

TITLE

WORKPLACE HEALTH AND SAFETY INCIDENT REPORTING AND INVESTIGATION

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NOTE: The first appearance of terms in bold in the body of this document (except titles) are defined terms – please refer to the Definitions section.

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OBJECTIVES

- To ensure a safe and healthy **workplace** for all **workers** that complies with applicable legislation, standards, accreditations, and organizational governance, and which promotes health and well-being. **Incident** reporting and **investigations** are fundamental activities that are required of Alberta Health Services (AHS) to ensure that all incidents are reported and managed properly.
- To establish responsibilities and a standardized method for **notification, reporting, investigation** and communication of Workplace Health and Safety (WHS) incidents for the purpose of preventing similar incidents from occurring.
- To use incident investigation **findings**, conclusions, and recommendations to prevent further incidents and to protect and enhance worker health, safety, and well-being in the workplace.
- To establish responsibilities and a standardized method for the collection and analysis of information in regard to incident investigations.
- To ensure the incident reporting and investigation processes within AHS comply with the *Occupational Health and Safety Code* (Alberta).

PRINCIPLES

AHS is committed to providing a healthy and safe working environment for all workers. Incident reporting and investigations are fundamental activities that are required of AHS to ensure that all incidents are reported and managed properly.

The documentation of legislated requirements for the reporting and investigation of incidents shall be accomplished through the completion of a report within MySafetyNet.

APPLICABILITY

Compliance with this document is required by all Alberta Health Services employees, members of the medical and midwifery staffs, students, volunteers, and other persons acting on behalf of Alberta Health Services (including contracted service providers as necessary).

ELEMENTS

1. Pre-Incident Planning

- 1.1 All **managers/supervisors** shall be trained on incident management (*Leading Health and Safety in the Workplace - Fundamentals* within MyLearningLink) and understand the steps of conducting a WHS investigation. This training shall be completed prior to conducting an investigation.
- 1.2 Proper planning and task completion when responding to an incident is critical in preventing similar incidents from happening in the future.

2. Response

- 2.1 In accordance with the AHS *Emergency and Disaster Management Policy*, each AHS facility has an Emergency Response Plan that contains information on how to respond to workplace incidents. Workers (excluding contracted service providers) shall know where to locate the area Emergency Response Plans and how to respond accordingly.
- 2.2 It is the responsibility of workers to respond to all incidents that they encounter and actions shall include, but are not limited to:
 - a) assessing the area for **hazards**;
 - b) initiating immediate **corrective actions** to control hazards or minimize further damage;
 - c) providing immediate care to person(s) involved, if safe to do so;
 - d) initiating Emergency Response Plans as necessary;
 - e) securing the scene so only authorized personnel/workers involved in the investigation can enter, if applicable;
 - f) ensuring the area is free from hazards prior to entering the scene, during the investigation, and before resuming work in the area; and
 - g) gathering preliminary documentation, identifying witnesses, and taking initial notes. This shall be recorded **immediately** as the incident site may be subject to rapid change. This information shall be submitted to the

area manager/supervisor for the investigation. Any items removed from the scene shall be documented.

- 2.3 If unable to initiate corrective actions to control hazards, the manager/supervisor shall be notified to ensure the hazards are mitigated. If this qualifies as dangerous work refusal, the *Dangerous Work Refusal* Standard shall be followed.
- 2.4 For **serious incidents** that require reporting to the Government of Alberta, Occupational Health and Safety (OHS), the scene of the incident shall not be disturbed or put back into operation until directed by OHS.
- 2.5 A debrief meeting with all workers involved and/or who witnessed the incident should be conducted by the manager/supervisor in order to:
- a) allow everyone to talk about the incident and ask questions as necessary;
 - b) ensure none of the workers responding or in the area are suffering from shock, and determine whether any workers require medical support;
 - c) go over the incident to see what was done well and what could have been improved upon;
 - d) remind workers that the Employee and Family Assistance Program (EFAP), union support, or other applicable programs, are available for them if they feel the need for support around the experience; and
 - e) discuss next steps in regards to the incident.
- 2.6 Work related incidents occurring while working at site other than an AHS site that involve workers (excluding contracted service providers) shall have proper investigations. This is done by ensuring communication with the organization that has control of the incident scene. Coordination of investigation may include:
- a) review of the investigation conducted by the external organization;
 - b) conducting an investigation with the external organization; or
 - c) conducting a separate investigation.
- 2.7 If medical attention is required, appropriate documentation shall be provided (see details as per the *WCB Reporting & Modified Work* Insite page).

