

9-1-2002

DDASaccident376

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AID

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DDAS Accident Report

Accident details

Report date: 19/05/2006	Accident number: 376
Accident time: 10:50	Accident Date: 01/09/2002
Where it occurred: Near minefield No.079, Bagram, Kabul Province	Country: Afghanistan
Primary cause: Inadequate survey (?)	Secondary cause: Management/control inadequacy (?)
Class: Missed-mine accident	Date of main report: 09/09/2002
ID original source: FP/JE	Name of source: DDG
Organisation: Name removed	
Mine/device: TM57 AT blast	Ground condition: not recorded
Date record created: 22/02/2004	Date last modified: 22/02/2004
No of victims: 10	No of documents: 2

Map details

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

Accident Notes

mine/device found in "cleared" area (?)
inadequate communications (?)
no independent investigation available (?)

Accident report

A MAC investigation of this accident may have taken place. If so, and if the record is made available, that record will take the place of the following.

A Mine Accident Report was prepared by one of the NGOs involved in the accident and made available in September 2002. The date of the original report is the date of the digital file provided by the NGO who carried out the investigation (NGO-2 in what follows). Details of two accidents were conflated into one file. Accident details have been separated in what follows [see second accident in Bagram, Afghanistan on 1st September 2002] and the original NGO

report reproduced under Other Documents. The accident investigator was asked to provide more details of this accident and his answers are included in what follows.

[NGO-2's] Team No.3 was working in Minefield No.079 a very high priority/impact area. Mines have affected this area to a large scale, as it was frontline between Taliban and Northern Alliance during the past few years. The survey operation is also in progress in the neighbouring remaining areas to be technically marked and mapped for clearance teams. On 1st September 2002 an accident occurred in the survey team that involved a surveyor. The operations of team No.3 was stopped, all deminers were ordered to get to the rest area and be prepared to assist [NGO-1] in their rescue operation.

The dead body of the surveyor was thrown into the minefield so two deminers cleared the area up to the dead body and pulled it out from the unclear area. The body was transported from the minefield to the ambulance that was parked in parking area of [NGO-1] team. The dead body was put in the back of the ambulance together with three persons of [NGO-1]. In the front of the ambulance was one [NGO-2] Paramedic Supervisor and ambulance driver as well as one [NGO-1] Section Leader.

When the ambulance started moving, 10 meters from the parking area to the main road, the rear left wheel of the ambulance hit an AT mine and as result three more [NGO-1] employees were killed (those in the back of vehicle). 12 persons around the ambulance were wounded including 4 from [NGO-2], 3 from [NGO-1], 1 from [NGO-3] and 5 civilians. The 3 persons in the front of the vehicle were also wounded.

The accident had 10 Mine Action staff as victims, and 5 civilians. Details of the civilian victim injuries have not been made formally available. The cause of some injuries is reported to have been burning fuel when the long-range (double) tanks in the ambulance were burst and burning fuel spread around.

The area where the accident happened has been declared safe by the survey team and also used by them as their parking area.

"The mine hit the rear left wheel of the vehicle and completely destroyed it. Soon after the accident the vehicle got fire because of the two fuel tanks and burnt completely."

An Anti Tank mine caused the accident but the type has not been determined. On the day after the accident during clearance of the road, [NGO-3] found another AT mine in the same area and that was a TM-56. [The device is recorded as a TM-56 by inference].

The two deminers who made up the breaching party and their Section Leader performed first aid, stabilized and prepared the injured for evacuation - more specifically:

- Stopped bleeding/burning from fire
- Prevented shock
- Performed mentally first aid.

The whole process of first aid and stabilization from the time of the accident to the hospital took 28 minutes.

The medical treatment and evacuation was adequate and contributed to keep the patient in a good and stable condition up to and during the evacuation to the hospital.

However, Medevac and Casevac exercises will take place continuously to obtain the highest possible level of individual medical skills and will also be coordinated with the coalition forces hospital.

Timing

When the ambulance started to move at 10:50 it ran over and detonated an anti tank mine.

After one minute the Team Leader called the adjacent airbase and coalition forces for ambulances and help but got no reply.

After two minutes the Team Leader and Section Leader with the help of 4 deminers started to "rescue the people from and around the ambulance" while the Field Supervisor informed the [NGO-2] OPS Centre about the accident.

