public.

1.8 Refusal of Unsafe Work

CPES requires its workers to refuse work that they believe to be unsafe. The act of "Refusing Unsafe Work" can be based on imminent danger, lack of training, or lack of awareness for the task being carried out.

1.9 Non-Work Related Injury/Illness

The following are not considered work-related:

- Injuries and illnesses resulting from voluntary participation in company-sponsored fitness or recreational activities.
- Injury or illness symptoms that manifest themselves at work, but are due to non-work related incidents or exposures.
- Injuries that occur when an employee is commuting between home and their normal place of work.
- Injuries incurred while driving or riding as a passenger in a company vehicle for personal use.
- Injuries incurred on personal side trips when on rotational or company travel.
- Injuries incurred as a result of horseplay.

1.10 Motor Vehicle Incident (MVI)

A driving-related incident involving a CPES owned, leased, rented or car allowance vehicle where the driver is in care and control, that results in damage to the vehicle and/or injury to any individual and/or damage to third party property.

The definition does not include the following:

- Vehicle damage caused by towing.
- Vehicle damage such as vandalism or theft that occurred when the vehicle was parked.
- Vehicle damage such as minor paint scratches, stone chips, hail damage, and normal wear and tear.
- Vehicle damage incurred while parked, e.g. hit and run.
- Vehicle damage which occurs on a work site, where the vehicle is being used as a piece of equipment.

Note: the above noted vehicle damage incidents shall be reported as Property Damage.

Non-Preventable Motor Vehicle Incident

CPES' Fleet Safety and Journey Management (FSJM) Program encourages drivers to, among other things, drive defensively to reduce the risk of collisions. However, it recognizes that in some cases, collisions still occur through no fault of its drivers. For reporting purposes, the following are counted as non-preventable:

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- Non-preventable incident caused by a third party where the CPES driver's actions did not significantly contribute to the incident (e.g. CPES vehicle gets rear-ended).
- Non-preventable collision with wildlife

1.11 Environmental/Spill Incident

An incident that results (including a near miss that had the potential to result) in the spilling, leaking, pumping, pouring, emitting, emptying, discharging, escaping, leaching, dumping, or disposing of any hazardous substances or other undesirable environmental incidents.

1.12 Equipment Failure/Damage

Incident which results in damage to CPES, customer or third party property or equipment, loss of process/job delay. This classification excludes normal wear and tear of equipment.

1.13 Security/Theft Incident

Health Safety & Environment or security related incident which results in property or equipment loss, or theft of company assets.

1.14 Property Damage

An incident resulting in the damage to physical assets such as buildings, fences, gates, structures, etc. Note: motor vehicles that are damaged while parked and unattended shall be reported as Property Damage.

2.0 Injury Classifications

2.1 Injury/Illness Severity Classifications

The guideline and classification of injuries/illness are consistent with the Canadian Association of Petroleum Producers (CAPP) Guide to Health & Safety Performance Reporting (2013), which is used by CPES's clients.

2.2 First Aid

Any one-time treatment and subsequent observation of minor scratches, cuts, burns, splinters, and so forth, which do not ordinarily require medical care by a physician. Such treatments are considered first aid even though the treatment may have been provided by a physician or registered medical professional. The following are considered to be first aid treatments:

- Application of antiseptics during the first visit to medical personnel.
- Treatment of superficial (first degree) burns (characterized by reddening of the skin only).
- Application of bandages during any visit to medical personnel.
- Use of elastic bandages during the first visit to medical personnel.
- Removal of foreign bodies not embedded in the eye, if only irrigation or swab is required.
- Removal of foreign bodies from a wound, if the procedure is uncomplicated (e.g. using tweezers).
- Use of non-prescription medications at nonprescription strength for medications available in both prescription and non-prescription form or one time medication provided by doctor or medical practitioner.
- Drilling of a fingernail or toenail to relieve pressure or draining fluid from a blister.
- Use of glue, liquid or spray adhesive to close minor wounds, lacerations.
- Soaking therapy during an initial visit to medical personnel, or removal of bandages by soaking.

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- Application of hot or cold compresses during the first visit to medical personnel.
- Application of ointments to abrasions to prevent them from cracking or drying.
- Application of heat therapy during the first visit to medical personnel use of whirlpool bath therapy during the first visit to medical personnel.
- Negative X-ray diagnosis.
- Observation of injury during a visit to medical personnel.
- Prescription of a medication for preventative purposes.

2.3 Medical Aid

A medical aid incident is any injury that involves neither lost workdays nor restricted workdays but requires treatment by a physician or other medical professional. The following examples are generally considered to be medical treatment:

- Application of antiseptics during a second or subsequent visit to medical personnel.
- Treatment of partial thickness (second degree) or full thickness (third degree) burns.
- Application of sutures (stitches) to treat injury.
- Removal of foreign bodies embedded in the eye, utilizing invasive mechanical means.
- Removal of foreign bodies from a wound, if the procedure is complicated due to depth of embedment, size or location.
- Use of prescription medication.
- Application of therapy(s) during a second or subsequent visit to medical personnel.
- Cutting away dead skin (surgical debridement).
- Positive X-ray diagnosis (fractures, etc.).
- Admission to a hospital or equivalent medical facility for treatment.

