

A self-guided working package for incident reporting

(adapted from the WSIB publication *Accident Investigation: A self-guided working package*)

- ***Comply with legal requirements of incident reporting***
- ***Gather and record the facts of the situation***
- ***Report a description of the incident and its background***
- ***Determine the direct causes (unsafe acts and conditions)***
- ***Determine the underlying causes of the unsafe acts and conditions that led to the incident***
- ***Examine the factors behind the underlying causes***
- ***Consider the degree of risk involved***
- ***Make recommendations for change***
- ***Plan a follow-up to ensure that the recommendations are being applied***

NOTE: Participants should have the following materials:

- *Incident Investigation* (shirt-pocket reference booklet)
- *Incident Investigation Participant's Manual*
- *Incident Investigation : A self-guided working package for incident reporting*

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A Guide to Proper Incident Reporting Procedures

In all cases of workplace death, injury or occupational illness, the employer has legal obligations under the Occupational Health and Safety Act to report particulars of the incident to the Ministry of Labour and certain interested workplace parties. As well, the employer must keep a record of past incidents. The specific obligations for reporting depend on whether the incident involves a fatality or critical injury, a less severe injury or an occupational illness (definitions of each are on page 3). Listed below are the basic requirements for each type of situation.

Fatality or Critical Injury

- Contact the following parties immediately by telephone, fax, telegram or other direct means to inform them that a fatality or critical injury has taken place: (In case of fatality, also contact the local police)
 - the nearest Ministry of Labour office
 - the Joint Health and Safety Committee in the workplace (if it has one)
 - the health and safety representative in the workplace (if it has one)
 - the trade union in the workplace (if it has one)
- Complete a written report (such as the incident report form included with this package) that complies with the requirements of the Occupational Health and Safety Act and Regulations and submit it to the nearest Ministry of Labour office within 48 hours.
- Complete a Workplace Safety and Insurance Board Form 7 and submit it within three days. (Workplace Safety and Insurance Act)

Lost Time Injury or No Lost Time Injury

- Complete a written report (such as the incident report included with this package) and submit it within four days to the following parties:
 - the nearest Ministry of Labour office (if ordered by an inspector)
 - the Joint Health and Safety Committee in the workplace (if it has one)
 - the health and safety representative in the workplace (if it has one)
 - the trade union in the workplace (if it has one)
- Complete a Workplace Safety and Insurance Board Form 7 and submit it within three days. (Workplace Safety and Insurance Act)

Occupational Illness

- Complete a written report (such as the incident report included with this package) and submit it within four days to the following parties:
 - the nearest Ministry of Labour office
 - the Joint Health and Safety Committee in the workplace (if it has one)
 - the health and safety representative in the workplace (if it has one)
 - the trade union in the workplace (if it has one)
- Complete a Workplace Safety and Insurance Board Form 7 and submit it within three days. (Workplace Safety and Insurance Act)

Note: In all of the above cases, keep a copy of the written report on file for at least one year (and keep at least the last two such reports on file at all times).

First Aid

- Keep a written record of the particulars. No reporting is required.

Definitions

The following definitions are offered as a guide to classifying a workplace injury at the time that it is first reported. In many cases it will be difficult to make an accurate decision based on the limited amount of information available soon after an incident. Also, the medical status of the injured worker may change as time passes.

Fatality*

A fatality is an incident in the workplace in which a person is killed.

Critical Injury*

Ontario Regulation 834 of the Occupational Health and Safety Act defines a critical injury as follows:

“For the purposes of the Act and the Regulations, critically injured means an injury of a serious nature that,

- a) places life in jeopardy;
- b) produces unconsciousness;
- c) results in substantial loss of blood;
- d) involves the fracture of a leg or arm but not a finger or toe;
- e) involves the amputation of a leg, arm, hand or foot but not a finger or toe;
- f) consists of burns to a major part of the body; or
- g) causes the loss of sight in an eye.”

Occupational Illness

The Occupational Health and Safety Act, Section 1, defines an occupational illness as follows:

“Occupational illness means a condition that results from exposure in a workplace to a physical, chemical or biological agent to the extent that the normal physiological mechanisms are affected and the health of the worker is impaired thereby and includes an occupational disease for which a worker is entitled to benefits under the Workplace Safety and Insurance Act, 1997.”

For the purposes of an incident report, an occupational illness is any situation in which the employer is advised by a worker or on behalf of a worker that the worker has an occupational illness or that a claim in respect of an occupational illness has been filed with the Workplace Safety and Insurance Board (WSIB).

