AR 15-03 AN ADMINISTRATIVE REGULATION ESTABLISHING A NEAR MISS REPORTING POLICY

Section 1. Purpose

In order to ensure a safe and efficient work environment for our employees, the City of Hobbs has established the following near miss reporting procedure.

The near miss program is a non-disciplinary program designed to recognize and correct potential safety hazards to help develop a safety culture throughout the City of Hobbs.

A near miss is a potential hazard or incident that has not resulted in any personal injury or property damage. Unsafe working conditions, unsafe employee work habits, improper use of equipment or use of malfunctioning equipment have the potential to cause work related injuries or damage.

Section 2. Reporting

There are several ways to report a near miss:

- City of Hobbs Intranet site.
- Form attached to this policy.
- · Department Head or supervisor.
- Email to the safety coordinator @ ngoulet@hobbsnm.org
- Reporting can be anonymous or recognized. If you wish to be nominated for an administrative leave award from the city manager you must list your employee name and department information on the form.

Section 3. Review and Awards

The safety committee will review all submitted near miss reports monthly for validity and merit. Once a determination has been made all reports will be forwarded to city manager for approval and designation of administration leave to be awarded to employee. An employee may be eligible for 2 to 8 hours of awarded administrative leave. Leave awarded will expire on the final day of the last pay period of the calendar year. Unused leave will not carry over year to year and will not be paid out upon separation of employment, voluntary or involuntary. Leave is awarded based on level of potential hazard and affected employees. The city manager can award more administrative leave based on severity of the incident. Once a determination has been made on awarded leave the employee will be notified and an administrative leave form will be given to finance.

	<u>08/05/2015</u> Date
By signing below, I acknowledge that I have ensure my full understanding.	read AR 15-03. I was given the opportunity to ask questions to
Printed Name	
Signature	Date

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NEAR MISS REPORT

A near miss is a potential hazard or incident that has not resulted in any personal injury or property damage. Unsafe working conditions, unsafe employee work habits, improper use of equipment or use of malfunctioning equipment have the potential to cause work related injuries or damage. It is everyone's responsibility to report and/or correct these potential accidents/incidents immediately. Please complete this form as a means to report these near-miss situations.

Department/Location (of incident):	Date/Time:
Please check all appropriate conditions:	
	Unsafe equipment Unsafe use of equipment
Description of incident or potential hazar	rd:
Corrective action taken (what was done	to cease the incident or potential hazard):
Employee Cignotive (Ontional)	Data
Employee Signature (Optional)	Date

A near miss investigation will be conducted by Safety Coordinator and Safety Committee to identify primary and contributing causes; corrective action will be taken to remove hazard, have replaced, repaired, or retrain in the proper procedures for the task.