Falkland Islands Government Department of Mineral Resources



**Petroleum Operations Notice 9** Reporting of Injuries, Diseases and Dangerous Occurrences

## FOR REPORTING OF INCIDENTS PLEASE CONTACT THE DEPARTMENT OF MINERAL RESOURCES ON

Mon – Fri, 8am – 4:30pm: +(500) 27322

Operators are advised to seek the department's Outof-Hours phone number prior to commencement of operations and incorporate it into relevant Emergency Response documents.

# reporting@mineralresources.gov.fk

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### Introduction

The reporting of injuries, diseases and dangerous occurrences on offshore installations operating in the Falklands' designated area is governed by the Reporting of Injuries, Diseases and Dangerous Occurrences Order 1998 (S.R. & O. No. 14 of 1998), hereafter referred to as "the Order" (available to download from <u>www.falklands-oil.com</u>).

The order sets out which parts of the equivalent UK Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 1995 apply in the Falklands. Although Falkland Island Government (FIG) reporting requirements are largely similar as a result, they are not identical and the 2012 amendment to the UK regulations has not been incorporated into the Falklands regulations. Operators (particularly those accustomed to the UKCS regulatory framework) are therefore advised to carefully review the Order so as to perceive the differences between the two. **Ultimately, the Falkland Islands 1998 Order is the applicable legislation on all cases.** 

These guidelines seek to clarify the main aspects of the reporting requirements established by the Order, but are not a definitive list of operators' obligations. For further guidance operators should revert to the Order itself or seek advice from the Department of Mineral Resources (contact details below). The forms with which to report any events are included in the appendices to this document.

At present, offshore health & safety in the Falklands is regulated by FIG, who may choose to seek expert technical advice from an independent advisor. This independent advisor may in turn choose to contact operators directly to gather the necessary information before making a recommendation to FIG.

Further information can be obtained from:

Department of Mineral Resources Ross Road, Stanley, Falkland Islands, FIQQ 1ZZ Phone: +(500) 27322 rcordeiro@mineralresources.gov.fk or sluxton@mineralresources.gov.fk

# **Reporting of Incidents**

#### Timing

Operators should preliminarily notify the Department of Mineral Resources of any incidents covered by the Order via the contact details on the cover page of this document as soon as practically possible. In the case of injuries, deaths and dangerous occurrences, this initial notification should be followed up by a report in the format outlined in appendices 1 & 2 to this document within 10 days of the event taking place. Similarly, operators are asked to provide the Department with copies of any internal reports on similar incidents as and when they are produced.

In the case of diseases, operators should submit a report in the format outlined in appendix 3 as soon as possible after the disease has been diagnosed by a medical practitioner and a written statement to that effect has been received by the employer or affected person.

Operators are encouraged to submit reports in electronic format, as this allows the Department to distribute them among relevant advisors and government departments with greater ease.

#### What to report – Death, injuries and dangerous occurrences

Under the existing legislation, operators are required to report:

- The death of any person as a result of an accident arising out of or in connection with work;

- Any major injury as a result of an accident arising out of or in connection with work

- An injury to any person not at work requiring hospital treatment as a result of an accident arising out of or in connection with work

- Any dangerous occurrence

- Any accident that incapacitates any employee from work for more than three consecutive days (not including the day of the accident)

Additionally, where injuries sustained as a result of an accident at work cause the death of an employee within one year of the injuries being sustained, operators must inform the Department in writing as soon as they become aware of it. Comprehensive lists of what are deemed to be major injuries and dangerous occurrences are detailed in Schedules 1 and 2 of the Order, which is available to download from the department's website – <u>www.falklands-oil.com</u>

#### What to report – Diseases

Under the terms of the Order, there are two broad groups of disease that have to be reported:

- Group 1: Any disease or condition mentioned in the first column of Part 1 of Schedule 3 of the UK RIDDOR 1995 **and** caused by any activity mentioned in the second column of that same part. Part 1 of the Schedule 3 of the UK RIDDOR 1995 is available from www.falklands-oil.com

- Group 2: Any disease mentioned in Part 2 of schedule 3 of the Order.

If in doubt, operators are encouraged to contact the department for guidance.

### Annex 1 – Dangerous Occurrence Reporting Form

### Falkland Islands Government – Department of Mineral Resources

### Dangerous Occurrence Reporting Form (PON 9)

About you and your organisation	0 - ( /		
Notifier Name			
Job Title			
Organisation Name			
Address			
Email			
Phone Number			
About where the dangerous occurrence hap	pened		
Name & callsign of offshore installation, vessel or pipeline			
Quadrant		Block	
Latitude		Longitude	
Details of module/area on the installation/ vessel where the incident occurred			
About the dangerous occurrence			
Incident date & time	Date time & method of first report to FIG		
In which department or where on the premis	es did the incident happe	n?	
What type of work was being carried out (ger	nerally the main business	of the site)?	
Main Industry			
Main Activity			
Sub activity			

About the type of dangerous occurrence	
Type of Dangerous Occurrence	
Describe what happened	

# Annex 2 – Injury Reporting Form

Falkland Islands Government –	Department of Mir	neral Resources	
Injury Reporting Form (PON 9)			
About you and your organisation Notifier Name			
Notifier Name			
Job Title			
Organisation Name			
Address			
Email			
Phone Number			
About where the incident happened			
Name & callsign of offshore installation, vessel or pipeline			
Quadrant		Block	
Latitude		Longitude	
Details of module/area on the installation/ vessel where the incident occurred			
About the incident			
Incident date & time	Date time & metho of first report to FIG	d	
In which department or where on the premi	ses did the incident happen	?	
What type of work was being carried out (ge	nerally the main business o	f the site)?	
Main Industry			
Main Activity			
Sub activity			
	.i		

About the type of accident	
Kind of accident	
Work Process Involved	
Main factor Involved	
Description	
Description	
About the injured person	
Injured person's name	
Address	
Address	
Phone Number	
Occupation or title	
Work Status	
WORK Status	
About the injured person's injuries	
Severity of the injury	
Injuries	
<b>,</b>	
Part of the Body	

# Annex 3 – Disease Reporting Form

Falkland Islands Government -	Department of Mineral Resources	
	Department of Mineral Resources	
Disease Reporting Form (PON 9)		
About you and your organisation		
Notifier Name		
Job Title		
Organisation Name		
Address		
Email		
Phone Number		
About the place where the affected person u	usually works	
	nerally the main business of the site where the affected person usually works)?	
Main Industry		
Main Activity		
Sub activity		
About the affected person		
Affected person's name		
Age		
Gender		
Occupation or title		
Work Status		
Details if the affected person is on a training scheme or employed by somebody else		

About the disease	
Date the disease was diagnosed or confirmed	r
What type of disease was diagnosed?	
Describe the work that led to the disease	