3. Notification

- 3.1 Once appropriate care has been given to the workers involved in the incident and the scene is secure, the incident shall be immediately reported to the department manager/supervisor regardless of the incident **consequence**.

- 3.2 The incident consequence shall be determined to ensure the appropriate level of management are notified of an incident in addition to the manager/supervisor. Notification requirements can be found within the *WHS Incident Quick Reference Chart*.
- 3.3 Internal notification shall include all relevant information including, but not limited to:
- a) when the incident occurred (date and time of incident);
 - b) where the incident took place (name, address, location of the incident);
 - c) who was involved (the name of any injured/ill worker(s) or of worker(s) involved in the incident for those who need to know specific names of workers);
 - d) what happened (brief description of the **sequence of events**, initial **injuries** and treatment, situation of injured/ill, whether external agencies are attending or have attended);
 - e) what controls have been implemented (description of controls put in place to make the area safe); and
 - f) contact details of people at the incident site.
- 3.4 Communication methods shall be established by each department to ensure the proper managers/supervisors are notified.
- 3.5 If a worker is unable to contact their manager/supervisor directly, they shall continue to call the **next level of management** as outlined in the organizational chart until the necessary individual(s) within the department are notified.
- 3.6 Levels of leadership within the notification section of the *WHS Incident Quick Reference Chart* may be delegated based on position, dates, time, etc. Notification shall be made to on-call phones/delegates as outlined in area processes.
- 3.7 Notification of relevant departments shall be completed by the manager/supervisor of the area where the incident occurred or by the manager/supervisor of the worker affected by the incident. Relevant parties may include, but are not limited to:
- a) Human Resources;
 - b) Medical Affairs;
 - c) Emergency/Disaster Management;
 - d) Environmental Services;

- e) Communications;
 - f) Patient Safety;
 - g) Protective Services;
 - h) Legal & Privacy; and
 - i) Joint Workplace Health and Safety Committee (JWHSC), only as required by law.
- 3.8 The *'Heads Up' Urgent Notification to an Emerging Issue* reporting shall be followed for:
- a) chemical/substance release incidents above the regulatory reporting limit (minor, moderate, major, extreme);
 - b) regulatory non-compliance incidents resulting in a written order outlining corrective actions required (minor, moderate, major, extreme); and
 - c) serious **time loss** incidents that require hospital admittance (major and extreme incidents).
- 3.9 Notification criteria for *'Heads Up' Urgent Notification to an Emerging Issues* are listed within the notification section of the *WHS Incident Quick Reference Chart*.

4. Reporting

- 4.1 **Blood and body fluid exposure and communicable disease exposure**/outbreak incidents shall be reported immediately to an Occupational Health Nurse (OHN) (available 24 hours per day, seven [7] days per week). The OHN enters the information into MySafetyNet on behalf of the worker (excluding contracted service providers).
- 4.2 All other incidents, including **near miss** events, shall be reported in MySafetyNet by the worker before the end of their shift; unless an injury/**illness** prevents them from doing so. If the worker is unable to submit a report in MySafetyNet, due to injury/illness; it is the responsibility of the manager/supervisor to ensure the report is entered.
- 4.3 Reports shall be fully completed containing all pertinent information, considering events leading up to, during, and after the incident.
- 4.4 Incidents involving worker injury or illness needing assessment by a physician or another **health care professional** shall be reported to the Workers' Compensation Board (WCB) by WHS. The claims process for WCB is initiated by reporting through MSN. More information can be found on the *WCB Reporting and Modified Work* Insite page.

- 4.5 It is both the responsibility of the manager/supervisor and the worker to ensure that the incident has been reported properly; however, the manager/supervisor has ultimate accountability. The manager/supervisor should contact their WHS Business Partner (WHSBP) Advisor for assistance with reporting requirements.
- 4.6 MySafetyNet shall be readily available to all workers (excluding contracted service providers) at all times.
- 4.7 If the incident involves a patient but did not result in a worker injury, it is recommended a report in the Reporting and Learning System (RLS) be completed in accordance with the AHS *Recognizing and Responding to Hazards, Close Calls, and Clinical Adverse Events* Policy and associated procedures.

