**Real Life Incident: Questionnaire**

This form is developed to provide those who have used a MineARC Refuge Chamber the opportunity to share their stories and experiences. There are seven short sections on the form which should take approximately 15 minutes to complete; please add as much detail as are you are comfortable.

We appreciate the time you have taken to complete the form. For further information, please contact [marketing@minearc.com.au](mailto:marketing@minearc.com.au?subject=Incident%20Experience%20Survey)

Personal and company details will not be used without permission, and you can select to remain anonymous in the last section of the form.

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| **Section 1: Your Details** | | | | | | | | | | | | | | | | |
| Name: | | | Click here to enter text. | | | | | | | | | | | | | |
| Email address: | | | Click here to enter text. | | | | | | | | | | | | | |
| Company: | | | Click here to enter text. | | | | | | | | | | | | | |
| Job Title: | | | Click here to enter text. | | | | | | | | | | | | | |
| Primary Industry: | | | | | | | | | | | | | | | | |
| Hard Rock Mining | | | | Coal Mining | | | | | Tunnelling | | | | | Petrochemical | | |
| Disaster Relief | | | | Other, please specify: Click here to enter text. | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| **Section 2: Incident Details** | | | | | | | | | | | | | | | | |
| Site where incident occurred: | | | | | Click here to enter text. | | | | | | | | | | | |
| Location of site: | | | | | Click here to enter text. | | | | | | | | | | | |
| Date of incident: | | | | | Click here to enter a date. | | | | | | | | | | | |
| Details of the incident - What was the hazard? How did it occur? What did you do? | | | | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| **Section 3: The Refuge Chamber** | | | | | | | | | | | | | | | | |
| What type of chamber did you use? i.e. TunnelSAFE Standard 12 person, MineSAFE Compact 4 person | | | | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | |
| Did you have to travel far to reach the chamber? | | | | | | | | | | | | | | | | |
| 0m - 250m (0mi - 0.155mi) | | | | | | 250m - 500m (0.155mi - 0.31mi) | | | | | | 500m - 750m (0.31mi - 0.46mi) | | | | |
| 750m - 1km (0.46mi - 0.62mi) | | | | | | Over 1km (0.62mi) | | | | | |  | | | | |
|  | | | | | | | | | | | | | | | | |
| How many people were inside the chamber during the emergency? | | | | | | | | | | | | | | | | |
| Only me | 2 | | 3 | | | | 4 | | 5 | | 6 | | | 7 | | 8 |
| 9 | 10 | | Over 10, please specify: Click here to enter text. | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| How long were you inside the refuge chamber? | | | | | | | | | | | | | | | | |
| 0 - 1 hour | | 1 - 3 hours | | | | | | 3 - 6 hours | | | | | 6 - 9 hours | | | |
| 9 - 12 hours | | 12 - 15 hours | | | | | | 15 - 18 hours | | | | | 18 - 21 hours | | | |
| 21 - 24 hours | | 24 - 36 hours | | | | | | Over 36 hours, please specify: Click here to enter text. | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| Did you have any means of communicating with the surface during entrapment? e.g. GuardIAN, phone  *Please select all applicable options.* | | | | | | | | | | | | | | | | |
| Yes - via phone | | | | Yes - via GuardIAN | | | | | Yes - via radio | | | | | No | | |
|  | | | | | | | | | | | | | | | | |
| Did you have to use the scrubber and oxygen cylinders at any point? | | | | | | | | | | | | | | | | |
| Yes | | | | No | | | | |  | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| How did you find the refuge chamber in regards to safety and comfort? | | | | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | |
| Did you feel confident in operating the refuge chamber? Had you had adequate training? | | | | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | |
| What level of refuge chamber training did you receive during your induction?  *Please select the most relevant option.* | | | | | | | | | | | | | | | | |
| I was not made aware of the refuge chamber or provided training | | | | | | | | | | | | | | | | |
| It was briefly mentioned during site induction, but no formal training was provided | | | | | | | | | | | | | | | | |
| An short training session was provided | | | | | | | | | | | | | | | | |
| I was given extensive training refuge chambers and how to operate them | | | | | | | | | | | | | | | | |
| Other, please specify: | | | | | | | | | | | | | | | | |
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| How often does your mine sight run refresher courses for the refuge chamber?  *Please select the most relevant option.* | | | | | | | | | | | | | | | | |
| Once a month | | Once every three months | | | | | | | Once every six months | | | | | | | |
| Once a year | | Never | | | | | | | Other, please specify: Click here to enter text. | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| **Section 4: Your Experience** | | | | | | | | | | | | | | | | |
| How did you feel during your period of entrapment? What did you do to pass the time? | | | | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | |
| Tell us about what happened when the rescue team came in to bring you to the surface. How did you feel? | | | | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | |
| Did the experience change you or your behaviour in any way? Is there anything you value more/less? | | | | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | |
| Have you previously shared your experience with anyone outside of your mine sight?  *Please select all applicable options.* | | | | | | | | | | | | | | | | |
| Partner | | | | Children | | | | | | Close friends | | | | | Colleagues | |
| Work supervisor | | | | Counsellor/ Psychologist | | | | | | I have not told anyone | | | | | | |
|  | | | | | | | | | | | | | | | | |
| When on site, what do you look forward to most about going home? | | | | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | |
| If there was one thing you could let people know about refuge chambers and your experience, what would it be? | | | | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| **Section 5: Safety** | | | | | | | | | | | | | | | | |
| What improvements could be made to current safety standards and products?  Is there anything you think is lacking? | | | | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | |
| What value do you place on safety in your work environment? | | | | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | |
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| **Section 6: General** | | | | | | | | | | | | | | | | |
| What are you doing now? Are you still working at the same site/industry? Did the outcome of the event give you the confidence to stay in the industry? | | | | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | |
| Any further comments you would like to add? | | | | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | |
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| **Section 7: Contact Permission & Authorisation** | | | | | | | | | | | | | | | | |
| I am available to be contacted for phone or video interviews | | | | | | | | | | | | | | | | |
| Yes | | | | No | | | | |  | | | | | | | |
| Please select the level of anonymity you would prefer. | | | | | | | | | | | | | | | | |
| I would like to remain anonymous | | | | | | | | | | | | | | | | |
| I give permission for my first name to be published | | | | | | | | | | | | | | | | |
| I give permission for all my details to be published | | | | | | | | | | | | | | | | |

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Signature: Click here to enter text.

Name: [First Name] [Last Name]. Date: Click here to enter a date.