After 4 minutes the Operations Manager had ordered the suspension of operations in Kabul airport and the minefield in Darul Aman and ordered two ambulances to go to Baghram ASAP.

After 12 minutes the Operations Manager and TCM [Training Control Manager?] had informed the Programme Manager and Technical Advisor and left for Baghram together with the Technical advisor.

After 13 minutes all the injured were put in pick ups and transported to the coalition forces hospital inside Bagram airbase.

After 28 minutes the injured persons arrived at the coalition hospital.

After 34 minutes NGO-2 informed its overseas HQ about the accident.

After 57 minutes, the Delegation {presumably NGO-2's senior managers} arrived and met the Field Supervisor, Team Leader and other staff in Baghram.

After 1 hour and 2 minutes, the Delegation visited the accident site, coordinate with the Area MAC and [other NGO] about the future plans for clearance and secured the area with help from the Team Leader.

After 1 hour and 9 minutes the Operations Manager left for the hospital to see injured personnel while the Technical Advisor and Training Control Manager stayed at the place of the accident.

After 1 hour and 21 minutes they arrived at the hospital and began visits at the coalition hospital

After 2 hours and 16 minutes they had visited all injured personnel from the three NGO's involved and had got "their accurate problems and injuries".

After 3 hours and 16 minutes they left and reported to the OPSC about the injuries and condition of injured staff.

After 4 hours and 1 minute the [NGO-2] team arrived at OPSC and debriefed the office staff.

Damaged Equipment

The following is the list of the equipment/tools that were burnt in the ambulance.

- Codan radio, antenna and all related items
- VHF mobile station and related items
- Alarm with all related items
- Stretcher and its base
- PS Kit with all medicines
- VHF radio of PAM 35% burn (not repairable)
- Oxygen Cylinder and its related items.

Evaluation

In order to accumulate experiences within the SOPs of [NGO-2] it is of great importance to evaluate and review all actions taken during and after the accident.

Additionally [NGO-2] will forward the present report to the demining community within [the country MAC]. It is hereby the intention of [NGO-2] to contribute in a constructive and critical manner with our experiences of the current accident. Doing so we will hopefully eliminate or reduce risks, which are common in the process of demining, faced by fellow demining organizations.

Summarizing all factors mentioned above no procedures or regulations have been violated according to the current Demining SOP's within [NGO-2]. Consequently the accident has not given any direct cause to change existing Demining SOP within [NGO-2].

However, it will be taken into consideration to have more emphasis on the surrounding areas of a minefield where the Demining team may possibly park their vehicle, select rest areas for the deminers, make pick up point for the ambulance and etc. [NGO-2] is concerned about the

survey process and will have problems to rely on survey information in the future. [NGO-2] will do their own assessment based upon the [NGO-1] survey information prior the commencement of operations.

[NGO-2] will request [the country MAC] to review current survey procedures and how to evaluate information given in the general survey.

Review and Briefing of the accident to the organization

On September 3rd [NGO-2] conducted evaluation and briefing sessions in the site compound in Kabul. The objectives for conducting such type of evaluation was:

- To review in details what happened during and after both accidents
- To establish the probable cause of [NGO-1] accident
- To review what we have done well and bad during the second accident.
- To review the coordination of CASEVAC at the field level.

Conclusion

This accident happened during a CASEVAC of another demining organization. The area where the accident happened has been declared safe by the survey team and also used by them as their parking area.

Local people who do not have experience of clearance had cleared the road where the accident happened and that was accepted by the survey team as safe. [NGO-1] used the road beyond the location of the mine as a parking area for their vehicles.

Reporting was carried out according to the procedures.

Signed: Acting Programme Manager [NGO-2], Afghanistan

Victim Report

Victim number: 481	Name: Name removed
Age:	Gender: Male
Status: medic	Fit for work: yes
Compensation: Not made available	Time to hospital: 28 minutes
Protection issued: Not recorded	Protection used: none

Summary of injuries:

COMMENT

Blunt trauma, minor. See medical report.

Medical report

No formal medical report was made available. The following was in the general report.

“His general condition is good. He had a blunt trauma of abdomen, chest and deafness of his ears because his tympanic membrane of ears got redness and swelling by the pressure (according to the American Hospital documents in Baghram). He complains about the pain from his chest especially from the left side of the chest (from third inter coastal space to the end) and also he complains about deafness of his ears, but he has not any superficial injury, chymosis and etc.”