Administration of tetanus shots or booster shots is not considered medical treatment, however, the injury for which the shot was given may be. Diagnostic procedures such as X-rays or laboratory analysis are not considered medical treatment unless they lead to further treatment.

Note: In cases where a physician or equivalent intends to issue a prescription, the suitability of an over-the-counter (OTC) equivalent or substitute should be discussed by the worker or supervisor beforehand. If an OTC medication can provide a similar level of treatment, this is preferable to a prescription, because it maintains the injury classification as a first aid, as opposed to a medical aid.

2.4 Modified Work

A work-related injury or illness which results in an individual under a doctor or medical professional's instruction being unable to perform their normally assigned work functions during any scheduled work shift or being assigned to another job on a temporary or permanent basis after the day of the injury or illness. Less than normal assigned work functions may include:

- Performing all duties or normally assigned work functions but at less than regular schedule,
- Performing limited duties during the normally assigned regular schedule, and
- Performing meaningful work activities as defined by WCB Modified Work Guidelines.

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Modified (restricted) work activity occurs when the employee, because of the job-related injury or illness, is physically or mentally unable to perform one or more of his or her normal job functions during the normal workday or shift. The emphasis is on the employee's inability to perform normal job duties over a normal work shift. "Normally assigned work" means tasks that the employee performs or is expected to perform as part of their job.

An incident is not considered to be a Modified Work if the following three conditions are met:

1. There is no medical treatment required.
2. The worker is fully capable of doing their work tasks that had been scheduled to be performed during the period.
3. There have been no explicit restrictions placed on the worker by a medical professional.

Modified Work Days are defined as the total number of scheduled workdays on which the injured person was temporarily unable to perform all normally assigned work functions. Modified work days continue until the employee is declared fit to return to normal work. If the incident occurs prior to the termination of the contract, the number of days accountable as restricted work will be estimated by a medical professional.

2.5 Lost Time

Any work related injury/illness that requires treatment by a physician and one or more days off work. The treating physician must support any time off in writing. Lost Time does not include the day of the injury. The next full day that the injury prevents the worker from working, in any capacity (including modified work) is the first day of Lost Time.

If the physician allows the employee to return to work, either with or without work restrictions and the employee chooses not to work, then the time the employee takes off does not count as Lost Time.

Lost Time Days are defined as the total number of scheduled workdays on which the injured person was unable to perform any work functions (including modified duties). Lost time days continue until the employee is declared fit to return to modified work or normal work. If the incident occurs prior to the termination of the contract, the number of days accountable as lost time work will be estimated by a medical professional.

3.0 Incident Severity Classifications

- 3.1** Catastrophic Incident is an event resulting in multiple lost time injuries, fatality, or other events related to Assets, Environment or Reputation referred to in the Risk Assessment Matrix in Section 2-Hazard Identification, Assessment and Control in the HSEMS.
- 3.2** Serious Incident includes any injury or health effect resulting in a lost time injury or illness, or other events related to Assets, Environment or Reputation referred to in the Risk Assessment Matrix in Section 2-Hazard Identification, Assessment and Control in the HSEMS.
- 3.3** Significant Incident includes an injury or health effect resulting in medical aid, modified work, or other events related to Assets, Environment or Reputation referred to in the Risk Assessment Matrix in Section 2-Hazard Identification, Assessment and Control in the HSEMS.
- 3.4** Negligible Incident means an injury or health effect resulting in first aid, or other events related to Assets, Environment or Reputation referred to in the Risk Assessment Matrix in Section 2-Hazard Identification, Assessment and Control in the HSEMS.

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4.0 Serious Incident/Reportable Incidents to Provincial and/or Federal Regulatory Authorities

CPES recognizes that it has the responsibility to manage, report and investigate all incidents designated to be reportable as per provincial legislation (i.e. dangerous occurrences (SK), accident (BC), serious incidents (Man), serious accidents (AB) and reportable accidents (Ont). Note that serious incident reporting should be done only by the CEO, COO, CFO or their designate (e.g. Vice President or HSE Manager).

As defined by regulatory bodies:

- Alberta Occupational Health & Safety Act Section 40.
- Saskatchewan Occupational Health & Safety Regulations Part II, 8, 9.
- BC Occupational Health and Safety Regulations Part 3 Division 10, 172.
- Manitoba Occupational Health and Safety Regulations Part 2 Sections 2.6 to 2.11.
- Northwest Territories Safety Act General Safety Regulations Part I Sections 35.

Typically, these incidents include a crane upset, unplanned fire or explosion, or an injury which was fatal or for which a worker is admitted as an inpatient to hospital.

Recently added by Alberta was the obligation for employers to report potentially serious incidents (PSI's). A PSI is any event where a reasonable and informed person would determine that under slightly different circumstances, there would be a high likelihood for serious injury to a person.