5. Investigations

- 5.1 All incident investigations shall be initiated as soon as possible and shall be completed by the manager/supervisor and the worker(s) involved, with assistance from WHS as required.
- 5.2 Based on the incident consequence, the **Lead Investigator** shall determine what level of investigation is required, obtain appropriate resources, and establish an investigation team if required (see the *WHS Incident Quick Reference Chart* for responsibilities and timelines).
- 5.3 Near miss events shall be assessed for potential consequence and investigated at the level of the potential consequence.
- 5.4 The Lead Investigator shall evaluate to determine if external resources are required.
- 5.5 The Lead Investigator shall perform a hazard assessment with input from workers to identify hazards and assess the risk to the psychological health and safety of the investigation team, and implement any necessary control measures to ensure the safety of the investigation team. If the manager/supervisor is unable to be on site for an investigation, AHS departments shall work together to ensure the investigation is initiated properly and completed. This may include creating site/department processes for remote locations.
- 5.6 The Lead Investigator shall ensure:
- the witnesses have a safe location to talk about the incident;
 - the witnesses are provided a confidential interview, where their information shall only be shared for the purpose of the investigation;
 - the witnesses are provided with support including a debriefing and access to EFAP (or equivalent), and union support (if applicable); and

- d) administrative factors such as shift change and scheduling are addressed for the witness.
- 5.7 All findings related to an incident investigation shall be reported in MySafetyNet. When collecting findings, the Lead Investigator shall ensure:
- a) the findings are gathered, identified, labelled, documented, and kept in an assigned area and kept in a secure assigned area with only one (1) authorized person having access and handling the findings; and
 - b) time sensitive findings that can be ruined or destroyed are documented in a timely manner.
- 5.8 For work sites not under control of AHS, the investigation team shall conduct their own investigation by working with the appropriate authority.
- 5.9 Immediate action shall be initiated to ensure the area is safe to continue work prior to the release of a scene. Prompt communication of immediate action to relevant areas within AHS may be required.
- 5.10 The level of detail required in an investigation is dependent on the incident type and consequence. Investigations are conducted to determine the **root cause(s)** of the incident in order to develop effective corrective actions in order to prevent the incident from happening again, not to establish fault.
- 5.11 Conducting investigations should, at minimum, include the following:
- a) People: Interviewing workers and others involved;
 - b) Positions: Positioning of people, equipment, materials at time of incident;
 - c) Parts: Machinery and equipment that could have contributed to the incident;
 - d) Paper: Documentation relevant to the incident; and
 - e) Sequence of Events.
- 5.12 All investigations shall be reviewed and approved by the assigned level of management. The roles and responsibilities and approval criteria for a workplace incident investigation are outlined within the *WHS Incident Quick Reference Chart*.

6. Potentially Serious & Serious Incidents Notification, Reporting, and JWHSC Investigation Participation

- 6.1 In accordance with Alberta's OHS Legislation, the elements of Section 6 of this Standard do not apply to incidents of **harassment** and **violence**. JWHSC's are not required to be notified of nor participate in workplace harassment and violence investigations. Reporting of these incidents to OHS are not required. All workplace harassment and violence incidents shall follow the processes within the *AHS Respectful Workplaces and Prevention of Harassment Policy*, associated procedures, and all other sections outlined within this Standard.
- a) AHS may provide JWHSCs and workers with program-wide learnings resulting from harassment and violence incident investigations.
- 6.2 Potentially Serious and Serious Incidents Notification
- a) The manager/supervisor shall notify the JWHSC co-chairs of incidents reportable to OHS. This includes Serious Incidents (SI) and **Potentially Serious Incidents (PSI)**.
- b) The manager/supervisor shall notify the JWHSC co-chairs with a phone call and email copying their WHSBP Advisor (immediately for SI and as soon as possible for PSI).
- c) The Lead Investigator shall request a JWHSC member to participate in the investigation as part of the investigation team during the notification process for SI and PSI.
- d) Once the JWHSC member who participates in the investigation has been identified, the investigating manager/supervisor shall update MySafetyNet with the date the JWHSC co-chairs were notified and the name of the participating committee member.
- 6.3 Potentially Serious and Serious Incident Reporting to Alberta OHS
- a) Reporting to OHS is completed by WHS with assistance from the manager/supervisor.
- b) In the event of a SI, the manager shall contact their WHSBP Advisor immediately so the incident can be reported to OHS through WHS processes.
- c) In the event of a PSI, the manager/supervisor and WHSBP Advisor shall work together to report the incident to OHS via the potentially serious incident reporting portal.