Discharged from hospital on 3rd September 2002.

Victim Report

Victim number: 482	Name: Name removed
Age:	Gender: Male
Status: medic	Fit for work: not known
Compensation: Not made available	Time to hospital: 28 minutes
Protection issued: Not recorded	Protection used: none

Summary of injuries:

COMMENT

Severe burns. See medical report.

Medical report

No formal medical report was made available. The following was in the general report.

“He has 45% burns over his body, distribution as follows:

Face: He has 9% burn on his face, nose, external ears, neck and head and 9% of his head, neck and face needs skin graft.

Hands: His hands and arms have 18% burnt, including arms, elbow joint, wrists joint, carpals metacarpals and phalanx. Both hands need to be skin grafted.

Back: His back also has 18% burnt and it is second degree burnt and covers left side, right side, mid vertebral line and from neck to hip bone. His back needs to be skin grafted. “

Victim Report

Victim number: 483	Name: Name removed
Age:	Gender: Male
Status: deminer	Fit for work: yes
Compensation: Not made available	Time to hospital: 28 minutes
Protection issued: Not recorded	Protection used: none

Summary of injuries:

INJURIES

minor Eyes

minor Shoulder

COMMENT

See medical report.

Medical report

No formal medical report was made available. The following is taken from the general report.

“Generally he is very good and he has swelling and redness in his left eye superficial. It means around his eye, but his vision is normal and his eye is safe. His upper and lower eye lads and sclera are injured. “

Discharged from hospital on 3rd September 2002.

Victim Report

Victim number: 484	Name: Name removed
Age:	Gender: Male
Status: deminer	Fit for work: yes
Compensation: Not made available	Time to hospital: 28 minutes
Protection issued: Not recorded	Protection used: none

Summary of injuries:

COMMENT

Burns. See medical report.

Medical report

No formal medical report was made available. The following is taken from the general report.

“His general condition is excellent. He has first degree burns. He has 5% burn in his right side of his back in lumbar vertebral region.”

Discharged from hospital on 3rd September 2002.

Victim Report

Victim number: 485	Name: Name removed
Age:	Gender: Male
Status: deminer	Fit for work: not known
Compensation: Not made available	Time to hospital: 28 minutes
Protection issued: Not recorded	Protection used: none

Summary of injuries:

COMMENT

Severe burns. See medical report.

Medical report

No formal medical report was made available. The following is taken from the general report.

“He has second degree burns covering 32% of his body.

Face: His face is 5% burnt

Hands: Both hands are 18% burnt, including arm, elbow joint, wrist joint, carpals, metacarpals and phalanx and they need to be skin grafted.

Back: 9% of his back is burnt and it is second degree. His back is burnt from right and left side of the lumbar region up to the shoulders.”

Victim Report

Victim number: 486	Name: Name removed
Age:	Gender: Male
Status: driver	Fit for work: yes
Compensation: Not made available	Time to hospital: 28 minutes
Protection issued: Not recorded	Protection used: none

Summary of injuries:

INJURIES

minor Neck

COMMENT

See medical report.

Medical report

No formal medical report was made available. The following is taken from the general report.

“He has neck trauma. It means his cervical vertebra became traumatic. He does not have any fracture and dislocation of cervical vertebra and spinal cord (according to the documents of the American Hospital in Bagram), but he complains about not sleeping normally. Therefore, he takes insomnia, probably depressed and suffers from feeling of guilt. After the Programme Manager told him that he is needed and that we rely on him as a driver as well as a promised him a new ambulance, he feels more secure.”

Discharged from hospital on 3rd September 2002.

Victim Report

Victim number: 487	Name: Name removed
Age:	Gender: Male
Status: deminer	Fit for work: not known
Compensation: Not made available	Time to hospital: 28 minutes
Protection issued: Not recorded	Protection used: none

Summary of injuries:

INJURIES

minor Eye

severe Eye

COMMENT

No further medical details were made available

Victim Report

Victim number: 488

Name: Name removed

Age:

Gender: Male

Status: deminer

Fit for work: DECEASED

Compensation: Not made available

Time to hospital: 28 minutes

Protection issued: Not recorded

Protection used: none

Summary of injuries:

FATAL

COMMENT

No medical details were made available.