When determining whether an incident is a PSI, the following factors should be taken into consideration:

- actual circumstances of the incident (person, place, time, work practices being followed)
- hazards present at the time of the incident
- appropriate controls in place at the time of the incident
- slightly different circumstances (timing, distance, body position, etc.) that may have resulted in a serious injury
- similar incidents that have occurred within the employer or prime contractor's operations in the past 2 years that resulted in a serious injury

5.0 iTrak - Incident Management System

CPES' iTrak System - Incident Management Component is designed to:

- Report and Communicate Incidents;
- Report on the status of investigations, cause analysis and corrective actions;
- Track completion of corrective actions and sign offs;
- Provide incident trending.

CPES' iTrak Incident Management System is designed and aligned with HSEMS Section 10 Incident Management, Investigation and Follow-up and uses tailored forms/tools based on incident types, structured work flows, required notifications and approvals. Through the use of iTrak, pertinent incident information is captured, trends identified and implementation of corrective actions can be measured. By understanding and learning from our incidents, we can implement systems to prevent future incidents and losses. All incidents that occur while performing work on behalf of CPES shall be captured using the iTrak system. Initial incident findings are to be submitted into iTrak within forty-eight (48) hours of the incident being reported. Incident investigation information shall be added to iTrak as the information is established.

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Section 10.2 Responsibilities

1.0 Employee Responsibilities

It is the responsibility of the employee to:

- Report all incidents (including near misses) regardless of severity to their supervisor
- Assess the hazards and if safe to do so, take immediate action to eliminate or reduce any further risk immediately following an incident. Unless administering first aid, obtain approval from a supervisor prior to disturbing the scene
- Advise their CPES supervisor prior to seeking medical attention, and follow up with supervisor as soon as possible
- Recognize and report substandard conditions or acts that could negatively impact operations.
- Participate in and cooperate with incident investigations as required
- Provide honest and accurate statements of fact

1.1 Supervisor Responsibilities

It is the responsibility of the Supervisor (Superintendent, Project Manager, Foreman) to:

- Ensure injured workers are cared for and if necessary, implement the Emergency Response Plan
- Assess the hazards and if safe to do so, ensure that actions are taken to eliminate or reduce any further risk immediately following an incident
- Respond to and secure the scene, and preserve evidence
- Report HS&E incidents to their immediate manager, and to the customer representative, as per the contract or site-specific safety plan (SSSP). Typically, this is immediate verbal notification, and written incident report or preliminary investigation report within 24 hours
- Ensure the applicable sections of the Incident Report and Applicable sub forms are completed correctly and thoroughly for all incidents (Initial report shall be entered into iTrak within 48 hours of becoming aware of the incident)
- Participate in identifying/verifying the sequence of events that led up to the incident and all causes (immediate and root cause)
- Develop appropriate corrective actions in accordance with level of severity and in collaboration with investigation team as required
- Assist in the implementation of follow-up actions (controls) to prevent recurrences
- Report and investigate as outlined in Figure 10.3 – CF-S-33 Incident Notification Guideline

1.2 Line Management Responsibilities

It is the responsibility of Line Management (Area Manager, Manager) to:

- Take ownership of incidents that occur in their areas
- Ensure the guidelines of incident management and investigation are followed
- Inform the Customer and CPES Senior Management as soon as reasonably practical after first becoming aware of an incident that requires management and investigation. Typically, this notification is required immediately and can be communicated verbally or via electronic

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communication. (Initial report shall be entered into iTrak within 48 hours of becoming aware of the incident.)

- Provide training to superintendents and supervisors who may be required to manage and investigate incidents
- Actively lead or participate in all incident investigations in manager's business area of responsibility and upon request provide support in incident investigations in other business units
- Notify senior management of any serious, significant, or catastrophic incidents immediately
- Ensure that all incident investigations are completed promptly
- When designated by senior management, act as the Incident Investigation Manager or an investigation lead in an event outside their respective business unit
- When required, ensure that Cause Analysis reports are completed and forwarded to the Incident Manager and Senior Management within 2 weeks upon completion of the incident investigation process
- Review and as required and provide electronic sign off of the incident
- Ensure Work and Employer WCB reports are properly completed and forwarded to the WCB, and where applicable the Incident Investigation Manager within 72 hours
- Co-ordinate post incident drug and alcohol testing as required by the CPES Alcohol and Drug Policy
- Ensure that all corrective actions recommended as a result of the investigation process are effectively implemented

1.3 Senior Management Responsibilities

Senior Management (Executives and Vice President) is responsible to:

- Set company policy with respect to the management, investigation & follow up of incidents
- Ensure resources are available to properly report and investigate HS&E related incidents
- In collaboration with HSE Manager, ensure all **Serious or Catastrophic Incidents** are reported to regulatory bodies as required by legislation (Section 10.1.4)
- Assign a CPES Incident Investigation Manager (IIM) to oversee the investigation
- Provide guidance on the management of incidents
- Review high profile investigation reports to ensure that the CPES incident management and investigation guidelines are followed
- Monitor the implementation and effectiveness of corrective actions and provide the resources to implement the corrective measures

