PROCEDURES

1.0 Legislative Requirements

Newfoundland and Labrador Occupational Health & Safety Act and its regulations, specifically sections 9, 10, and 12(k) of the OHS regulations, and section 56 of the Workplace Health Safety Compensation Commission Act.

2.0 Purpose and Scope

The purpose of this procedure is to establish an incident reporting process, and to identify hazards and prevent workplace incidents from recurring.

This procedure applies to all significant incidents that occur at each of the College of the North Atlantic’s campuses, except Qatar, including all activities associated with staff, students, contractors and visitors. This procedure supersedes all other procedures or methods of incident reporting and investigation.

3.0 Definitions

<table>
<thead>
<tr>
<th>Definition</th>
<th>Description</th>
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<tbody>
<tr>
<td>Accident</td>
<td>An unplanned, undesired event resulting in injury, illness, or property damage.</td>
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<td></td>
<td>Occupational Health &amp; Safety (OHS) Regulations Section 2 states that an accident includes:</td>
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<td></td>
<td>i. an event occasioned by a physical or natural cause; or</td>
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<td></td>
<td>ii. Disablement arising out of and in the course of employment.</td>
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<tr>
<td>Basic (Root) Cause</td>
<td>The basic or root causes of an accident are the deeper, more fundamental causes that allow the immediate causes to exist. These are the reasons why the substandard acts and conditions occur.</td>
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<tr>
<td>ESTRW</td>
<td>Early and safe return to work</td>
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First Aid can include any of the following:
- Using a non-prescription medication at non-prescription strength;
- Administering tetanus immunizations (other immunizations, such as Hepatitis B vaccine or rabies vaccine, are considered medical treatment);
- Cleaning, flushing or soaking wounds on the surface of the skin;
- Wound coverings such as bandages, Band-Aids, or gauze pads, etc., (other wound closing devices such as sutures or staples are considered medical treatment);
- Hot or cold therapy;
- Any non-rigid means of support, such as elastic bandages, wraps, non-rigid back belts, etc.;
- Temporary immobilization devices while transporting an accident victim (e.g., splints, slings, neck collars, back boards, etc.);
- Drilling of a fingernail or toenail to relieve pressure or draining fluid from a blister;
- Eye patches;
- Removing foreign bodies from the eye using only irrigation or a cotton swab;
- Removing splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs or other simple means;
- Finger guards;
- Massages (physical therapy or chiropractic treatment are considered medical treatment);
- Drinking fluids for relief of heat stress; or
- Administration of oxygen to an employee as a precautionary measure when the employee does not exhibit any signs of injury or illness.

<table>
<thead>
<tr>
<th>WHSCC</th>
<th>Workplace Health Safety &amp; Compensation Commission of Newfoundland &amp; Labrador.</th>
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<tbody>
<tr>
<td>First Aid Register</td>
<td>WHSCC First aid record book found at <a href="http://www.whscc.nl.ca/publications.whscc">http://www.whscc.nl.ca/publications.whscc</a></td>
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<tr>
<td>Form # 1</td>
<td>A CNA form for reporting incidents immediately after the incident occurred; no later than end of business day.</td>
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<tr>
<td>Form # 2</td>
<td>A CNA form for documenting an incident investigation; to be completed and filed with OHS Manager within one business day of incident.</td>
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<tr>
<td>Form 6</td>
<td>A WHSCC form for employee report of injury to the WHSCC; no time limit.</td>
</tr>
<tr>
<td>Form 7</td>
<td>A WHSCC form for employer report of injury to the WHSCC; employer must submit within three days of the injury.</td>
</tr>
<tr>
<td>Forms 8/10</td>
<td>A WHSCC form for Physician to report injured workers’ functional abilities to the employee and WHSCC; employee must submit to employer no later than day after injury.</td>
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</tbody>
</table>
Immediate Cause
The immediate cause of accidents/incidents is the circumstances immediately preceding the accident/incident. They are the things that can be detected by your senses.

Incident
An incident is an unplanned/undesired event that results, or has the potential to result in an injury, illness, or property damage. Incident replaces the traditional term “accident.” Incidents also include commonly called “near misses”.

Near Miss
Near misses are warnings/indicators that something is wrong in the workplace and should be treated as seriously as an incident (accident).