Victim Report

Victim number: 489

Name: Name removed

Age:

Gender: Male

Status: deminer

Fit for work: DECEASED

Compensation: Not made available

Time to hospital: 28 minutes

Protection issued: Not recorded

Protection used: none

Summary of injuries:

FATAL

COMMENT

No medical details were made available.

Victim Report

Victim number: 490

Name: Name removed

Age:

Gender: Male

Status: deminer

Fit for work: DECEASED

Compensation: Not made available
Protection issued: Not recorded

Time to hospital: 28 minutes
Protection used: none

Summary of injuries:

FATAL

COMMENT

No medical details were made available.

Analysis

The primary cause of this accident is listed as “Inadequate survey” because the mine detonated in an area that the survey group had declared clear. The survey group had apparently accepted that local people had cleared the site and then used it as a parking area without checking that it was safe. The secondary cause is listed as a “Management/Control inadequacy” because the methods of survey used were presumably approved by senior management.

When NGO-2 asked for assistance from the local military there was a communications failure that is noted under Incident/accident notes as “inadequate communications”.

No explanation was given to explain why ten people were crammed inside the ambulance with the corpse, and this may indicate a lack of control over the proper use of the vehicle.

See also the Accident that occurred on 30th November 1997 in Afghanistan.

Related papers

What follows is the original investigation report from NGO-2 – edited for anonymity.

ACCIDENT REPORT: KABUL SEPTEMBER 2002

Table of Contents:

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8.....	Evaluation.
9.....	Conclusion.
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1. Acronyms.

AT	Anti Tank Mine
DM	Deminer
EODO	Explosive Ordnance Disposal Officer
FS	Field Supervisor

MF	Minefield
MS	Medical Supervisor
OO	Operations Officer
OPSC	Operations Centre
PAM	Paramedic
PM	Programme Manager
PS	Paramedic Supervisor
SL	Section Leader
SOP	Standard Operating Procedure
TCO	Training Control Officer
TL	Team Leader

2. Objectives.

The objectives with the current report are:

Point out the relevant facts of in order to establish a plausible cause to the accident.

Produce beneficial information to the de-mining community within [the Country MAC].

3. General Information.

Team/Site description: Team No. 3 Bagram Province.

Location of accident: Next to minefield No.079, Bagram (Annex G).

Date & Time: 01 September, at 10:50 local time.

Particulars of injured persons:

Cause to the accident: Driving over an anti tank mine.

Brief description of injuries:

1. Blunt Trauma
2. 45% burn on his face, hands and back. Ears bleeding
3. Compress Forehead, left eye white part bloody and pain from right shoulder and arms.
4. 5% burn on his back
5. 25-30% burn on his face, arms, chest and back
6. Complain from neck and back pain

4. Chronological Overview of the Accident.

Following describes the action taken and the instructions given directly after the accident:

At 0915 a deminer from [NGO-1] Team No.6 hit a mine and team 3 heard the accident.

The nearest SL of [NGO-2] to the [NGO-1] team informs the Team Leader by VHF and about [NGO-1] accident.

Field Operations of team No.3 is immediately stopped and all field personnel are instructed to go to the rest area.

The team leader informs the PS about the accident and asked him to contact the office about the issue and also about the assistance of our staff for evacuating the [NGO-1] deminer from unclear to the cleared area and then to Kabul as [NGO-1] teams normally do not have proper ambulances.

TL instructs a SL and two deminers and 1 PAM to go with him and FS to the accident site help the injured and orders the ambulance and PS to standby in the pick up point. And also the PS informs the OPS Centre. SL 1 has been appointed as acting team leader to evacuate all the [NGO-2] personnel to the site compound. [4 minutes after detonation]

The FS and the TL with other personnel reach the accident site and start planning for evacuation of the deminer. The deminer was died on the spot and was thrown to uncleared area.

The two deminers start using detectors and the SL marks the readings towards the dead body [1 hour and eight minutes after the detonation].

The dead body was pulled from the accident place and was prepared for movement after one hour and 30 minutes.

The dead surveyor was transported to the ambulance on a stretcher and the body was put in the ambulance for departure one hour and 35 minutes after the accident.

