

Hazard Identification and Near-Miss Reporting Form

This form is to be used by employees to report a hazardous workplace condition or practice. Please complete this form and fax it to Safety & Health/WCB Administrator at 204-631-4171.

Once faxed, please turn in the original copy to your immediate supervisor.

<u>IMPORTANT</u>: If an incident occurred that resulted in an injury, please advise your supervisor immediately and follow the Work Related Injury Reporting Procedure.

erminal/Customer:	Address:	
City/Province:	Date: (mm / dd / yyyy)	Time: am / pm
upervisor:	Weather conditions:	
Please indicate and che	eck the area of hazard and provid	le a brief description
Physical Hazards	Ergonomic Hazards	Chemical Hazards
Traffic (Yard, parking lot)	Lighting	Cleaning products/solvents
Equipment (tools, machines, tractor)	Frequent lifting	Vapors and Fumes
Trip/Slip/Fall Hazards	Workstation	Spills (oil, gas etc.)
General Housekeeping	Awkward movements	
Personal Protective Equipment (PPE)		
Damage to Freight		
Damage to Structure		
Damage to butacture		
Other: Please be specific	ttach a sangrata sheet of naner	
	ttach a separate sheet of paper	



Office Use Only - TO BE COMPLETED BY INVESTIGATOR			
Investigation Details: If more space if required, attach a separate sheet of paper			
Corrective action taken:			
Investigator Name:	Date Completed:		
Investigator Signature:			

Hazard is defined any source of potential damage, harm or adverse health effects on something or someone under certain conditions at work

Near-Miss is defined as an unplanned event that did not result in injury, illness, or damage – but had the potential to do so

Process:

If an employee or contractor spots a hazard or near-miss they:

- 1. Complete a Hazard Identification and Near-Miss Reporting Form with as much detail as possible.
- 2. Fax the form to Safety & Health/WCB Administrator in Winnipeg at 204-631-4171.
- 3. Submit the original form to their immediate Supervisor.

Once a supervisor receives a completed Hazard Identification and Near-Miss Reporting Form they:

- 1. Must conduct an investigation
- 2. Take corrective action within one (1) week
- 3. Fax completed report to the Safety & Health/WCB Administrator in Winnipeg at 204-631-4171.

If you require additional support and/or resources for conducting investigations and eliminating hazards, please contact your area Safety Representative.

Description of Responsibilities:

Company Employees and Contractors:

- 1. Please assess and note any hazards in your working environment
- 2. Follow Hazard Identification and Near-Miss Reporting Procedure

Managers and Supervisors:

- 1. Make sure that if a hazard is found, immediate action is taken to eliminate it.
- 2. Ensure Supervisors investigate hazard and take corrective action to correct hazard.
- 3. Ensure all submitted hazard reports are taken seriously and dealt with immediately.
- 4. Communicate action taken to the person who submitted / spotted the hazard and thank them for bringing it forward
- 5. Communicate hazard reported and action taken to the department to:
 - a. Promote hazard reporting as a positive action
 - b. Demonstrate the action that was taken
 - c. Promote the importance of Safety in the workplace
- 6. Keep Hazard Reports on file for six (6) months.
- 7. Ensure your working environment is safe and tidy.