

Accident/Injury, Hazard Reporting and Investigation Procedures

Policy

All employees, contract personnel and volunteers (“workers”) at Jubilee United Church (JUC) are required to promptly report accidents, injuries, incidents of workplace violence causing injury and near misses (“**occupational health and safety (OHS) incidents**”) which they either incur themselves or witness using an “**Accident/Injury Report**” in the form attached.

The blank Accident/Injury Report is available in a pocket on the Health and Safety Bulletin Board located outside the Auditorium. Completed forms should be left for the Property Manager in the Property Manager’s office or under the Property Manager’s door.

Any worker accessing the First Aid Kit will complete the applicable “**First Aid Kit Access Report**” in the form attached.

First Aid and Medical Treatment

When an injury occurs at JUC, the first priority is to ensure prompt first aid or other medical treatment for the injured worker as appropriate.

Equally important is the obligation to ensure that any immediate risk to other workers from any device, equipment or physical condition in the workplace is promptly addressed including discontinuing work, locking out devices, restricting access and preserving the accident scene, as appropriate.

Notification Procedures

Internal notification of all OHS incidents must be made to the following individuals, or their designate, using a copy of the Accident/Injury Report:

- The Property Manager.

The Property Manager will, in turn, ensure that

- The Employee Health and Safety Representative; and
- The Trustee Responsible for Health and Safety (“Responsible Trustee”)

are notified.

External Notification Procedures

A workplace injury to a worker who requires treatment beyond first aid must be reported to Workplace Safety and Insurance Board (“WSIB”) on a Form 7 “Employers Report of Injury/Disease”. The Form 7 will be prepared by the Property Manager in collaboration with the Responsible Trustee.

An accident or incident of workplace violence causing injury which results in the person being disabled from performing their regular work and which requires medical attention must be reported to the Ministry of Labour (“MOL”), in writing, within four (4) days of the occurrence. This report will be prepared by the Property Manager in collaboration with the Responsible Trustee.

When a worker is killed or critically injured in the workplace, then, the MOL must be **immediately** notified by telephone and a written report must be filed within forty-eight (48) hours of the occurrence. The Property Manager or designate will provide telephone notification and the report will be prepared by the Property Manager in collaboration with the Responsible Trustee.

A **critical injury** is an injury of a serious nature that:

- Places life in jeopardy
- Produces unconsciousness
- Results in substantial loss of blood
- Involves the fracture of a leg or arm (multiple digits) but not a finger or toe
- Involves the amputation of a leg, arm, hand or foot (multiple digits) but not a finger or toe
- Consists of burns to a major portion of the body
- Causes the loss of sight

In all instances, the **Accident/Injury Report** in the form attached is an essential element in the overall occupational safety reporting requirements.

Responsibilities

Workers

- Promptly complete an Accident/Injury Report and First Aid Kit Access Report when required; and,
- Participate in an investigation when they incur or witness an OHS incident.

Employee Health and Safety Representative

- Receive and review copies of Accident/Injury Reports and First Aid Kit Access Reports; and,
- Assist in OHS incident investigations when needed and as required.

Property Manager or Delegate

- Ensure that the injured worker receives medical treatment including first aid treatment as required;
- Secure the OHS incident scene as appropriate;
- Notify: the Health and Safety Representative; the Responsible Trustee and the MOL, as appropriate;
- Notify all other workers of any applicable unresolved workplace hazards;
- Receive and review copies of Accident/Injury Reports and First Aid Kit Access Reports;
- Conduct investigation into OHS incidents in cooperation with the Health and Safety Representative and the Responsible Trustee;
- Prepare reports to the MOL and Form 7 to WSIB as required in cooperation with the Responsible Trustee; (Form 7 is found at www.wsib.ca at the tab labelled 'Report of Injury/Disease Form')
- Determine appropriate corrective actions, if any, and implement the same.

Trustee Responsible for Health and Safety

- Receive and review copies of Accident/Injury Reports and First Aid Kit Access Reports;
- Ensure that Accident/Injury Reports and First Aid Kit Access Reports are retained as required;
- Conduct investigations into OHS incidents in cooperation with the Health and Safety Representative and the Property Manager;

- Assist in the preparation of reports to the MOL and Form 7 to WSIB as required in cooperation with the Property Manager where legally required;
- Determine appropriate corrective actions, if any, and ensure the same are implemented; and,
- Report to the Board of Trustees on a quarterly basis concerning OHS incidents and remedial measures required or to be undertaken.

Accident/Injury Report

By completing this Report concerning occupational health and safety (OHS) incidents, workers of Jubilee United Church help to keep Jubilee a safe place for everyone. Where needed, you may be contacted for more information. Thank you for your cooperation.

Please write legibly.

1. **Name of Injured Worker and contact details (personal email and phone number):** _____

2. **Describe what happened and injuries received:** _____

3. **What if any devices or equipment were involved in the incident?** _____

4. **Date and Time of incident:** _____

5. **Where in JUC did the incident occur?** _____

6. **Names of other witnesses/positions and contact details:** _____

7. **Describe the first aid treatment received and who provided the same** _____

8. **Did the injured person require emergency medical care (beyond first aid)?**

(check the appropriate box) **YES** **NO**

a. **If yes, at which hospital/clinic was care received?** _____

b. **Name of physician who treated the injured worker?** _____

9. Was the physical area where the incident occurred secured? If so, how? _____

10. What corrective/remedial actions were taken to address the underlying cause of the OHS incident?

11. Name/Position/Contact details of person completing this report: _____

Signature: _____

(Of the person completing this report)

Date: _____

If the incident resulted in critical injury (i.e. life is in jeopardy, produced unconsciousness, caused substantial loss of blood, arm or leg broken, injury resulted in amputation of arm, leg, hand or foot, caused major burns, caused loss of sight) **please call 647-292-4106 or send text or high priority email to bsecord@jubileeunited.ca. In the subject line or message write/say: "Critical Injury at JUC". Provide your name, contact info and a brief description of the incident.**

First Aid Kit Access Report

To anyone accessing this First Aid Kit:

Please be aware that Jubilee United Church is required under the Workplace Safety & Insurance Act to keep records of and report all incidents of workplace safety including incidents of injury to workers in this regard. Completing this report is part of our documentation.

NOTE: Accessing the first aid kit for the purpose of checking supplies does not need to be documented below.

Please write legibly.

Date (Of first aid kit access)	Time (Of access)	Name (Person(s) needing first aid)	Reason (That first aid was needed. i.e. minor cut, minor burn, please specify)	Name (Person completing this report)

First Aid Kit Access Report pages are to be retained in this binder for documentation requirements in accordance with Workplace Safety & Insurance Act (WSIA). On an annual basis the First Aid Kit Access Report is stored by the Trustee Responsible for Health and Safety at JUC.