1.4 Incident Investigation Manager (IIM)

It is the responsibility of the Incident Investigation Manager to:

- Lead investigations into serious and catastrophic incidents
- Assign the investigation team and lead the cause analysis. (Note: CPES uses Systematic Cause Analysis Technique (SCAT) as its cause analysis process)
- Provide leadership and guidance during the cause analysis process

- Gather and review all investigation report information for accuracy and completeness
- Review findings and present to senior management
- Ensure regulatory required reports are completed and submitted within specified time frames
- Communicate the key findings and lessons learned as appropriate within the organization

1.5 HS&E Representative Responsibilities

HS&E Representatives (Manager, Lead, Coordinator) are responsible to:

- Assist with completion of the Incident Report and applicable sub forms as required (Initial report shall be entered into iTrak within 48 hours of becoming aware of the incident)
- Advise and assist on the interpretation of Section 10, Incident Management, Investigation & Follow Up
- Assist in the recommendation and implementation of meaningful corrective actions
- Provide leadership and guidance during the cause analysis process
- Train and support the users of iTrak
- Develop, provide and deliver Incident Investigation training
- Liaise with regulatory authorities and customers as directed by senior management
- Assist in the performance of the investigation by the investigation team
- Remain current on subject material and legislation
- Perform quality control assessments on the incident response and investigation, and related reports for those that occurred within assigned area

1.6 Health and Safety Committee Responsibilities

It is the responsibility of the representatives from applicable regulatory Joint Health and Safety Committee, Occupational Health Committee, or Joint Worksite Health and Safety Committee to participate and assist in incidents investigations.

1.7 Corporate Health Safety and Environment Committee Responsibilities

It is the responsibility of the Corporate HSE Committee to review all serious and catastrophic incidents to ensure completeness of investigation and corrective actions are appropriate and implemented.

The committee is responsible to review trending reports and findings of incident investigations on an ongoing basis and to ensure effective and appropriate communication of lessons learned throughout the organization.



Section 10.3 Incident Investigation Guidelines

1.0 Introduction

The investigation and analysis of incidents is an essential part of CPES's HSE Management System. It defines the process for response, notification, investigation, and ensuring corrective actions are implemented.

2.0 Purpose

The purpose of incident investigation and analysis is not to attach blame but to understand why the incident occurred, to prevent it from happening again, and to meet any applicable regulatory requirements for reporting the incident.

3.0 Responding and Managing

If necessary, implement the Emergency Response Plan.

The following are key activities in response and management of an incident:

- Attend to worker injuries (if any). If transportation to a medical facility is required, the injured worker must be accompanied by CPES supervision or their delegate. In Alberta, the worker should be transported to an Occupational Injury Service (OIS) clinic if appropriate and suitably located.
- Stop work in the immediate area, or entire job site, as appropriate.
- Secure the scene to prevent further harm, damage or injury.
- Freeze the scene to ensure that a quality investigation can be completed and to protect evidence.
- Report the incident to CPES Management.
- Report incident to Client Representative.
- Initiate the investigation.

In the case of a **Significant Incident**:

- Do not resume any work unless authorized to do so by CPES and client on-site supervision.

In the case of a **Serious or Catastrophic Incident**:

- Do not resume work unless authorized to do so by a CPES Vice President and regulatory authorities.

3.1 Secure/Freeze Incident Scene

As a rule, the scene of an incident or significant near miss must be secured/frozen to ensure that evidence is protected to allow a quality investigation to be conducted.

4.0 Investigation Team

For Negligible or Significant severity incidents an investigation team shall be established at the business unit level and shall include a supervisor, area manager and local HSE resource.

Serious or Catastrophic severity incidents requires inclusion of an Incident Investigation Manager that is appointed by senior management at the Vice President level.

The Incident Investigation Manager in consultation with senior management and the HSE Manager or Lead will select the team. As a minimum the team will consist of:



- a. Responsible Manager
- b. HSE Manager
- c. HSE Lead and/or Coordinator
- d. Front line Supervisor or Project Manager
- e. Involved Parties (where applicable, defined by team)
- f. Health and Safety Committee members (where applicable, defined by team)
- g. Executive (if required, defined by team)
- h. External Resources - technical expertise (if required), could include but not limited to:
 - I. Professional Engineer or Technical Specialist (e.g. equipment or vehicle mechanic)
 - II. Qualified Investigation Expert, Occupational Hygienist, Equipment or Process Specialist

5.0 Reporting/Recording

All incidents, regardless of severity, must be reported to CPES supervision immediately as per CF-S-33 Incident Notification Guideline in Figure 10.3.

Note: All reporting forms are available in iTrak and electronically as MS Word documents.