Lost Time Injury

A lost time injury is a serious injury that is less severe than a critical injury. Such injuries result in time off work beyond the day of the incident, a loss of wages, or a permanent disability.

No Lost Time Injury

A no lost time injury is any injury in which no time is lost from work other than on the day of the incident, but in which medical aid (not just first aid) is required.

First Aid

The term “first aid” is used here to refer to injuries of a minor nature which do not fit the above descriptions and in which injured workers receive attention from a first aider (including themselves) or a company nurse and return immediately to work.

Preserving Evidence

* Note the requirement in Section 51(2) of the Occupational Health and Safety Act to preserve evidence: “Where a person is killed or is critically injured at a workplace, no person shall, except for the purpose of (a) saving life or relieving human suffering; (b) maintaining an essential public utility service or a public transportation system; or (c) preventing unnecessary damage to equipment or other property, interfere with, disturb, destroy, alter or carry away any wreckage, article or thing at the scene of or connected with the occurrence until permission to do so has been given by an inspector.”

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Instructions for completing Incident Report Form

Note: The form on the following pages, when properly filled out, will fulfil the requirements under the Occupational Health & Safety Act for reporting incidents to the Ministry of Labour, to the Joint Health & Safety Committee (or worker representative) and to the trade union at the workplace. (It can be photocopied and faxed.)

Fill in all areas of the form. If any areas are not applicable or if you do not have the information required, do not leave those sections blank. Write in the reason you cannot give the information requested. For example: "Unable to determine victim's home telephone number." or "No equipment or machinery involved."

The numbered notes below correspond to the numbered areas on the report form:

- 1** Fill in the full name and address of the employer and type of business (i.e. "Sawmill", "Trucking", etc.)
- 2** Fill in the full name, address and telephone number of the injured person. (If more than one person is injured in one accident, fill out a separate form for each person.) "Identification number" in this section refers to any file number, employee number or other number used by the employer to identify the employee.
- 3** Classify the incident as injury, property damage or an incident without loss. (More than one may apply.)
- 4** Based on what you know at this time, classify any injury as "Critical", "Lost time", or "Occupational Illness". (Each of these terms involve different legal requirements for reporting and subsequent action.)
- 5** Fill in the date and time of the incident. If the exact time is not yet known, give the known range of time (i.e. "Between 2:30 pm and 4 pm) In the case of occupational illness, list the date that it was reported to you.
- 6** Fill in the time and date that the incident was reported to you.
- 7** State the location of the accident as specifically as possible. (i.e. "In the main garage," or "In the woodlands, Casey Township," or "In the Number Two Warehouse".)
- 8** Give a brief description of the incident and the circumstances surrounding it. Limit yourself to the facts as they are known at this time; do not speculate about the causes or contributing factors at this point (until a full investigation has been carried out.) For example: "The worker was driving a half-ton pickup along a gravel haul road when his vehicle left the road, rolled over and struck a tree," or "The worker was walking in the garage when he fell and struck the concrete floor," or "The worker was struck by a flying piece of metal while operating a hydraulic press."
- 9** Describe the injuries sustained by the worker (as they are known at this time). Use simple, everyday language: "Cuts and bruises to his head and neck and a possible concussion," or "a broken bone in the lower right leg."
- 10** Describe the equipment or machinery involved (if any). Give make, model number and size and type, if possible. (For example: "A 24-inch cut-off saw," or "a Bobst die press".)

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- 11** Note whether first aid was given at the scene and how the injured worker was transported (i.e., driven in another employee's car, by ambulance, etc.) Fill in the name of the medical facility (doctor's office, hospital emergency dept.) and the name of the attending physician.
- 12** Record the names of the witnesses to the incident. These are the people who were at or near the scene of the incident who actually saw or heard all or part of what happened; or the first people on the scene after the incident.
- 13** Describe the immediate measures taken at the scene of the incident to make sure that any continuing hazard does not cause injury to anyone else. This section does not refer to the long-term changes that will be made following a full investigation. For example: "Machine shut down and cordoned off. Power supply locked out and tagged pending outcome of investigation."
- 14** Fill in the date of the report and your name, title or position, and telephone number.
- 15** The background information sets the scene. It describes what was happening just before the accident occurred. The type of information recorded in this section will vary greatly from one report to the next but might include the following:
 - what work was being done?
 - how many were involved at the worksite?
 - what were the weather conditions?
 - how much experience did the injured worker have?
 - was he being trained?
 - was he considered experienced?
 - what were the normal procedures, etc.?
- 16** Fill in a detailed description of the incident once all the facts are available. (The short description section on "Page 1" of this document deals only with the preliminary findings.) When you are satisfied that you have as good a picture of the incident as you're going to get, write a full description. (It should be such that if a complete stranger reads this report, he will have a good picture of what happened.)
- 17** Describe the unsafe acts that were factors in this incident – things that people did or things that people were supposed to do but did not do. This could include things like using improper procedure for a given task, violating a safety rule, using the wrong tools or equipment for a given task, etc.
- 18** Describe the unsafe conditions that existed at the time of the incident that contributed to it. These might include things like faulty equipment (bald tires or worn brakes on a vehicle), a machine not properly adjusted, facilities in poor condition, poor training for the task being performed, a lack of supervision, poor ergonomic design of the workstation, etc.

