



STANDARD CONSTRUCTION OPERATING PROCEDURE

City of New York Department of Design and Construction
Division of Infrastructure Bureau of Construction

**SUBJECT: CONSTRUCTION SITE EMERGENCY/
ACCIDENT NOTIFICATION**

APPROVED

Assistant Commissioner - William F. Lipski, P.E.

SCOP..... : 00 - 008 G

**CATEGORY : ADMINISTRATIVE
Subcategory : NOTIFICATIONS**

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SAFETY**

Supersedes... : N/A

Supplements.... : N/A

Sheet..... : 1 of 1

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The attached Site Safety Emergency Response Protocol issued by DDC's Environmental, Health and Safety Services Unit is to be adhered to. This protocol requires that the "Site Safety Emergency Protocol" form (attached) be completed and posted conspicuously in the Engineer's field trailer. If a site safety emergency occurs, the Resident Engineer is responsible for ensuring that the protocol is followed. All incidents that result in injury or property damage must be reported in writing. Attached is the DDC Construction Accident Report form that must be completed and submitted within 24 hours of the incident.

**ATTACHMENTS: SITE SAFETY EMERGENCY RESPONSE PROTOCOL
SITE SAFETY EMERGENCY PROTOCOL POSTER
DDC CONSTRUCTION ACCIDENT REPORT**



City of New York Department of Design and Construction

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Commissioner

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Site Safety Emergency Response Protocol #EHSS052000A

Internal Notification Process

At every job site the Resident Engineer or Project Manager (RE/PM) must post a Site Safety Emergency Protocol (see attached). The RE/PM is responsible for ensuring that the name and contact numbers for the appropriate Project Director/Borough Director and Assistant Commissioner are included.

In the event of a Site Safety emergency, the following actions must be taken. Telephone calls must result in personal contact; voice mail or messages left with office staff are not sufficient and do not comply with the intent of this protocol.

For purposes of this protocol, a site safety emergency is defined as follows:

- Any injury to a member of the general public or property damage caused by construction work;
- Any construction worker fatality;
- Any serious injury to a worker requiring hospitalization; or
- Any collapse or other catastrophic failure of a building structure, trench, roadway or construction equipment regardless of injuries.

In the event of a site safety emergency the RE/CM will:

- Call 911 (if Police, Fire or EMS assistance is required)
- Notify the Program Director / Borough Director
- Notify the Office of Site Safety at 718-391-1911 (After hours call 718-391-1000)
- Where applicable, submit a completed agency Accident Report to the Office of Site Safety.

The Program Director or Borough Director will call:

- The Assistant Commissioner responsible for that Unit
- The Deputy Commissioner responsible for that Division
- The Quality Assurance Bureau to request the Mobile Command Vehicle

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The Office of Site Safety will determine the following:

- The nature and current status of the emergency
- The extent of personal injury and/or property damage
- Existing / potential threat to other facilities, staff and the general public
- The need to notify Enforcement or Regulatory Agencies
- Dispatch a DDC Site Safety Inspector to the location
- Request the Mobile Command Vehicle
- Contact the Commissioner, Assistant Commissioner for Public Affairs and the Assistant Commissioner of Technical Support.
- Contact the Mayors Office of Emergency Management if applicable
- Initiate and document all response actions, notifications, and begin Safety Investigation Process.

There will be a Site Safety inspector on call 24 hours a day, 7 days a week to respond to emergencies.

The Director of Environmental Health and Safety Services can be reached at 718-391-1284 (office); 917-939-6744 (cellular) or 917-252-0359 (digital pager) or 800-800-7759 (message paging).

Public Notification

Emergency Situations are reported to DDC from the public by the emergency contact number that is posted on most job sites (718-391-1000).

During Business Hours (8am-5pm)

Calls are received by the DDC reception desk where they are forwarded to the appropriate unit for response. Calls are usually routed to either the Structures or Infrastructure Division. If staff who handle these calls determine that there is a site safety emergency, they will initiate contact with the Site Safety Office.

After Business Hours (5pm-8am)

The original call is received by an answering service. The service will take down specific information from the caller including name, phone number, location, nature of problem, job location, job name. With this information, the service will notify the appropriate staff in each division (depending on the nature of the call). The service uses home phone numbers and pagers to contact people. The Director of Site Safety will be notified by the agency answering service directly of any off -hour emergency calls.

Once the Director of Site Safety is notified an emergency, he/she will follow the procedure listed above to determine appropriate response.