Serious Incidents (SI)	Reporting Method	Timeframe to Report	Responsible
<ol style="list-style-type: none"> 1 An injury or incident that results in death of a worker 2 An injury or incident that results in a worker being admitted to hospital as an inpatient. This does not include a visit to Emergency or Urgent Care Centre. 3 An unplanned or uncontrolled explosion, fire, or flood that causes serious injury or has the potential of causing a serious injury. 4 The collapse or upset of a crane, derrick, or hoist. 5 The collapse or failure of any component of a building or structure necessary for the structural integrity of the building or structure. 	<p>Occupational Health & Safety 1-866-415-8690 780-415-8690</p> <p>Deaf/hard of hearing with TDD/TTY: 1-800-232-7215 780-427-9999</p>	<p>Immediately at any time, once care has been given to the injured/ill worker and the scene is secure.</p> <p>Further information: OHS Serious Incidents</p>	<p>WHSBP Director</p>
Potentially Serious Incidents (PSI)	Reporting Method	Timeframe to Report	Responsible
<p>PSI is any event where a reasonable and informed person would determine that under slightly different circumstances, there would be a high likelihood for a serious injury to a person.</p> <p>An injury is considered serious if it falls under section 40(2)(a) or (b) of the OHS Act, in that it:</p> <ul style="list-style-type: none"> • results in a fatality; or • causes an individual to be admitted to hospital as an inpatient. This does not include a visit to Emergency or Urgent Care Centre. <p>A PSI is not limited to workers and it does not require the occurrence of an injury.</p> <p>When determining whether an incident is a PSI, the following factors should be taken into consideration:</p> <ul style="list-style-type: none"> • actual circumstances of the incident (person, place, time, work practices being followed); • hazards present at the time of the incident; • appropriate controls in place at the time of the incident; • slightly different circumstances (timing, distance, body position, etc.) that may have resulted in a serious injury; • similar incidents that have occurred within the employer or prime contractor's operations in the past two (2) years that resulted in a serious injury; <p>As per OHS Code Section 391.1, incidents of violence and harassment are exempt from reporting to or providing a copy of the report to OHS.</p>	<p>Report PSI through Portal</p>	<p>Report PSI to OHS online after the investigation has been completed and corrective actions are identified.</p>	<p>WHSBP Advisor / WHS OHN</p>

- 6.4 JWHSC participation in Potentially Serious and Serious Incident Investigations
- a) All PSI and SI shall:
 - (i) include the involvement of the JWHSC during the consultation process; and
 - (ii) be led by the manager/supervisor, with the assistance of a WHSBP Advisor when necessary.
 - b) JWHSC co-chairs shall assist in identifying and selecting a committee member to participate in the investigation based on availability. The JWHSC member who is asked to participate shall be someone that is readily available at the time of the investigation. If more than one member is available to assist, the member closest to where the investigation takes place shall be chosen.
 - c) The roles and responsibilities of the JWHSC member and the worker as part of the investigation team include, but may not be limited to:
 - (i) participating in analyzing the facts of the incident which can be done by, but not limited to, Skype meetings, phone call, emails, or face-to-face meetings;
 - (ii) assisting in determining root cause(s); and
 - (iii) recommending corrective actions.
 - d) PSIs and SIs shall still be reported within MySafetyNet, and classified and investigated as per the *Quick Reference Chart*.
- 6.5 Potentially Serious and Serious **Investigation Reports**
- a) The manager/supervisor can provide any worker who reports a PSI or SI with a copy of the incident report upon worker request. All personal information shall be excluded from the report. The report can be pulled from MySafetyNet using *How to Print and Save Incident Reports in MySafetyNet* under 'Manager Resources.'
 - b) Investigating managers/supervisors shall provide a copy of the *JWHSC Potentially Serious & Serious Incident Summary Report* to the JWHSC for review to follow up on actions taken and evaluate the effectiveness of any recommendations. Prior to releasing the *JWHSC Potentially Serious and Serious Incident Summary Report* to the worker and/or the JWHSC, the report shall be reviewed by the Lead Investigator and WHSBP Advisor to ensure it does not contain confidential information.
 - c) The *JWHSC Worksite Incidents Overview Report's* shall be provided to the JWHSC monthly and includes incident high level statistics.

