INCIDENT

At 4.15am the driver of an underground haul truck fell asleep while driving up a decline. The truck ran into the wall and the damage resulted in a broken windscreen. The driver was not injured in the accident but a contributory factor was that he had flown back to site at 4.45pm and started work at 6.00pm on the nightshift of the same day.

COMMENT AND PREVENTATIVE ACTION

An investigation of the incident revealed that the driver had had difficulty sleeping the night before returning to the mine.

The mine is also reviewing the standard of camp accommodation for nightshift employees. To improve sleeping conditions, persons working on the nightshift are to be provided with double insulated rooms and ensuite bathroom facilities.

The fitness and condition of persons who return to a mine operating a fly-in, fly-out roster should be of great concern to all employers. Employers have no direct control over employees while they are away from the mine and must accept that factors relating to health, lifestyle or other interests can have a significant effect when the person returns to the mine. Alterations to sleep pattern while away from the site and when returning to work can result in a condition of sleep deficit over the initial period of change.

It is incumbent upon each employer operating in a fly-in, fly-out environment to develop appropriate strategies to deal with issues arising from employees returning to work who may suffer sleep deprivation through a combination of travel and normal shift demands, or who may be unfit to resume work for other reasons.

Careful consideration should be given to the practice of commencing normal shift work patterns immediately after returning to the mine. This might encompass having overlapping shift roster patterns, reducing the length of time operators work on the initial shift, or the mine might utilise the first shift back to carry out classroom style training or site change awareness programs. Implementation of these or similar schemes could greatly reduce the element of risk associated with sleep deficit.

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