

10-26-2004

DDASaccident546

Humanitarian Demining Accident and Incident Database
AID

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DDAS Accident Report

Accident details

| | |
|---|---|
| Report date: 02/02/2008 | Accident number: 546 |
| Accident time: 12:35 | Accident Date: 26/10/2004 |
| Where it occurred: Hairatan, Konar Province | Country: Afghanistan |
| Primary cause: Management/control inadequacy (?) | Secondary cause: Inadequate equipment (?) |
| Class: Excavation accident | Date of main report: Not recorded |
| ID original source: None | Name of source: [Name removed] |
| Organisation: [Name removed] | |
| Mine/device: Fuze White Phosphorous | Ground condition: demolition site (explosives) |
| Date record created: | Date last modified: 02/02/2008 |
| No of victims: 1 | No of documents: 1 |

Map details

| | |
|---|------------------------------|
| Longitude: | Latitude: |
| Alt. coord. system: Not recorded | Coordinates fixed by: |
| Map east: | Map north: |
| Map scale: | Map series: |
| Map edition: | Map sheet: |
| Map name: | |

Accident Notes

disciplinary action against victim (?)
inadequate equipment (?)
no independent investigation available (?)
standing to excavate (?)
use of shovel (?)
protective equipment not worn (?)
visor not worn or worn raised (?)

Accident report

The report of this accident was made available in January 2008 by the demining group involved. Its conversion to a text file for database entry has led to the loss of original

formatting. The substance of the report is reproduced below, edited for anonymity. The original file is held on record. Text in [] is editorial.

Internal accident report/letter

Date: 31.10.04

Subject: Accident Report

On 26.10.04 [Name removed] OM and [Name removed] SOM, visited the operation of EOD 4 and 5 in Hairatan which are happened accident after visit in this day. The initial information about accident was gathering.

1. Injured particulars:

Name: [Removed]

Team No: EOD 4

Age: 32

Title: TL [Team Leader]

Province: Konar

2. Time and date of accident:

At 12:35PM local time on 26.10.04

- Reported to FO [Name removed] at: 12:37
- Start of first aid at: 12:40
- completion of first aid at: 12:50
- Ambulance departure from field: 12:55
- Ambulance arrived to hospital: 01:45
- Injured is discharged from hospital: 02:00

Injuries:

A fragment in deltoid muscle on Right arm, now he was ok no need to admits in hospital, on next week the surgeon want him for removing of fragment.

Brief Description how the accident occurred:

Team No.4 and 5 had demolition in the BF at Hairatan location; they found two smoke artilleries and some more UXO as well.

The TL made demolition in two places. The first was for the smoke artilleries and the second place was for the remaining UXO. Both demolitions were in the same time 10:45 completed.

[Name removed] and myself were in the same location. 11:00 we started going to MCT teams and the smoke was coming out of demolition point, the team waited until 12:30 then as there

was not apparently smoke in the demolition point the TL starting going to the demolition point for checking. And TL saw that both artillery were destroyed. In the nearest point a small amount of smoke was existing. He started to use fork shovel in the location and an explosion happened and a small fragment hit to the Right arm flesh of the TL. The sound and power was likely of an electric detonator the TL was saying.

6. Type of exploded Item:

According to the team leader, and SL information it shows that maybe the item was a small piece of Booster of WP artillery or Small detonator.

7. The TL missing and weaknesses points:

- After the checking, the TL did not ensure himself about the smoke after demolition.
- Though in the demolition point there was little smoke coming out, he used shovel in that point.
- Checking after the demolition was not in accordance to the SOP.

Recommendations:

As Team Leader he didn't follow the SOP entirely, due to that reasons the incident happened. Regarding the above mistakes and weaknesses we recommend the following points for his correction in the future and safety of the operation. I recommend warning letter and three days pay lose.

Victim Report

| | |
|---|--|
| Victim number: 720 | Name: [Name removed] |
| Age: 32 | Gender: Male |
| Status: supervisory | Fit for work: presumed |
| Compensation: Not made available | Time to hospital: One hour 10 minutes |
| Protection issued: Not recorded | Protection used: None |

Summary of injuries:

severe Arm

COMMENT: No medical report was made available.

Analysis

The injury is recorded as "severe" because surgery was planned. WP (White Phosphorous) burns violently in contact with air, sometimes flying around. This is why there are several accidents involving it recorded in this database. In this case the Victim was hit by a fragment of metal and no burns were recorded. It is likely that the WP was burning slowly in the ground

and heated a fuze/detonator close to the point of initiation. The Victim's actions with the shovel initiated the detonator and caused his injury.

The primary cause of this accident is listed as a "Management control inadequacy" because the Victim was the Team Leader on site and acted against SOPs by approaching the site while smoke was still visible – so making a very basic error. The group's senior management were responsible for his selection and training. They sought to correct him with a fine, so presumably did not think that his training had been inadequate.

The secondary cause is listed as "Inadequate equipment" because the victim was checking the area with a shovel. Checking with a rake is customary because it is more thorough. It also has the advantage of placing the user further away from anything he may expose.

No mention is made of PPE and it is likely that none was worn. This was the case in another accident at a demolition site involving this demining group in this country. It is generally believed that the wearing of PPE when dealing with items of ordnance would be pointless. In fact, recorded accidents at demolition sites generally involve fuzes and detonators or flying WP, so the wearing of PPE would be advisable.

The fact that the accident happened at 12:35 may be relevant. It is likely that this was at (or near) the end of the working day, so the Team Leader was anxious to check the site and leave. There is some evidence to suggest that pressure to finish quickly has led to several other recorded accidents.