7. Analysis

- 7.1 When evaluating the investigation findings, the investigation team shall:
- a) test the findings for validity and accuracy;
 - b) identify assumptions and constraints of the information (confidence in accuracy of the data);
 - c) organize the information into a sequence of events timeline;
 - d) identify gaps in the information and, where possible, collect additional information; and
 - e) use findings to identify the causes to the incident.
- 7.2 A 'cause' is the underlying reason(s) why an incident occurred. Once all the information has been collected, the evaluation, assessment, and documentation of **direct cause(s)**, root cause(s) and areas for corrective actions are documented within MySafetyNet using the 'Five Whys Technique.'
- 7.3 Once investigation is complete, all required investigation information shall be recorded within MySafetyNet by the Lead Investigator and management (as per the WHS *Incident Quick Reference Chart*). The information shall be marked as completed, approved, and closed.

8. Corrective Action

- 8.1 Once causes are determined, corrective actions shall be identified, assigned, and recorded within MySafetyNet and managed as per the AHS *WHS Corrective Action Process*.
- 8.2 Corrective actions shall be forwarded to the next level of management within MySafetyNet if required and closed once completed.
- 8.3 Corrective actions shall be clear, measurable, and reasonable.

9. Communication

- 9.1 Investigation findings, including cause(s) and areas for corrective actions, shall be communicated by the manager/supervisor to all workers affected by the incident. This could include sharing results to relevant departments within the organization.
- 9.2 Communication of key findings identified throughout the management of the incident is key to assisting others in preventing similar incidents from occurring.
- 9.3 Communication methods may include, but are not limited to: bulletins, memos, safety meetings, email, posters, and one-on-one discussions.

- 9.4 For extreme incidents and extreme near miss events, a general bulletin, from WHS News & Alerts, outlining the incident findings shall be communicated by WHS to all workers affected by the incident. This communication is initiated by the WHSBP Director.
- 9.5 JWHSC shall be informed of all worker incidents that occur (with the exception of incidents of harassment or violence) in order to evaluate and provide recommendations to the investigation process, analysis of the causes, and development of corrective actions. The *JWHSC Potentially Serious & Serious Incident Summary Report* will be provided to the JWHSC for PSI and SI incidents. The *JWHSC Worksite Incidents Overview Report* shall be provided to the JWHSC monthly and includes incident high level statistics. Incidents can be discussed in-depth without including personal information at the discretion of the WHSBP Advisor, WHS OHN, or Human Resources Business Partner (HRBP) Advisor.
- 9.6 Investigation results shall be communicated to external agencies by WHS, when required.
- 9.7 A worker can be provided with a completed Investigation Report upon request, however, all personal information shall be excluded from the report. The report can be pulled from MySafetyNet using the employees *How to Print and Save Incident Reports in MySafetyNet* under 'Manager Resources.'

10. Confidentiality

- 10.1 All confidential health and personal information shall be managed in accordance with the *AHS Code of Conduct*, the *AHS Privacy Protection and Information Access Policy*, other applicable AHS policies and procedures, and any applicable legislation.
- 10.2 It is the responsibility of all individuals involved in the investigation process to maintain the confidentiality of all information related to the incident, including any personal or health information – whether that of a patient, a worker, or any other person.

11. Review & Follow up

- 11.1 The manager/supervisor shall follow-up on corrective actions as per the *WHS Corrective Action Process*. MySafetyNet helps managers/supervisors track assigned corrective actions. Managers/supervisors are also responsible to ensure:
- a) corrective actions have been completed;
 - b) controls have been put into place and are effective; and
 - c) the investigation is updated with any new findings that arise and when corrective actions are completed.