Site Safety Emergency Protocol

Infrastructure Division

The Resident Engineer, Construction Manager or Consultant on an Infrastructure Division Project shall make the following calls (be sure you make personal contact, no voice mail) in a site safety emergency:

1) 911 (if police, fire or medical assistance is required)

2) Borough Director

(Name) _____
Office ()
Beeper (917)

Borough Director shall call:

a) His or Her Assistant Commissioner
Office (718) 391-
Beeper (917)

b) Deputy Commissioner Richard Ocken
Office (718) 391-2254
Beeper (917) 469-7106

3) Director of Env. Health & Safety, Robert Adams
Office (718) 391-1911 (or 718-391-1284)
Pager (800) 800-7759
Cell Phone (917) 939-6744

The Director will consult with the RE, CM or Consultant RE and will make recommendations on the appropriate response actions required to mitigate the safety concern.

The Director shall call:

- a) Commissioner Holden
- b) Assistant Commissioner Monahan
- c) NYC Office of Emergency Management

**Division of Technical Support
Environmental Health & Safety Services
Office of Site Safety**

**Mark A. Canu
Assistant
Commissioner**

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**CITY OF NEW YORK
DEPARTMENT OF DESIGN AND CONSTRUCTION**

**CONSTRUCTION ACCIDENT REPORT
(REPORT OF BODILY INJURY/PROPERTY DAMAGE)**

In case of a construction site accident, all DDC employees (or their designated representatives) are to follow the DDC Site Safety Emergency Protocol posted at your job site. This form is to be filled out by the RE/CPM and faxed (or hand delivered) to ACCO's IRMU, (fax: 718-391-1687) and to DDC's Site Safety Unit (fax: 718-391-1499) *within 24 hours of any accident on a construction site*. The submission of this form is in no way a substitute for the RE/CPM informing someone at the construction site of the name and address of the contractor's insurance company.

1. CONTRACT REG. NO	CAPIS ID:	PROJECT BOROUGH:	PROJECT STREET ADDRESS:
2. CONTRACTOR'S NAME:		CONTRACTOR'S TELE. NO.	
3.SITE OF ACCIDENT:			
4. NAMES OF PERSONS ALLEGEDLY INJURED (IF ANY):****		OCCUPATIONS OF ALLEGEDLY INJURED PERSONS: (Please indicate DDC employee, contractor employee, visitor, or public)	
5. HOME ADDRESS AND TELE. NO. OF ALLEGEDLY INJURED PERSONS:			
6. DATE OF OCCURRENCE:		TIME OF OCCURRENCE:	DAY OF THE WEEK:
7.BRIEF DESCRIPTION OF ACCIDENT INCLUDING ANY AND ALL DAMAGE TO PROPERTY:****			
8.WITNESS: A _____ B. _____ _____			
9.PROPERTY/EQUIPMENT INVOLVED:****		TYPE:	BLDG. DEPT.CERTIFICATE NO. DATE: / /
PROPERTY/EQUIPMENT CAUSE OF DAMAGE: <input type="checkbox"/> FIRE <input type="checkbox"/> THEFT <input type="checkbox"/> VANDALISM <input type="checkbox"/> OTHER. Explain:			
10. PICTURES TAKEN?		TAKEN BY:	
11. POLICE DEPT. ON SCENE?	PRECINCT NO.	NAMES & BADGE NUMBERS:	
12. REPORTED TO:	<input type="checkbox"/> OFFICE OF AGENCY'S CHIEF CONTRACTING OFFICER	TIME:	DATE:
	<input type="checkbox"/> RE/CPM's PROGRAM/BOROUGH/SECTION DIRECTOR	TIME:	DATE:
	<input type="checkbox"/> SITE SAFETY UNIT	TIME:	DATE:
13. REPORTED BY: (NAME & TITLE)	DIVISION:	SIGNATURE*	TELE.NO. BEEPER NO. FAX NO.
* IF CM/REI SIGNATURE. PLEASE PRINT NAME OF DDC EMPLOYEE **** ATTACH ADDITIONAL PAGES IN THE EVENT OF COMPLEX OCCURRENCES.			
C: <input type="checkbox"/> Original to IRMU (within 7ccds); <input type="checkbox"/> Hard Copy to Site Safety Unit (within 7ccds); <input type="checkbox"/> In case of bodily injury: D/C (Infra),F/A/C (Structures), A/C (Technical Support); <input type="checkbox"/> Central Files (by IRMU) c/ /accident.wpd DDC99-1-90			