The ambulance Started to move and ran over an anti tank mine after one minute.

The TL calls the adjacent airbase and coalition forces for ambulances and help but no reply.

The TL and SL with the help of 4 deminers start to rescue the people from and around the ambulance. While the FS inform the OPS Centre about the accident

OM orders the suspension of operations in Kabul airport and the minefield in Darul Aman and orders two ambulances to Bagram ASAP.

OM and TCM informs PM and TA and leave to Bagram together with TA.

All the injured was put in pick ups and transported to the coalition forces hospital inside Bagram airbase.

Injured persons arrived at the coalition hospital 57 minutes after the ambulance has started to leave the first accident site.

[Name excised] informs HQ in Denmark.

The Delegation arrives and meets the FS, TL and other staff in Bagram.

The Delegation visits the accident site, coordinate with [regional MAC] and [NGO-3] the future plans for clearance and secures the area with help from TL.

The OM leaves for hospital to see injured personnel while TA and TCM stays at place of the accident.

Arrival to the hospital and preparation of visit with the coalition hospital.

Visit all injured personnel of [NGO-2], [NGO-1] and [NGO-3] and getting their accurate problems and injuries.

Departure and reporting to the OPSC about the injuries and condition of injured staff four hours after the AT mine detonated under the ambulance.

The [NGO-2] team arrives at OPSC and debriefs the office staff

5. Brief description of the accident

Team No.3 is working in Minefield No.079 a very high priority/impact area. Mines have affected this area to a large scale, as it was frontline between Taliban and Northern Alliance during the past few years. The survey operation is also in progress in the neighbouring remaining areas to be technically marked and mapped for clearance teams. On 1st September 2002 an accident occurred in the survey team that involved a surveyor. The operations of team No.3 was stopped, all deminers were ordered to get to the rest area and be prepared to assist [NGO-1] in their rescue operation.

The dead body of the surveyor was thrown into the minefield so, the 2 deminers cleared the area up to the dead body and pulled it out from the unclear area. The body was transported from the minefield to the ambulance that was parked in parking area of [NGO-1] team. The dead body was put in the back of the ambulance together with 3 persons of [NGO-1]. In the front of the ambulance was one [NGO-2] PS and ambulance driver as well as one [NGO-1] SL.

When the ambulance started moving, 10 meters from the parking area to the main road, the rear left wheel of the ambulance hit an AT mine and as result 3 more [NGO-1] employees were killed (placed in the back of vehicle). 12 persons around the ambulance were wounded including 4 from [NGO-2], 3 from [NGO-1], 1 from [NGO-3] and 5 civilians. The 3 persons in the front of the vehicles were also wounded.

6. Injuries of the Casualties (Annex A)

The 6 persons injured persons of this accident [from this NGO] has the following injuries:

PS: His general condition is good. He had a blunt trauma of abdomen, chest and deafness of his ears because his tympanic membrane of ears got redness and swelling by the pressure (according the American Hospital documents in Baghran). He complains about the pain from his chest especially from the left side of the chest (from third inter costal space to the end) and also he complains about deafness of his ears, but he has not any superficial injury, chymosis and etc.

PAM: He has 45% burn at different parts of his body as follow:

Face: He has 9% burn on his face, nose, external ears, neck and head and 9% of his head, neck and face needs skin graft.

Hands: His hands and arms have 18% burnt, including arms, elbow joint, wrists joint, carpals metacarpals and phalanx. Both hands need to be skin grafted.

Back: His back also has 18% burnt and it is second degree burnt and covers left side, right side, mid vertebral line and from neck to hip bone. His back needs to be skin graphed.

DM: Generally he is very good and he has swelling and redness in his left eye superficial. It means around his eye, but his vision is normal and his eye is safe. His upper and lower eye lads and sclera are injured.

DM: His general conditions are excellent. He has first degree burn. He has 5% burn in his right side of his back in lumber vertebral region.

DM: He has second degree burnt and covers 32% of his body.

Face: His face is 5% burnt

Hands: Both hands are 18% burnt, including arm, elbow joint, wrist joint, carpals, metacarpals and phalanx and they need to be skin graphed.

Back: 9% of his back is burnt and it is second degree. His back is burnt from right and left side of the lumber region up to the shoulders.