- First Aid incidents are to be recorded using the Initial Incident Report (CF-S-09).
- All other incidents are to be recorded on Initial Incident Report (CF-S-09) and applicable classification sub form(s) (CF-S-09 A/B/C/D/E/F).
- CPES site supervision must inform the following parties as soon as reasonably practical after first becoming aware of any incident.
 - CPES Management
 - Client/Customer Representative
- In the case of a Serious or Catastrophic Incident, CPES Senior Management must be informed by the quickest means of communication possible.
- Independent Service Providers (ISPs) and Subcontractors shall report incidents to the appropriate CPES representative immediately.

The HSE Manager or member of senior management, or their designate will make the initial report of incident(s) to regulatory authorities as required by legislation and within legislated time frames.

In addition, the following incidents require notification to a Peace Officer or Police:

- A workplace incident resulting in death.
- A vehicle or equipment incident resulting in death.
- Theft and/or vandalism damage expected to exceed \$1000.
- Damage sustained in a motor vehicle incident on a public roadway, or if a 3rd party is involved, is expected to exceed \$2000.

Any post-incident communication (verbal/written) to provincial or federal Occupational Health and Safety, WCB, customers or other 3rd parties that relates to a serious or catastrophic incident, must be coordinated through the executive (CEO, COO, or CFO) or through their authorized delegate.



All media communication will be coordinated through the corporate spokesperson (President or authorized delegate).

6.0 Data Collection and Data Analysis

All incidents are to be reported and documented regardless of their severity as soon as possible but no later than the end of the shift or work day.

The extent of the investigation will depend upon the severity or the loss potential of the incident. In addition, the extent of the investigation will be determined by the applicable regulatory reporting requirements, as well as the reporting and investigation requirements of the client. Senior Management will also determine the extent of the investigation.

Incidents involving Independent Service Providers (ISPs) and Subcontractors working for CPES shall be investigated. CPES will participate and assist ISPs and Subcontractors to determine the cause of the incident.

To support an effective investigation, sufficient data must be collected to answer who, what, where, why, when and how. The following is a list of actions/steps that aid in data collection:

1. Secure and freeze the scene.
2. Prevent the unauthorized capture and/or sharing of photographs.
3. Take photographs and measurements; make sketches as required. All photographs, videos and sketches are privileged information and therefore must be controlled and remain property of CPES.
4. Depending on the incident, arrange alcohol and drug post incident tests as per CPES's policy.
5. Depending on the incident, obtain police reports, etc.
6. Obtain written statements from the involved persons and conduct interviews with persons directly involved in the incident. Use the Witness Statement Form (CF-S-11) and Incident Interview Questionnaire (CF-S-48).
7. Gather relevant documentation – HIAC documents, Safe Work Permits, Tailgate Meetings, Hazard Assessments, applicable COP/SWP/SJP, valid driver's license, insurance, registration, training records, qualification, experience and other relevant data.
8. Investigate as soon as possible before conditions change, equipment or material is removed or altered, or people forget the details. Remember, do not disturb the scene and only allow removal of equipment or material after receiving approval.
9. Review work practices and procedures used, and establish the conditions that existed at the time of the incident.
10. Re-enact the incident, if necessary and safe to do so, to gain additional data or to verify facts. Use care to ensure the actual incident does not reoccur. All re-enactments must be approved by management.
11. Analyze the data collected to determine the sequence of events that led up to the incident and use this to identify the immediate cause(s) and root cause(s).
12. Consider potential human factors that may have contributed to the incident.
13. Tear down equipment, analyze parts, and test materials, if required.

14. Update or modify the Incident Report in iTrak to reflect actual costs, actual days lost, cause analysis, follow-up recommendations, etc.

7.0 Sequence of Events and Conditions

In addition to the general description of the incident, a clearly defined sequence of events that led up to the incident must be completed in the case of serious, significant, or catastrophic incidents. The sequence of events is critical as it helps identify contributing factors and conditions that will more accurately define the details of the incident. This should facilitate a more accurate immediate cause analysis and subsequent root cause identification.

8.0 Cause Analysis and Corrective Actions

To prevent incidents from reoccurring, CPES must understand what contributed to or caused the incident. The investigation process must include a cause analysis to determine the immediate cause (negligible incidents only) and root causes (serious, significant, and catastrophic incidents). CPES applies the DNV Systematic Cause Analysis Technique (SCAT) process as our primary cause analysis tool. ITrak was developed following the SCAT process and methodology.

Once we understand how and why the incident occurred we can then implement corrective actions that will aid in the prevention of reoccurrence or lessen the severity should the incident happen again.

When the cause analysis is complete, recommendations and corrective actions must be developed that address the cause and identify the method of control.

- Serious incidents that are investigated to root cause must have corrective action plans that address system issues. In addition, the immediate cause(s) that are identified during the investigation must form part of the corrective action.
- Lower risk, low severity incidents must, at least, identify the immediate cause and have corrective actions that address local issues or conditions.
- Corrective actions shall follow the "SMART" Criteria – Specific, Measurable, Attainable, Realistic, and Time-framed.
- The Corrective Action Plan should follow the Hierarchy of Controls – Elimination or Substitution; Engineering; Administrative; Personal Protective Equipment. For further clarification of the Hierarchy of Control refer to HSEMS Section 2 – Hazard Identification, Assessment and Control.