- 11.2 Prior to marking an investigation as completed it is the responsibility of the Lead investigator to ensure all pertinent information to the investigation has been recorded within MySafetyNet including any suggestions and feedback from JWHSC or involved workers. Instructions on how to record feedback can be found on the MySafetyNet Insite page
- 11.3 Once the investigation is completed, the investigation shall be marked as complete by the Lead Investigator, approved by the necessary levels for management as per the *WHS Quick Reference Chart*, and closed within MySafetyNet by the Lead Investigator. The level of approval indicates who is responsible for ensuring compliance around all aspects of the investigation.
- 11.4 The manager/supervisor shall follow up with any workers affected by the incident. Follow-up should be verbal in nature and shall ensure that:
- a) injured/ill workers have received the necessary care;
 - b) injured/ill workers have the resources to report the incident through MySafetyNet;
 - c) injured/ill workers have provided, reviewed, and signed appropriate documentation;
 - d) injured/ill workers have had the opportunity to participate in the investigation; and
 - e) workers have received the appropriate communication regarding the incident and corrective actions.
- 11.5 The manager/supervisor shall provide any worker who reports an incident with a copy of the investigation report upon the worker's request. All personal information shall be excluded from the report. The report can be pulled from MySafetyNet using *How to Print and Save Incident Reports in MySafetyNet* under 'Manager Resources.'
- 11.6 A *WHS Incident Management Checklist* is available to assist in ensuring that actions are completed in **response** to an incident.

12. Training and Support

- 12.1 Managers/supervisors shall ensure their workers are aware of their responsibilities in the response, notification, and reporting of all incidents.
- 12.2 Awareness briefings are to be used to create awareness and discussion for the subject of the briefing.
- 12.3 All managers/supervisors conducting investigations shall have attended the *Leading Health and Safety in the Workplace – Fundamentals* training. This

training is also available for JWHSC members and key frontline workers who may participate in investigations.

- 12.4 Workers who have any questions or concerns about incident management in the workplace should speak with their manager/supervisor, contact their WHSBP Advisor, or visit the *WHS Working Safely* page on Insite.

13. Monitoring and Evaluation

- 13.1 All departments shall identify a method to evaluate and monitor compliance with this Standard. This may be completed in consultation with WHS and by using the *Compliance Checklist*. The *Compliance Checklist* identifies the requirements to meet the minimum requirements of this Standard and comply with legislation.

14. Records Retention

- 14.1 Information pertaining to this Standard shall be maintained in accordance with the *AHS Record Retention Schedule*.
- 14.2 Departments are responsible for ensuring WHS has access to all applicable incident reporting and investigation forms.
- 14.3 Incident and investigation reports shall be available to the involved worker upon request.
- 14.4 Incident reporting and investigation records shall be made available to the appropriate regulatory authorities upon request when required. This includes any records related to the investigation process.

15. Roles and Responsibilities

- 15.1 All workers (excluding contracted service providers), including managers/supervisors and leadership have the responsibility to:
- a) possess a thorough understanding of and utilize this Standard;
 - b) respond to all incidents and follow Emergency Response Plans;
 - c) notify and report all incidents to their manager/supervisor immediately;
 - d) ensure reporting is completed within the required time period;
 - e) follow up with manager/supervisor to ensure corrective actions are completed;
 - f) participate in awareness sessions and WHS reporting and investigation training for workers, as required;
 - g) participate in investigations, as required; and

