



Western

## Hazards Reporting

**Subject:** Procedures and Guidelines for Hazard Reporting

**Applies to:** All employees

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**Pages:** 3

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**Prepared and Approved by:** Occupational Health and Safety

### 1. Purpose

The purpose of these procedures is to ensure all employees on campus have the proper tool to report hazardous conditions or acts on campus. It is the responsibility of supervisors to encourage employees to report hazards. It is the responsibility of each employee to report health and safety concerns which affect them or which affect other employees. These concerns are not limited to the personal workspace of the employee, but can include any health and safety concern on the Western University campus as a whole.

#### Definition:

- Hazardous condition or act – Physical conditions or actions, which deviate from what would be considered acceptable or normal which lead to or cause loss.
- Major – any hazard that has the potential to cause death, critical injury, or lost time
- Moderate – any hazard that has the potential to cause injury requiring medical attention
- Minor – any hazard that has the potential to cause injury requiring first aid

### 2. Reporting

- Corrective action should be taken by the employee if they are able and qualified. If the employee is unable to take corrective action then any hazard concerns are to be reported to the employee's direct supervisor and /or their JHSC representative, no matter where the health and safety concern is located. Concerns are to be reported immediately so the appropriate corrective actions can be made quickly. This will ensure that the potential for loss is minimized.

- Concerns are reported using the standard “Hazard Report” form. The employee must complete the top half of the form, including the following:
  - (a) his/her name and signature;
  - (b) name of supervisor;
  - (c) the location and description of the hazard

The supervisor shall complete and sign the response section of the form and return it to the employee who reported the health and safety concern.

Supervisors will learn the appropriate procedures to be followed at the mandatory Faculty/Supervisor Responsibility Training session.

### **3. Corrective Action**

- The supervisor will make corrective action if required and rate the hazard on section B of the “Hazard Report” form. The corrective actions will include when the hazard will be corrected and who is responsible for completing the corrective action. Ensure any necessary work orders are issued so that corrective actions can be completed in a timely manner. A copy of the form will be kept on file and a copy will be returned to the employee who submitted the concern.
- If the issue is outside the scope of responsibility or authority of the supervisor, they should contact their leader and/or Occupational Health and Safety for guidance.
- For matters that are not rectified after a reasonable length of time (20 work days or less depending on the severity of the concern), the employee should bring it to the attention of his/her Health and Safety representative and a member of the Joint Health and Safety Committee (JHSC). This issue must then be tabled as an agenda item on the next committee meeting where it will be discussed, follow-up measures recommended, and recorded in the minutes.

### **4. Follow Up**

- It is the responsibility of the supervisor to follow up on corrective actions. Once corrective actions have been completed the supervisor may sign the follow up section of the “Hazard Report” form and keep a copy on file. The supervisor will also inform the employee who submitted the concern that the appropriate corrective actions have been taken.

## HAZARD REPORT

Western University gives all employees the opportunity to report health and safety concerns which they believe may affect themselves or other employees and the Western campus as a whole.

### **Section A. Employee Completes this Section**

Name of employee: \_\_\_\_\_ Date: \_\_\_\_\_

Employee signature: \_\_\_\_\_

Name of supervisor: \_\_\_\_\_

Location(building, room, area): \_\_\_\_\_

Description of concern: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### **Section B. Supervisor Completes this Section**

Hazard Control Action Plan (include what, how, and who implements required corrective action items):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Hazard Rating: Major  (potential to cause death, critical injury, or lost time)  
Moderate  (potential to cause injury requiring medical attention)  
Minor  (potential to cause injury requiring first aid)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Notified:

- JOHSC
- Health and Safety Representative

\*Follow up (sign only when corrective actions have been taken)

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_