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- 19** Consider the unsafe acts described in Section 17. Take one step back from the event and ask: “Why did this person do what he did?” “Why did this person use the wrong tool?” “Why did this person not follow the procedures?” “Why did this person violate the safety rule?” Are there reasons? Are the right tools not available? Is the approved procedure impractical? Is there a long history of people doing it this way and getting away with it? Did the person not know any better? Did he have to do it that way because there is no practical alternative?
 - 20** Consider the unsafe conditions identified in Section 18. Why did they exist? Why were they allowed to exist? Have the conditions existed for a long time? Is it just that everyone is used to them? Do conditions like this arise on a regular basis? When these unsafe conditions arise, are they allowed to remain or is there a system for spotting them and fixing them? Does everyone know that they have to report unsafe conditions? Does everyone know whose job it is to fix them?
 - 21** Now consider the factors or flaws in the system. Look at the underlying causes as described in Sections 19 and 20. Then ask the question, “What is it about the way we do things in this workplace that created the underlying causes and allowed them to remain?” and “Do we inadvertently encourage these actions and conditions?”
 - 22** Ask what the possible loss could have been. Could someone be critically injured or killed next time?
 - 23** Could this happen again? Did the accident involve a task that is regularly performed? Tools that are used all the time? A problem that crops up regularly? Have there been “close calls” before?
 - 24** Consider the chance of a recurrence and the possible consequences together. How serious is this situation? (If the risk of recurrence is very high and if the consequences are also very high – critical injury, for example – then immediate action is necessary.)
 - 25** Make recommendations for changes that you believe will prevent the type of incident that you are investigating. In general, each cause identified above should lead to a recommendation. (Some causes can be broken down further into various elements. In that case, each element should lead to a recommendation.)
 - 26** Fill in the name of the person or group who prepared and submitted the report.
 - 27** Acknowledge receipt of this report and its review by the JHSC or worker representative and by management.
 - 28** Describe the follow-up (including target dates) that is planned for the recommendations. Who will check to see if the recommendations have been acted on? When? In 30 days or 60 days?
- Note: This form, when filled out for any given injury, may include more information than is legally required. However, filling out the form completely will ensure that all the information that is legally required in any given cause is included in all cases.

Incident Report Form

Report Form: _____

1	Company name:		
	Address:		
	City/town:		Postal code:
	Telephone:	Fax:	Type of business
2	Name of injured worker:		
	Address:		
	City/town:		Postal Code:
	Telephone:		
3	<input type="checkbox"/> Injury <input type="checkbox"/> Property damage <input type="checkbox"/> Fire <input type="checkbox"/> Incident without loss		4
	<input type="checkbox"/> Fatality <input type="checkbox"/> Critical <input type="checkbox"/> Lost time <input type="checkbox"/> No lost time <input type="checkbox"/> Occupational illness <input type="checkbox"/> First aid		
5	Date of incident:	Time:	<input type="checkbox"/> AM <input type="checkbox"/> PM
	Date incident reported:	Time:	<input type="checkbox"/> AM <input type="checkbox"/> PM
7	Location of incident:		
8	Description of incident:		
9	Description of injuries:		

25	Recommendations:	

26	Report submitted by:	Date:
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27	Reviewed by JHSC or Worker Representative:	Date:
	Reviewed by management:	Date:

28	Follow-up on recommendations: How, when and by whom will follow-up on these recommendations be done?

Note: This form, when filled out for any given injury, may include more information than is legally required. However, filling out the form completely will ensure that all the information that is legally required in any given cause is included in all cases.

Diagram: Use this section to sketch a diagram of the incident scene.

A large grid of graph paper, consisting of 20 columns and 30 rows of small squares, intended for sketching an incident scene.