Injury
An injury is the result of a chance event occasioned by a physical or natural cause, the result of a willful and intentional act, disablement, industrial disease, or death as a result of an injury, arising out of and in the course of employment. It includes a recurrence of an injury and an aggravation of a pre-existing condition, but does not include stress other than stress that is an acute reaction to a sudden and unexpected traumatic event.

Lost-time Injury (LTI)
Lost time injury is any work-related injury that occurs where the worker is unavailable, because of the injury, for his/her next scheduled shift.

Medical Aid (MA)
Medical, surgical and dental aid; hospital and skilled nursing services; and the use of prosthesis or apparatus and the repairing and replacement of them; and any attention given by a medical professional other than First Aid.

Non-Occupational Injury
Any non-work related injury requiring assistance from a hospital or from a medical professional. A non-occupational injury is not part of monthly statistics.

Restricted Work Activity
Occurs if the employee cannot work a full shift and cannot perform all of his or her routine job functions, defined as any duty he or she regularly performs at least once a week.

Serious Injury
Under the Occupational Health and Safety Regulations, "serious injury" refers to:
- A fracture of the skull, spine, pelvis, femur, humerus, fibula or tibia, or radius or ulna;
- An amputation of a major part of a hand or foot;
- The loss of sight of an eye;
- A serious internal haemorrhage;
- A burn that requires medical attention;
- An injury caused directly or indirectly by explosives;
- An asphyxiation or poisoning by gas resulting in a partial or total loss of physical control; or
- Another injury likely to endanger life or cause permanent injury, but does not include injuries to a worker of a nature that may be treated through first aid or medical treatment.
and the worker is able to return to his or her work either immediately after the treatment or at his or her next scheduled shift.

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<tr>
<th>Unsafe Act</th>
<th>An unsafe act is any hazard created because of human error or behavior.</th>
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<tr>
<td>Unsafe Condition</td>
<td>An unsafe condition is any physical hazard related to equipment, materials, structures or other physical elements of the workplace.</td>
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4.0 Incident Reporting Procedures – No Injury

4.1 Employees

Employees must report all incidents to their immediate supervisor or designate responsible for the area/activity by completing an Incident Report and Investigation form and submit to their immediate supervisor before leaving the work place.

4.2 Supervisor

- Supervisor signs the Incident Report and Investigation form and submits to the local HR office.
- Supervisor carries out an investigation of the area, completes an Incident Investigation form and submits a copy to the local HR office and to the campus/department OHS committee or worker health and safety representative.

5.0 Incident Reporting Procedures – Injury

5.1 Employee

- Get first aid, if required.
- Immediately report incident to your supervisor.
- Complete Incident Form #1 and submit to your supervisor (before leaving the work place).
- Seek timely medical treatment, if required, and advise the doctor you were hurt on the job.
- Provide a copy of the Doctor’s Report of Injury (Form 8/10) to your employer.
- Complete a Workers Report of Injury (Form 6), and submit it to WHSCC.
- Work with employer to develop ESRTW plan as required.
  - Notify employer of any concerns with the ESRTW plan.
  - Comply with recommendations of the treatment provider.
  - Provide feedback to your employer regarding your experience with ESRTW.

5.2 Supervisor (Employer)

- Ensure employee gets First Aid or medical treatment if necessary.
  - Transport your injured worker to appropriate medical care, via best means possible for your respected area.
  - Each campus to identify appropriate emergency transportation for their respective campus.
- Sign employee submitted Form #1 (complete if employee unable to do so); submit completed form to Regional HR Manager.
- Begin investigation using Incident Report/Investigation Form #2.
• Inform employee that *Form 6*, is available at Human Resources office. Instruct employee to complete and submit to the WHSCC.
• Sign off on Employers Report of Injury (*Form 7*), at Human Resources office.
• Submit Form 8/10, to respective HR Manager.
• Work with Human Resources Manager and employee to develop ESRTW plan, for lost time injuries.
• Inform co-workers of job modifications, restrictions and accommodations for returning employees, as appropriate.
• Monitor recovery, attendance and progress of injured employees.
• Work with HR Manager to report any payroll adjustments to the payroll administrator.
• Notify employer of any concerns regarding the ESRTW plan.
• Provide feedback regarding your experience with ESRTW to OHS Manager.