- h) treat all incident information as confidential.
- 15.2 All managers/supervisors have the responsibility to:
- a) ensure workers are aware of their responsibilities within this Standard;
 - b) ensure workers that may be impacted by the events are notified of incidents;
 - c) ensure all incidents are reported and investigated in accordance with this Standard;
 - d) notify external agencies of incidents, as required;
 - e) ensure incident and investigation reports are fully completed within the required time period;
 - f) prepare and implement corrective actions based on investigation **recommended action**;
 - g) ensure controls are in place and effective to prevent incidents from reoccurring;
 - h) communicate the investigation findings and corrective actions to workers;
 - i) participate in required training; and
 - j) ensure compliance with this process Standard by all levels of the organization.
- 15.3 WHS has the responsibility to:
- a) advise managers/supervisors and workers of this Standard and assist in the notification, reporting, and investigation of the incident, as required;
 - b) assist with investigations and with corrective actions development and implementation;
 - c) develop, maintain, and assist in the delivery of relevant training to supervisors, managers, and workers;
 - d) monitor, communicate, and assess compliance with this Standard; and
 - e) evaluate this Standard, and associated documents, to ensure current compliance with all regulatory legislation and organizational practices.
- 15.4 WHS Managers shall ensure internal departments are notified of the incident as required.

- 15.5 WHSBP Directors, or the on-call WHSBP manager/director, shall ensure external agencies related to OHS are notified of the incident as required.

DEFINITIONS

Blood and body fluid exposure means the contact by an individual with potentially infectious blood or body fluids or blood-borne pathogens in the workplace through the percutaneous route (skin puncture or laceration by a contaminated needle, sharp instrument, or human bite), mucous membrane route (contact with mucous membranes lining the eyes, nose, or mouth by a splash or spray), or non-intact skin route (contact with compromised skin due to an open wound, cracked, or chapped skin).

Communicable disease exposure means an illness in humans that is caused by an organism or micro-organism or its toxic products and is transmitted directly or indirectly from an infected person to others.

Consequence means the severity of the outcome of an event. The outcome of an event can be expressed qualitatively or quantitatively as being an injury, illness, or damage to property.

Contractor means an individual or organization performing work for the company, following a written agreement. Contractor may include suppliers of products but does not include courier services, restaurant delivery, or other services of this type.

Corrective action means action taken to eliminate or reduce exposure to identified unsafe conditions or behaviours.

Direct causes means sub-standard acts and conditions that immediately precede an incident.

Findings means information collected during the course of an investigation for reference or analysis. Findings may be, but are not limited to, documents, records, statements, interviews, pictures, videos, materials, or statistics.

Fatality means any death resulting from an injury or illness regardless of time intervening between the injury/illness and death.

Hazard means a situation, condition or thing that may be dangerous to health and safety.

Harassment means any single incident or repeated incidents of objectionable or unwelcome conduct, comment, bullying or action by a person that the person knows or ought reasonably to know will or would cause offence or humiliation to a worker, or adversely affects the worker's health and safety. Workplace harassment can include incidents that occur outside of the work environment or working hours (e.g. inappropriate phone calls, e-mails, social media posts, visits to an AHS representative's home and incidents at luncheons or after work socials) or harassment from clients and service recipients. Harassment excludes any reasonable conduct of a manager/supervisor in respect of the management of workers or a workplace.

Health care professional means an individual who is a member of a regulated health discipline, as defined by the *Health Professions Act* (Alberta), and who practices within scope and role.

Illness means poor health resulting from disease of the body or mind. Examples include but are not limited to: skin disease or disorders, depression, anxiety, respiratory conditions, poisoning, and hearing loss.

Immediately means as soon as reasonably possible, without delay.

Incident means an unplanned event that resulted in or could have resulted in an undesirable consequence. Incidents include all occupational injuries/illness, harassment and violence, damage to property and equipment, and all near miss events.

Injury means harm, damage, or loss that is sustained by a worker's body and or mind.

Investigation means the analysis of an incident with the intent to establish direct causes, root causes, and management system factors for the purpose of determining corrective actions to prevent recurrence.

Investigation Report means a detailed report of the investigation details and findings. This report includes, but is not limited to sequence of events, causal analysis findings, and recommended action.

Lead Investigator means the assigned lead responsible for all investigation activities as outlined within the *Quick Reference Chart*.

Manager means the individual(s) who has the delegated human resource authority for directly planning, monitoring and supervising direct reports.

Modified Work means any changes, restrictions or limitation to a worker's regular job duties required as a result of a work-related injury or illness and includes modification of:

- tasks or functions;
- hours or work schedules;
- environment or work area; and
- equipment.

Near miss means any undesired event that could have resulted in an injury, illness, or loss, but no first aid or medical attention is required.

