WV-0160 #13

TECHNICAL CENTER SUPERVISORS' INCIDENT REPORT

ALL INCIDENTS, REGARDLESS OF THE EXTENT OF INJURY OR PROPERTY DAMAGE, SHOULD BE REPORTED PROMPTLY TO THE SAFETY GROUP.
Type or use ball point pen

BUILDING	AREA	DATE	TIME/A.M. P.M.
770	137	10/18-19/86	?

PERSON INJURED | DEPT. NO.

THIS INCIDENT INVOLVES (CHECK ONE OR MORE)

- ☐ INJURY/ ☐ ILLNESS
- ☐ FIRE
- ☒ CHEMICAL SPILLAGE
- ☒ PROCEDURE VIOLATION
- ☒ AIR ☐ SEWER ☒ FLOOR
- ☐ EQUIP. DAMAGE/FAILURE
- ☐ NEAR MISS
- ☐ PERFORMANCE ERRORS OF SIGNIFICANT LOSS OR INJURY POTENTIAL

EMERGENCY EQUIPMENT USED: ☐ FIRE EXTINGUISHER

TYPE	SIZE	GAS MASK SUPPLIED AIR

EQUIPMENT-INVOLVED

RECEIVED
NOV 3 1986

DESCRIBE INCIDENT - WHAT HAPPENED?
Be specific. What tools, equipment or materials were being used. Describe the usage of them.

Work over weekend on piping SHERMAN in 770/137 resulted in asbestos-containing insulation (pieces & powder) over appreciable area of laboratory. Material not recognized as asbestos till 10/21/86. Air monitoring, clean-up now underway. Lab closed down! Should never have happened.

WHAT CAUSED INCIDENT? ☒ UNSAFE ACT ☐ UNSAFE CONDITION - EXPLAIN.
Describe the events which resulted in the incident. Include what, why and how it happened.

It appears established policy/procedures were not followed on this job. Asbestos residues left behind; No clean-up initiated as part of job. No communications with lab personnel.

IF CAUSE WAS AN UNSAFE ACT, GIVE APPROXIMATE DATE OF LATEST SAFETY DISCUSSION SUPERVISOR HELD WITH ANY INVOLVED EMPLOYEE. Does not apply to my people — DATE

WHAT ACTION HAS BEEN TAKEN TO PREVENT THIS INCIDENT FROM RECURRING?
I trust this report will result in this situation not being allowed to happen again. Incident has been verbally reported to AD, Ind Hygiene, Med. Dept., 770 Area Eng & Safety personnel and Tech Cent - Services

WHO WILL BE RESPONSIBLE FOR CORRECTIVE ACTION? — SIGNED (SUPERVISOR) Louis A Kapcsandy — DATE REPORTED 10/23/86

DISTRIBUTION: THE ORIGINAL COPY (WHITE) OF THIS REPORT IS TO BE CIRCULATED THROUGH LINE SUPERVISION TO THE SAFETY GROUP. COMMENTS AND APPROVAL SIGNATURES ARE REQUESTED WITHIN TEN DAYS. USE BACK OF FORM FOR ADDITIONAL COMMENT SPACE.

WHITE COPY TO: 1) GROUP LEADER LEVEL/SUPERINTENDENT

COMMENTS: I can't believe this type of incident ~~almost~~ occurred. I trust it won't again.

Louis A Kapcsandy — SIGNATURE — 10/23/86 — DATE

AE (cpy) RW Sanders 11/4
PW
PD Gorman
RE Sergeant
TC
PM
DS
GR
AV
LR
JR

2) AD LEVEL/DEPARTMENT HEAD

COMMENTS: This action by Tech Center Services is a clear violation of existing policy (# 6.10.9. Service Dept. Manual 6/13/85 pg. 205). I recommend that a thorough investigation be made of this incident and proper training be re-emphasized by TCS

Parvez N. Wadia — SIGNATURE — 10/29/86 — DATE

3) DIRECTOR/MANAGER

COMMENTS: Totally concur with Dr. Wadia's recommendation

W. P. Krog — SIGNATURE — 10/29/86 — DATE

RECEIVED
OCT 27 1986
H. P. KROG

4) TECHNICAL CENTER SAFETY GROUP FOR DISTRIBUTION TO SIGNEES

COPIES TO: YELLOW — TECHNICAL CENTER SAFETY GROUP
GREEN — DEPARTMENTAL SAFETY COORDINATOR
PINK — ORIGINATOR

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PLAINTIFF'S EXHIBIT
UC-3696

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