Once corrective actions have been determined they will be assigned to the suitable level of authority based on ability to implement. Most corrective actions related to the immediate causes of an incident can be assigned and corrected by supervisors at the site level. Corrective actions that address serious root causes and require HSE Manual or policy changes will be assigned to the HSE committee with oversight by a corporate Vice President.

9.0 Post Investigation Communication

Once the investigation of an incident is complete:

- Certain events will require an incident investigation report for external distribution to regulatory bodies, clients and third parties. These written incident investigation reports shall include an explanation of the contributing factors, events leading up to the incident; causes, both immediate and root; and corrective actions to prevent the incident in the future or lessen the severity.
- Approval for release of these reports must be received from Senior Management as per the Delegation of Authority (DOA).

- CPES uses iTrak to document and capture incident reports and investigations. iTrak is a resource to help create individual incident investigation reports for internal review and external distribution (subject to management approval first).
- Senior Management and HSE Manager shall communicate key findings and corrective actions as appropriate, using the Lessons Learned or Safety Alert template.

10.0 Incident Review Meetings

Safety Stand Down

With Serious and Catastrophic incidents the manager or designate shall hold a meeting within 24 hours of an incident, as required, to communicate the incident and the status of the investigation. The purpose of this communication is to inform workers of the incident, the well-being of individuals involved, and the immediate controls that are to be addressed so that a similar incident does not happen again. As a minimum the following personnel shall attend:

- Line Management
- Employees
- Members of the Work Site Health & Safety Committee, where applicable
- Appropriate Executive Management where applicable
- Client Representative(s) where appropriate

Additionally, safety stand downs will be facilitated where trends and/or organizational concerns are identified.

Serious Incident Review (SIR)

With Serious and Catastrophic incidents, a serious incident review (SIR) will be conducted within a reasonable time period to review the incident and the status of the investigation. The purpose of this review is to demonstrate to employees the commitment of senior management to understanding how the incident occurred and to prevent its reoccurrence. The SIR also promotes ownership of the incident by line management, and is a learning opportunity for all involved. As a minimum the following personnel shall attend:

- Line Management
- Supervisor
- The injured or directly involved employee(s)
- Members of the Work Site Health & Safety Committee, where applicable
- HSE Manager and/or HSE Lead
- Member(s) of Executive Management (usually COO)
- Subject matter expert(s) where applicable

11.0 Records Retention

All hard copy records in relation to a significant, serious, or catastrophic incident will be retained for five (5) years after the record is made, and is the property of CPES. All hard copy incident files and reports relating to incidents defined in this section will be secured. All records of incidents retained within the iTrak system are the property of CPES. The iTrak system is designed to retain all supporting incident investigation documentation.

12.0 Incident Statistics

Incidents are to be analyzed and used to identify opportunities for continuous improvement. CPES will utilize industry standards for incident classification and formulas. The statistical processes and formulas are outlined in HSEMS Section 12 – Statistics and Records. The Leadership Team will review HSE performance on an ongoing basis.

13.0 Applicable Forms and Investigation Job Aids

CPES uses a number of forms to help assist in the investigation process. In addition, these forms are built within or added as attachments in iTrak. The following is a list of applicable forms:

1. CF-S-09 Initial Incident Report
2. CF-S-09(A) Injury Incident Report
3. CF-S-09(B) Motor Vehicle Incident Report
4. CF-S-09(C) Equipment/ Property Damage Incident Report
5. CF-S-09(D) Fire/Explosion Incident Report
6. CF-S-09(E) Environment/Spill Incident Report
7. CF-S-09(F) Violation/Security Incident Report
8. CF-S-10 Incident Investigation Checklist
9. CF-S-11 Witness Statement Form
10. CF-S-12 First Aid Report
11. CF-S-20 Modified Work Offer
12. CF-S-33 Incident Notification Guideline
13. CF-S-48 Incident Interview Questionnaire
14. CF-S-60 Refusal of Unsafe Work
15. CF-S-61 Complaint Report
16. CF-S-62 Significant Near Miss Report
17. Provincial WCB – Employer’s Report of Injury

14.0 Additional Resources

- Alcohol & Drug Policy- HSEMS Section 13
- Canadian Associations of Petroleum Producers (CAPP) – Guidelines for Reporting Occupational injuries
- List of Occupational Injury Service (OIS) Clinics, locations, and contact information can be found on CPES Central under the Health, Safety and Environment department page.