Next level of management means any worker with the authority to direct the activities of a manager/supervisor.

Notification means the act of communicating the incident events to appropriate parties.

Potentially serious incident means any event where a reasonable and informed person would determine that, under slightly different circumstances, there would be a high likelihood for a serious injury to a person. An injury is considered serious if it: results in a fatality or causes an individual to be admitted to hospital as an inpatient (this does not include a visit to Emergency or Urgent Care Centre). A potentially serious incident is not limited to workers and it does not require the occurrence of an injury.

When determining whether an incident is a potentially serious incident, the following factors should be taken into consideration:

- actual circumstances of the incident (person, place, time, work practices being followed);
- hazards present at the time of the incident;
- appropriate controls in place at the time of the incident;
- slightly different circumstances (timing, distance, body position, etc.) that may have resulted in a serious injury; and
- similar incidents that have occurred within the employer or prime contractor's operations in the past two (2) years that resulted in a serious injury.

Recommended action(s) means an action identified with the purpose of eliminating or reducing hazards which has not been approved by a manager/supervisor.

Reporting means the act of documenting a formal and detailed account of an incident through the completion of an Incident Report or the inputting of information into a reporting system.

Response means the effort to mitigate the impact of an incident on the injured or ill worker, the public, and/or the environment.

Root cause means the personal and job system factors that need to be addressed in order to prevent the incident or a similar incident from recurring.

Sequence of events means examination of information gathered in an investigation to gain a solid understanding of the flow of activities within an incident.

Serious incident means an injury or incident that results in:

- the death of a worker;
- a worker being admitted to hospital as an inpatient (not including a visit to Emergency or Urgent Care Centre);
- an unplanned or uncontrolled explosion, fire, or flood that causes serious injury or has the potential of causing a serious injury;
- the collapse or upset of a crane, derrick, or hoist; or
- the collapse or failure of any component of a building or structure necessary for the structural integrity of the building or structure.

Supervisor means a person, whether unionized or non-unionized, who has charge of a work site or authority over a worker.

Time loss means an incident that results in a worker missing work beyond the day of the incident.

Worker means AHS employees, members of the medical and midwifery staffs, students, volunteers, and workers of contracted service providers.

Workplace means a location where a worker is, or is likely to be, while engaged in their work or work-related activities. The workplace includes all locations where business or social activities

directed by AHS are conducted, including but not limited to work in the community and locations of work-directed social events. Workplace includes any vehicle or mobile equipment used by the workers as part of their job.

Violence means the threatened, attempted or actual conduct of a person that causes or is likely to cause physical or psychological injury or harm, and includes domestic or sexual violence. It is acknowledged that harassment may become violence.

REFERENCES

- Alberta Health Services Governance Documents:
 - *Code of Conduct*
 - *Dangerous Work Refusal Standard (#1121-01)*
 - *Emergency and Disaster Management Policy (#1181)*
 - *Occupational Exposure to Blood and Body Fluids Policy (#1111)*
 - *Privacy Protection and Information Access Policy (#1177)*
 - *Records Management Policy (#1133)*
 - *Recognizing and Responding to Hazards, Close Calls, and Clinical Adverse Events Policy (#PS-95)*
 - *Respectful Workplaces and the Prevention of Harassment and Violence Policy (#1115)*
 - *Workplace Health and Safety Policy (#1121)*
- Alberta Health Services Forms:
 - *Offer of Modified Work*
- Alberta Health Services Resources:
 - *'Heads Up' Urgent Notification to an Emerging Issue Process*
 - *Incident Management Flowchart*
 - *Incident Management Quick Reference Chart*
 - *Joint Workplace Health and Safety Handbook*
 - *Records Retention Schedule*
 - *Reporting PSI's and SI's to OHS Flowchart for Managers/Supervisors Flowchart*
 - *WHS Provincial Workers Compensation Standard Operating Procedure*
 - *Workplace Health and Safety Corrective Action Process*
 - *Workplace Health and Safety Management System*
- Non-Alberta Health Services Documents:
 - *Incident Investigation and Prevention (CSA Z1005)*
 - *Occupational Health and Safety Act, Regulation, and Code (Alberta)*
 - *Occupational Health and Safety Management (CSA Z1000-6)*

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