5.2 Human Resources Manager

• Receive injury/accident report from injury employee supervisor
• Submit one copy to OHS Manager.
• Call OHS Manager immediately if there is a major injury or death.
• Ensure Form 6 is completed.
• Ensure Form 7 is completed and submitted to WHSCC within three days.
• Receive Form 8/10 from supervisor.
• For Lost Time Injuries, work with supervisor and employee to develop Return to Work Plan, use WHSCC form “ESTRW Plan,” be cognizant of workplace hazards that may present an injury potential for the returning employee, ensure hazards are mitigated.
• Submit final plan to the WHSCC no later than one week after receiving Form 8/10.
• Inform co-workers of job modifications, restrictions and accommodations for returning employees, as appropriate.
• Provide feedback regarding your experience with ESRTW to OHS Manager.
• For cases requiring external medical advice contact the OHS Manager to develop a referral. The OHS Manager will meet with the College’s chosen medical service provider to gain further medical insight.

6.0 Types of Incidents

In each of type of incident, other people and expertise may be required and it is up to the investigators to determine requirements and ask for help as required.

6.1 Type “A” Incident

A type “A” incident is one in which there is a permanent disability or loss of life or body part; extensive loss of structure, equipment, or material; quality, production, or other losses exceeding $5,000.00, or with a high potential for the above.

The investigation team for a type “A” incident will be comprised of:
- Manager/supervisor of department in which the incident occurred;
- Executive Director of Human Resources;
- Legal Counsel;
- OHS Manager;
- Department of Government Services

6.2 Type “B” Incident

A type “B” incident is one in which there is a lost-time injury or illness without permanent disability; disruptive property damage; quality,
production, or other loss of more than $1000.00 but not exceeding $5,000.00 or with high potential for the above.

The manager/supervisor of the department/area in which the incident occurred is responsible for investigating a type “B” incident.

6.3 Type “C” Incident

A type “C” incident is one in which there is a minor injury or illness without lost time; non-disruptive property damage; or a quality, production, or other loss of $100.00 to $1,000.00, or with high potential for the above.

The departmental supervisor/manager is responsible for investigating a type “C” incident.

6.4 Type “D” Incidents

A type “D” incident is one in which there is no injury or illness; or quality, production, or other loss of less than $100.00.

Type D incidents do not require detailed investigations; however, if there is a minor injury, the incident should be documented in the first aid register.

First aid registers should be examined on a monthly basis in order to prevent a low risk incident from becoming a high or extreme risk incident.

7.0 Investigation Process – Investigators

Using the Incident Report/Investigation Form (form 2) and applying the principles learned in incident report/investigation training course, investigators must ensure the following requirements are completed:

A. Interview witnesses and document using the witness statement form given in the incident report/investigation package.

B. Gather and analyze the evidence.

C. Document location, date, time, condition of evidence, etc.

D. Take pictures and label accordingly.

E. Identify the cause(s) based on documented evidence.

F. Develop a plan for corrective action.

G. Report the findings – submit completed form to the OHS Manager.

H. Implement the corrective action plan. This may require input from Campus Administrator(s), OHS Manager, etc.

I. Evaluate the effectiveness of the corrective action.

J. Make changes for continuous improvement.

8.0 Lessons Learned

A critical part of an investigation process is to learn from past events in order to prevent recurrence of similar events.
A “lessons learned” report should be completed by the manager/supervisor, in consultation with the OHS Manager if necessary, and shared with affected employees. If approved by the OHS Manager and deemed to be of benefit to the College, the report may also be shared with the entire College community.

9.0 Responsibilities

9.1 OHS Manager

The OHS Manager will maintain a database of satisfactorily completed Incident Investigation Reports and assist or provide direction as needed for the development and/or implementation of corrective measures.

If an incident results in death or “serious injury”, the OHS Manager will immediately notify:
- Department of Government Services Accident Report Line
- Executive Director of Human Resources
- CNA’s General Counsel.

In the absence of the OHS Manager, the Executive Director of Human Resources, or another executive member of the College, will carry out the aforementioned duties.

The OHS Manager will also provide training and communication in relation to these procedures using informal training sessions.

9.2 Security Personnel

Security personnel, where established and as and when appropriate, will provide first aid services and emergency care call out as required.

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<th>Approval History</th>
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<tr>
<td>Approved by President</td>
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<td>Revision 1</td>
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