Section 10.4 Injury Claims Management

1.0 Injury Reporting & Communication

All injuries no matter how minor, must be reported as soon as possible to a CPES supervisor. If a worker suffers an injury that initially only requires First Aid treatment, then the injury must only be recorded on the CPES First Aid Report (form CF-S-12, or CF-S-09 + CF-S-09A). However, if a worker suffers an injury that disables or is likely to disable him/her for more than the day of the incident, then the following steps must be taken:

- After CPES field supervision first becomes aware of the accident, the HSE Manager or designate must be notified as per CF-S-33 Incident Notification Guideline (Appendix 1).
- The CPES Supervisor or HSE Coordinator is responsible to notify WCB (i.e. submit Employer's Report) within 72 hours after first acquiring knowledge of the accident.
- The worker must advise their CPES supervisor before seeking medical attention if it is a work-related injury.
- The initial CPES Incident Report (CF-S-09), the WCB Workers Report, and the WCB Employers Report must all be completed and forwarded to the HSE Manager or designate and entered into iTrak within 48 hours of CPES field supervision first becoming aware of the incident. Depending on the severity of the injury, further investigation and analysis may be necessary.

2.0 Training

- WCB Claims Management training is available through the provincial

3.0 Case Management

In order to allow an injured worker a safe return to regular or modified work duties, the HSE Manager or designate will maintain regular communication with the worker, health care providers, and the WCB. The following steps will be taken to coordinate case management:

1. Create an **Injured Worker file** which will include the following documents:
 - CPES Incident Report (CF-S-09) c/w witness statements
 - WCB Employer's Report
 - WCB Worker's Report
 - Doctors report of injury and/or treatment
 - Modified Work Offer (if applicable)
 - List of all health care providers
 - The name and contact info of the case manager assigned by the WCB
 - Worker's contact information
 - All communications between the WCB and the injured worker, the WCB and CPES, or CPES and the injured worker, etc.

2. Contact with the WCB

- Frequent contact must be maintained between the HSE Manager or designate and the WCB case manager to ensure proper case management. At a minimum the WCB case manager should be contacted every 2 weeks and the worker's current status should be discussed as follows:
- Worker's condition
- Rehabilitation plan
- Anticipated return to work date
- Modified work scenarios (if applicable)

3. Contact with the Worker

- The HSE Manager or designate must be in contact with the worker regularly during the time that the worker is unable to return to work. Items to be discussed are as follows:
 - Worker's condition
 - Treatment worker is receiving
 - Name of doctor the worker is seeing
 - Date of all known appointments, etc.

4. Return to Work

To determine the worker's fitness to return to work, medical clearance from the attending physician must be received prior to the worker resuming regular or modified duties. This clearance should outline the fitness for work of the employee and any job restrictions stated by the physician. Frequent follow-up with the worker by the supervisor must occur for the worker to return to regular or modified work. Supervisors are to report and record any problematic issues related to the workers injury. WCB must be notified within 24 hours of the worker returning to modified work or to regular/full duties.

4.0 Modified Work

An effective modified work program will reduce costs the employers pay as a result of incidents in the workplace. It will also benefit injured workers by allowing them to return to the workplace earlier than they otherwise would have, had they been forced to remain off until completely healed. Modified work has been shown to shorten recovery time, maintain a stronger connection between the employee and employer, and retain valuable employees. All modified work must comply with WCB Modified Work guidelines.

1. Along with the worker's manager/supervisor, the HSE Manager or designate will arrange a return to work and if not completely ready to resume the type of regular duties performed before the injury, the worker will be offered modified work.
2. The modified work offer must:
 - Be in writing (Modified Work Offer CF-S-20)
 - Define the rate of pay (same as pre-incident rate of pay)
 - Include a specific list of job duties to be performed
 - Specify the length of placement of the modified work, as stated on the medical report, if available
 - Be signed, by both the worker and the CPES manager/supervisor



- Be forwarded to the HSE Manager or designate
- 3. The HSE Manager or designate will communicate with the WCB, and forward the signed modified work offer.
- 4. If a worker refuses the modified work offer, the reasons must be stated and documented. Have the worker sign if possible. The HSE Manager or designate will forward refusal to the WCB immediately, to be taken into consideration when adjudicating the worker's entitlement to benefits.

5.0 References

- Alberta Occupational Health & Safety Act, Code, Regulations – Sections 18 through 23 of the Act.
- Alberta Workers Compensation Board, Sections 32 through 39 of the Act, Sections 8 through 10 of the Regulations.
- Saskatchewan OHS Act, Code & Regulations - Part III General Duties – Section 29-31
- British Columbia OHS Act, Code & Regulations - Part 3 of the Act – Division 10 & 1
- WCB account numbers, industry codes, links to WCB forms and contact numbers for all provinces.