Driver: He has neck trauma. It means his cervical vertebra became traumatic. He does not have any fracture and dislocation of cervical vertebra and spinal cord (according to the documents of the American Hospital in Bagram), but he complains about not sleeping normally. Therefore, he takes insomnia, probably depressed and suffers from feeling of guilt. After the PM told him that he is needed and that we rely on him as a driver as well as a promised him a new ambulance, he feels more secure.

General Condition of the injured persons:

Four injured persons, 1PS, 2DMs and 1 driver have been discharged on 3rd September 2002 and will be kept in the office until 7th of September. Two of the injured 1 PAM and 1DM are still in the hospital. Their wounds need to be skin grafted and they will need durable treatment and care. The general condition of both of them is stabile.

7. Damaged Equipment (Annex B)

Ambulance X-68-102:

The mine hit the rear left wheel of the vehicle and completely destroyed it. Soon after the accident the vehicle got fire because of the two fuel tanks and burnt completely.

Following is the list of the equipment/tools that were burnt in the ambulance.

- Codan radio, antenna and all related items
- VHF mobile station and related items
- Alarm with all related items
- Stretcher and its base
- PS Kit with all medicines
- VHF radio of PAM 35% burn (not repairable)
- Oxygen Cylinder and its related items.

8. Technical Evidence

An Anti Tank mine caused the accident but the type has not been determined. On the day after the accident during clearance of the road, a mine dog [from another demining group] found another AT mine in the same area and that was a TM-56.

9. Evaluation

In order to accumulate experiences within the SOPs of [NGO-2] it is of great importance to evaluate and review all actions taken during and after the accident.

Additionally [NGO-2] will forward the present report to the demining community within [the Country MAC]. It is hereby the intention of [NGO-2] to contribute in a constructive and critical manner with our experiences of the current accident. Doing so we will hopefully eliminate or reduce risks, which are common in the process of demining, faced by fellow demining organizations.

Summary:

Summarizing all factors mentioned above no procedures or regulations have been violated according to the current Demining SOP's within [NGO-2]. Consequently the accident has not given any direct cause to change existing Demining SOP within [NGO-2].

However, it will be taken into consideration to have more emphasis on the surrounding areas of a minefield where the Demining team may possibly park their vehicle, select rest areas for the deminers, make pick up point for the ambulance and etc. [NGO-2] is concerned about the survey process and will have problems to rely on survey information in the future. [NGO-2] will do their own assessment based upon the [NGO-1] information prior the commencement of operations.

[NGO-2] will request [Demining survey group] to review current survey procedures and how to evaluate information given in the general survey.

Treatment:

The 2 DM (the breaching party) SL performed first aid, stabilized and prepared the injured for evacuation - more specifically:

- Stopped bleeding/burning from fire
- Prevented shock
- Performed mentally first aid.

The whole process of first aid and stabilization from the time of the accident to the hospital took 28 minutes.

Summary:

The medical treatment and evacuation was adequate and contributed to keep the patient in a good and stable condition up to and during the evacuation to the hospital.

However, Medevac and Casevac exercises will take place continuously among PAM, PS and DM to obtain the highest possible level of individual medical skills and will also be coordinated with the coalition forces hospital.

Review and Briefing of the accident to the organization (Annex C)

On September 3rd [NGO-2] conducted evaluation and briefing sessions in the site compound in Kabul. The objectives for conducting such type of evaluation was:

- To review in details what happened during and after both accidents ([NGO-2], [NGO-1]).
- To establish the probable cause of [NGO-1] accident.
- To review what we have done well and bad during the second accident.
- To review the coordination of CASEVAC at the field level.

10. Conclusion.

Following is the conclusion made by [NGO-2]:

Accident.

This accident happened during a CASEVAC of another demining organization ([NGO-1]). The area where the accident happened has been declared safe by the survey team and also used by them as their parking area.

Cause

The cause of the accident was an Anti Tank mine the ambulance hit during evacuation of the victim from another accident.

Local people who do not have experience of clearance have cleared the road where the accident happened and that was accepted by the survey team as safe. [NGO-1] used the road beyond the location of the mine as a parking area for their vehicles.

Damaged Equipment

The ambulance with its all installed equipment/tools has been completely burnt and nothing could be recovered.

Reporting

Reporting was carried out according to the procedures.

Signed: Acting PM [NGO-2], Afghanistan