



**INSTRUCTIONS** (please refer to the Quick Guide on page 4 for full details)

- Complete Page 1 and submit to your Supervisor or P.I. immediately.
- Within 48 hours, Supervisor/P.I. completes Preliminary Investigation on Page 2, and submits form to [ohs@uvic.ca](mailto:ohs@uvic.ca).
- You may attach a separate sheet or use page 3 if you have additional information.

**INCIDENT OR HAZARD INFORMATION**

<b>Category:</b>	Accident with Injury Immediately Reportable (see pg.4)	Hazard/Safety Concern Fire/Explosion	Spill/Environmental Release Equipment Failure	Near Miss Property Damage
<b>Injured person/contact information:</b>	Faculty	Staff	Student	
Last Name:	First Name:		Phone Number:	
Department:	Job Title:			
Date/time of incident:	Date/time reported:		Incident reported to:	
MM/DD/YY	TIME	MM/DD/YY	TIME	
<b>Action following the incident:</b>	First Aid	Contacted Campus Security: Yes No	Remained at work <b>OR</b>	
	Medical Treatment (Doctor) on: _____	MM/DD/YY	Missed work (Last day worked): _____	
			MM/DD/YY	
<b>Witness Information</b>				
	Last name	First name	Phone Number	Job Title
<b>Location of incident</b> (e.g. area, building, floor, room):				
<b>Accident/Injury Type:</b>	N/A	<b>Exposure:</b>	N/A	<b>Incident Involves Aggression/Violence:</b>
			N/A	
No Injury Near Miss Abrasion Allergic Reaction Burn Contusion	Crush Injury Fracture Laceration Strain/Sprain Other (specify):	Biological / Blood and Body Fluid Chemical (e.g. spill, vapour) Radiation / Physical (e.g. noise, heat, particulate) Other (specify):	TYPE: Verbal Physical Comments:	SOURCE: Faculty Employee Student Contractor Visitor
				RESPONSE: Campus Security Police notified None Other (specify):
<b>Hazard/Safety Concern rating:</b> Low Moderate High				

**DESCRIPTION OF INCIDENT OR HAZARD/SAFETY CONCERN:**

Name of individual submitting report: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_



PRELIMINARY INVESTIGATION (within 48 hours):

Incident Causes and Significant Contributing Factors (Check all that apply)

1 Basic Root Cause(s)

Abuse or misuse  
Environment  
Equipment  
Supervision  
Engineering (includes design)  
Maintenance  
Tools  
Training/Orientation  
Work procedures/process/standards

2 Cause Group (People Related)

Safe operating procedures not followed  
Change in workplace not communicated  
Available equipment not used  
Improper loading / lifting  
Improper placement / position for task  
Personal protective equipment (PPE) not used  
Safety devices not activated  
Using equipment improperly  
Using defective equipment

3 Cause Group (Work Environment Related)

Environmental conditions (e.g. gases, vapours, dust, smoke, fumes, light, temperature, airflow)  
Equipment or materials  
Fire and explosion hazard  
Inadequate or improper PPE  
Noise exposure  
Poor / inadequate housekeeping  
Spill / Exposure  
Unsafe work conditions  
Workspace design / ergonomics

Provide details:

Supervisor/P.I. (or designate) NAME: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

FULL INVESTIGATION (within 30 days) provide additional details on causes/contributing factors. DATE OF INVESTIGATION: \_\_\_\_\_

Follow-Up Corrective Actions	Preliminary	Full	Person(s) Responsible	Est. completion date check ✓ when done	

TITLE	NAME (PLEASE PRINT)	SIGNATURE	PHONE	DATE
Supervisor / P.I. (or designate)				
Worker / Union Representative				

Local Safety Committee Review	Review Date:	Co-Chair(s) Name:
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PLEASE USE THIS PAGE IF YOU HAVE ADDITIONAL INFORMATION TO INCLUDE FOR:

Preliminary Investigation:

Full Investigation:

Corrective Actions:



This form shall be completed by UVic faculty, staff and students to report all accidents/incidents, near misses, and hazards/safety concerns as required by WorkSafeBC (WSBC). All reported incidents must be investigated promptly by the Supervisor/P.I. and documented on this form.

### Page 1 – Incident or Hazard Information

1. Individuals should first inform their Supervisor/P.I. that they have been injured, had a near miss, or there is an unsafe condition (i.e. hazard).
2. Complete all relevant sections (ensure you complete the location and description information).
3. If there was a witness to the incident, record their name, address and phone number.
4. The incident description should include:
  - who was involved
  - what happened before, during and after the incident
  - what was the individual doing at the time of the incident
  - where the incident occurred
  - other relevant information and observations

### Page 2 – Preliminary Investigation & Full Investigation

- Preliminary investigations must be completed within 48 hours by the Supervisor/P.I. for all reported incidents including WSBC claims.
- Full investigations must be completed within 30 days of the incident if the issues could not be fully assessed and corrected during the Preliminary investigation.
- For all WSBC claims or serious incidents, a joint investigation must be completed with the Supervisor/P.I. and worker/union representative.
- OHSE will assist in coordinating joint investigations.
- Please submit all investigation reports to OHSE when completed.
- All completed reports will be reviewed by the appropriate joint Local Safety Committee (LSC).

### Definitions:

- **Accident/Incident:** an unplanned or unwanted event that disrupts the orderly flow of the work process, or an occurrence which results in or has the potential for causing an injury or occupational disease.
- **Hazard:** is a thing or condition that may expose a person to a risk of injury or occupational disease.
  - Low Hazard – does not pose an immediate risk and should be addressed in a timely manner
  - Moderate Hazard – requires attention as soon as possible to prevent or reduce risk of injury
  - High Hazard – requires immediate attention and corrective action to prevent serious injury.
- **Near Miss:** an incident with the potential for causing serious injury and if allowed to continue, could cause significant injury or equipment damage.
- **Immediately Reportable:** Any incident described under [Section 68](#) of the WCA that resulted in or involved:
  - serious injury or death of a worker
  - major structural failure or collapse of a building, bridge, tower, crane, hoist, temporary construction support system or excavation
  - major release of a hazardous substance
  - fire or explosion that had the potential for causing serious injury to a worker
  - diving incident as defined by OHS Regulation [24.34](#)
  - blasting incident that results in injury