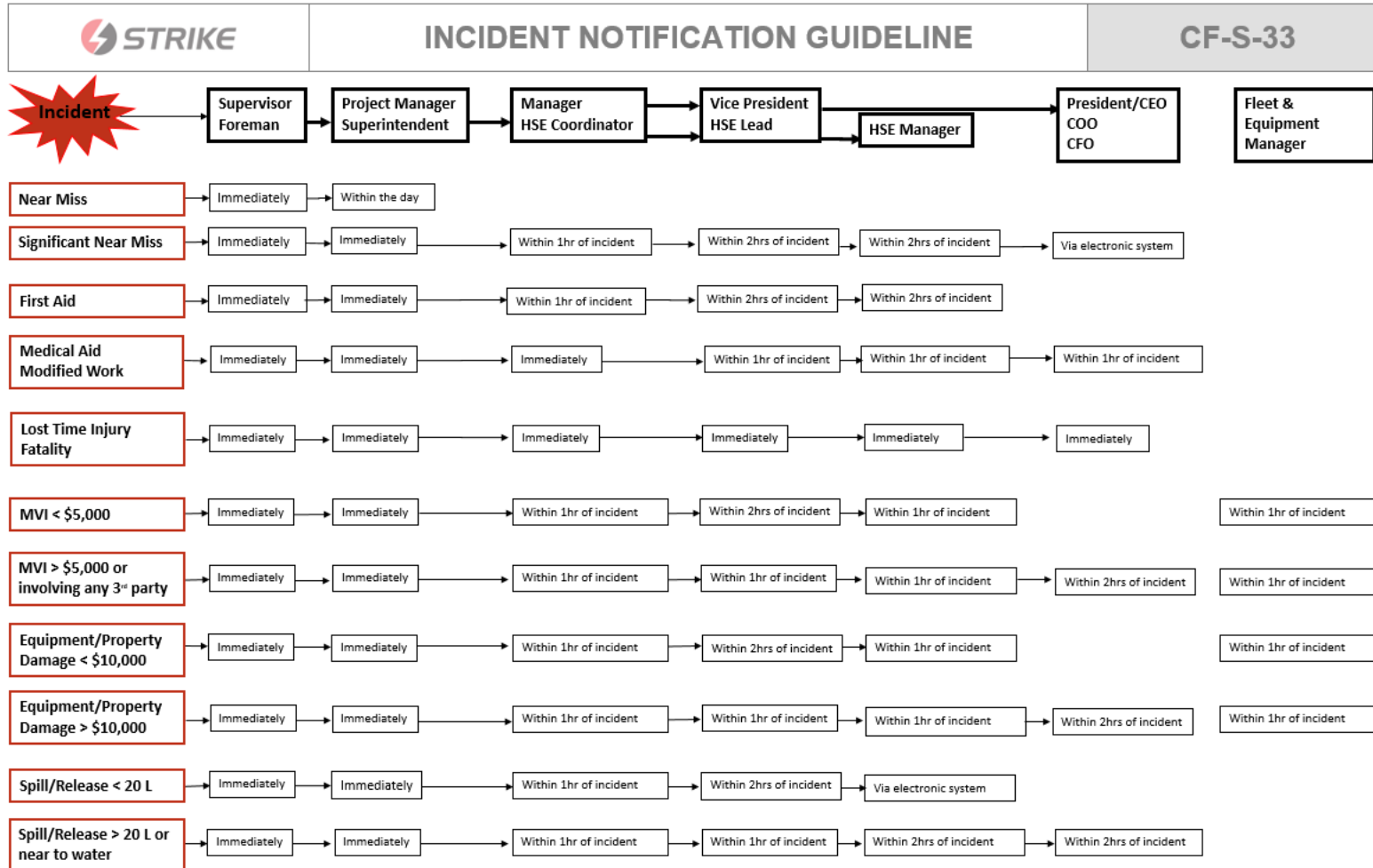
INCIDENT MANAGEMENT, INVESTIGATION & FOLLOW UP

Appendix 1

April 1, 2021

Incident Notification Guideline

Appendix 1 - Incident Notification Guideline





Appendix 2 - Regulatory Agency Contact Numbers

The following are the contact numbers for the respective provincial and federal regulatory bodies that may require notification as a result of an incident:

Alberta OH&S	1-866-415-8690
Saskatchewan OH&S	1-306-787-4496
British Columbia WorkSafe BC	1-888-621-7233 ext 3301 (business hours) 1-866-922-4357 (after hours)
Manitoba WS&H	1-204-945-3446
Ontario OH&S	1-877-202-0008
Northwest Territories WSCC	1-800-661-0792
National Energy Board NEB (federal regulated ops)	1-403-807-9473
National Safety Code/Transport Canada	1-866-995-9737
TDG Act/Transport Canada	1-866-995-9737
Fisheries and Oceans Canada	1-613-993-0999
e-Screen	1-888-378-4832

Environmental Concerns

Alberta Environmental Protection	1-800-222-6514
BC Environmental Emergency Reporting	1-800-663-3456
Ontario Environment	1-866-663-8477

Spill and Emergency Response

Area 1 Lloydminster	1-306-825-6434
Area 2 Kindersley	1-306-463-5400
Area 3 Swift Current	1-306-778-8252
Area 4 Estevan	1-306-637-4541
NWT Environment and Natural Resources	1-867-920-8130
Manitoba Environmental Services	1-204-944-4888
Ontario Environment	1-866-663-8477

Pipeline Emergencies

Transportation Safety Board	1-819-997-7887
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