

# Notifiable incident

<b>Notification ID</b>	<a href="#">NTF11852</a>
<b>Duty holder</b>	Woodside Energy Ltd
<b>Facility/Activity</b>	Vincent
<b>Nearest state</b>	WA
<b>Incident</b>	OHS- [REDACTED]

## Basic information provided at time of notification

<b>Notification type</b>	Incident
<b>Incident date</b>	08/10/2022 10:00 AM (AWST)
<b>Notification date</b>	04/11/2022 11:37 AM (AWST)
<b>NOPSEMA response date</b>	(AWST)
<b>Received by</b>	[REDACTED]

## Summary of information provided

<b>Brief descriptive title</b>	OHS- [REDACTED]
<b>Incident location</b>	
<b>Subtype/s</b>	Injury
<b>Summary (provided at notification)</b>	Following cleaning operations IP reported to medic and was Diagnosed with [REDACTED] and was demobbed from the facility. Incident was not reported at the time and 3 day report was received via submissions mailbox 4 weeks afetr the incident.

## Request permission to disturb the site

<b>Permission given</b>	Not Applicable
<b>Permission given by</b>	
<b>Permission given on</b>	

## Initial spill and release amounts

<b>Gas (kg)</b>	
<b>Liquid (L)</b>	
<b>Release type</b>	
<b>More information</b>	

## Details of person providing information to NOPSEMA

<b>Full name</b>	[REDACTED]
<b>Job title</b>	[REDACTED]

## Initial notification category

<b>Initial category type (based on notification)</b>	Accident
<b>Initial category (based on notification)</b>	OHS - incapacitation >= 3 days LTI

## Running sheet

<b>Created by</b>	[REDACTED] at 12:00 PM 23/11/2022
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<b>Objective reference</b>	A893127
<b>Details</b>	<a href="https://rms/reporting/monthly_injury_summaries/17668">https://rms/reporting/monthly_injury_summaries/17668</a> reported 15 days LTI. see email A893127

<b>Decision</b>	
<b>Escalate to level 1</b>	Yes
<b>Inspector</b>	[REDACTED]
<b>Escalated on</b>	09/11/2022 08:05

<b>Final notification category</b>	
<b>Final category type</b> <i>(based on final report)</i>	Accident
<b>Final category</b> <i>(based on final report)</i>	OHS - incapacitation >= 3 days LTI

<b>Immediate causes</b>	
<b>Details</b>	What were the immediate causes of the incident? Possibility of chemical vapours entering eyes. IP was wearing all PPE specified in SDS for products being used.

<b>Initial report</b>	
<b>Due date</b>	11/10/2022
<b>Received date</b>	04/11/2022
<b>Reviewed date</b>	08/11/2022
<b>Reviewed by</b>	[REDACTED]

**Additional details provided by duty holder**

Brief description of incident IP had been using chemicals in a [REDACTED]

Treatment given but vision and eye discomfort got worse.  
Medical review again for possible chemical vapour irritation. IP settled overnight but demobbed the following day for review.

Work or activity being undertaken at time of incident  
IP was conducting [REDACTED] cleaning over 24 hrs prior to presenting to the medical center.

What are the Internal Investigation Arrangements  
Internal investigation in accordance with Woodside "Health Safety and Environment Event Reporting, Investigating and Learning Procedure"

Was there any loss of containment of any fluid (liquid or gas)? No

Action taken to make the work-site safe:  
Action taken IP treated at medical center. Eyes flushed, pain relief administered and rest recommended.  
Details of any disturbance of the work site Work had been completed 24 hours prior.

Was an emergency response initiated? No

Was anyone killed or injured? Yes  
Injured Person No 1  
Employer name [REDACTED]  
Employer address [REDACTED]  
Employer phone no. [REDACTED]  
Employer email [REDACTED]  
Full name [REDACTED]  
Date of birth [REDACTED]  
Sex [REDACTED]  
Residential address [REDACTED]  
[REDACTED]  
Phone no. (Work) [REDACTED]  
Phone no. (Home) [REDACTED]  
Phone no. (Mobile) [REDACTED]  
Occupation/job title [REDACTED]  
Contractor or core crew [REDACTED]  
Details of injury [REDACTED]  
Nature of injury g. Other  
Other Nature of Injury Irritation  
Part of body [REDACTED]  
Mechanism of injury [REDACTED]  
Agency of injury [REDACTED]  
Details of job being undertaken [REDACTED]  
Day and hour of shift  
Day (e.g. 5th day of 7 - 5/7) 18th day of 21  
Hour (e.g. 3rd hour of 12 - 3/12) 4th hour of 12  
18. Was there any serious damage? No

Will the facility be shut down? No

Immediate action taken/intended, if any, to prevent recurrence of incident.

Action IP assessed, treatment given and company on call doctor consulted.  
Responsible party [REDACTED]  
Completion date 08-Oct-2022  
Actual or Intended Actual

**Final report**

**Due date**

07/11/2022

Received date	04/11/2022
Reviewed date	08/11/2022
Reviewed by	[REDACTED]
Additional details provided by duty holder	<p>Full Report:</p> <p>Describe investigation in detail, including who conducted the investigation and in accordance with what standard/procedure  Investigation completed by [REDACTED] and Onshore HSE team in accordance with Woodside's Health Safety and Environment Event Reporting, Investigation and Learning procedure.</p> <p>[REDACTED]</p> <p>[REDACTED] IP was working in compliance with permitry and was wearing his PPE as outlined in the SDS (ie apron, chemical gloves, safety goggles and face shield).</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>IP was treated by medic and demobbed for further review. IP has since returned to facility and is undertaking normal duties.</p>

Final spill and release amounts	
Gas (kg)	0.00
Liquid (L)	0.00
Release type	
More information	

Root causes	
Code	
Description	<p>Has the investigation been completed? Yes</p> <p>Root cause analysis  Root Causes Analysis Factor: HP7-1 Work Direction - Preparation  Comments Unable to determine exact cause due to time of reporting to medic post completion of work scopes (&gt;24hours).</p>

All data received	
Date	04/11/2022

