**APPENDIX B – VEHICLE INJURY INCIDENT QUESTIONNAIRE**

Instructions:

* Only one person per questionnaire
* Cross the boxes were applicable and provide additional details where necessary
* This questionnaire is intended for mine use. No need to send to Mine Safety.

| **Item** | **Question** | **Answer** |
| --- | --- | --- |
| 1.0 | General |  |
| 1.1 | Name of the injured person. |       |
| 1.2 | Was this injury sustained over time or was there a particular impact or jolt that caused the injury. | [ ]  Over time[ ]  Jolt/impact |
| 1.3 | If the incident was an impact or jolt, did this result in bodily contact with the vehicle structure? If yes, list the body parts that made contact and the injury sustained to that body part. | Body part | Injury |
|       |       |
| 1.4 | If the incident was an impact or jolt, did the impact result in other injuries such as a sprain or strain? If yes, list the body parts and the injury sustained to that body part. | Body part | Injury |
|       |       |
| 2.0 | Vehicle make and model |  |
| 2.1 | Vehicle make: |       |
| 2.2 | Vehicle model: |       |
| 2.3 | Serial number:  |       |
| 2.4 | Plant number: |       |
| 3.0 | Location of the injured |  |
| 3.1 | Was the injured a driver or a passenger? | [ ]  Passenger[ ]  Driver |
| 3.2 | Where in the vehicle was the injured person sitting? E6 E7 E8 E9 E10E1 E2 E3 E4 E5 | [ ]  Driver’s seat (vehicles other than shuttle cars)[ ]  Driver’s seat facing to front in shuttle car[ ]  Driver’s seat facing to rear in shuttle car[ ]  Passenger front seat of man transporter[ ]  Passenger seat in rear of man transporter (see diagram)E1-10:       |
| 4.0 | Speed |  |
| 4.1 | On a scale from 1 to 5 where 1 is a slow walk and 5 is maximum speed of the vehicle, what speed was the vehicle travelling at the time of impact? or What speed would you estimate the vehicle was travelling at the time of the incident? | [ ]  1 [ ]  2 [ ]  3 [ ]  4 [ ]  5     km/hr |
| 5.0 | Vehicle specifics |  |
| 5.1 | Was the injured wearing a seat belt or safety restraint? |       |
| 5.2 | If yes, was it fitted correctly and well maintained? |       |
| 5.3 | Was the seat belt or restraint effective in preventing the movement it is designed to prevent? |       |
| 5.4 | What type of tyres are fitted to the vehicle? | [ ]  Solid filled tyres[ ]  Pneumatic tyres[ ]  Runflat or RL inserts |
| 5.5 | If pneumatic, what is the normal operating pressure of the tyre? |       |
| 5.6 | Is there suspension system on the vehicle?  | [ ]  Yes[ ]  No |
| 5.7 | If yes, is the suspension system: | [ ]  Well maintained and in good overall condition[ ]  Old or poorly maintained[ ]  Damaged [ ]  Unserviceable |
| 5.8 | Was the injury a result of a head strike with the overhead canopy or vehicle structure?  | [ ]  Yes[ ]  No |
| 5.9 | What is the distance from the seat to the underside of the overhead structure? |      |
| 5.10 | Is the seat that the injured person was sitting in good condition? e.g. padding, covers, adjustments | [ ]  Yes[ ]  No |
| 6.0 | Road specifics |  |
| 6.1 | What are the roads generally like at the mine? | [ ]  Good – usually smooth but may have small areas uncomfortable travel at normal speeds [ ]  Fair – Often have to slow down to avoid uncomfortable ride[ ]  Bad – Is generally considered by mine personnel as rough and travel speeds are limited along most travel roadways |
| 6.2 | Is there anything about the road conditions that could be said to have caused or contributed to the injury? What was it? e.g. pothole, road discontinuity, foreign object on road, excessive water etc  | [ ]  Yes[ ]  No      |
| 6.3 | Was the injury a result of a collision with another machine or rib (side wall) in the mine? | [ ]  Yes[ ]  No |
| 7.0 | Time and motivation  |  |
| 7.1 | When did the incident occur?  | [ ]  Entry to mine[ ]  1st half of shift after arriving underground[ ]  2nd half of shift between job sites underground[ ]  Returning to surface from underground |
| 8.0 | Driver behaviour |  |
| 8.1 | Was driver behaviour a contributing factor?  | [ ]  Yes[ ]  No |
| 8.2 | If yes, why? |       |
| 8.3 | If no, why not? |       |
| 9.0 | Mine WBV knowledge |  |
| 9.1 | Has the mine conducted as risk assessment to determine Hazards and risk controls, with respect to WBV? | [ ]  Yes[ ]  No |
| 9.2 | Does the mine monitor and audit the WBV controls? | [ ]  Yes[ ]  No |
| 9.3 | Are they effective? | [ ]  Yes[ ]  No |
| 9.4 | What could be done to improve their effectiveness? |       |