

# University Health Network Policy & Procedure Manual

## UHN Safety Services: Incident Reporting & Investigation

### 1. Policy

University Health Network (UHN) requires that all **workers** (including employees, physicians, volunteers and students) report accidents, exposures, injuries, and near misses to UHN Safety Services (USS) as soon as possible after the occurrence. Reporting of these incidents provides opportunities to improve the performance of safety programs, the quality of the working environment and the safety of staff, patients and visitors, and to ensure compliance with the Occupational Health & Safety Act and the Workplace Safety & Insurance Act. The principles of this policy are consistent with UHN's values of safety, compassion, teamwork, integrity, and stewardship.

When an injury occurs in the workplace, the first priority is to ensure prompt medical treatment for the injured worker and to ensure that any risk to other persons from any device, equipment or physical condition of the workplace has been corrected. (See [Incident Reporting Algorithm](#)).

#### 1.1 Incident Investigation

Incidents that disable a [worker](#) from performing their usual duties or result in a [first aid injury](#), [healthcare](#) incident or [lost time](#) incident, [critical injury](#) or [fatality](#), and any near miss that could have resulted in serious harm must be reviewed immediately.

#### 1.2 Responsibilities

##### 1.2.1 Managers/Supervisors or Designates

- Ensure that the injured [worker](#) receives medical treatment, the incident is investigated, and immediate corrective actions are implemented.
- Submit the report on behalf of the injured worker if the injured worker is unable to report the incident on the [Safety Event Portal](#), including corrective actions implemented and details of the investigation.
- Complete the follow-up "Supervisor" portion of the incident report on the [Safety Event Portal](#) and submit it electronically.

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## 1.2.2 Staff, Physicians, Volunteers, Students

- [Workers](#) who are injured or identify a workplace hazard must report a Workplace Safety Event via the [Safety Event Portal](#).
- Any worker who is witness to the incident must participate in an investigation when required.

## 1.2.3 Joint Health & Safety Committee

- A member of the JHSC will participate in the incident investigation as required under the Occupational Health & Safety Act or as requested by USS or site leadership.

## 1.2.4 UHN Safety Services

- Review the reported incidents and determine when a formal investigation is required, correspond with the Workplace Safety and Insurance Board (WSIB) and Ministry of Labour, Training & Skills Development (MLTSD) as required, and maintain a record of all incidents.

## 1.3 Incident Classifications

### 1.3.1 Incidents not requiring WSIB Reporting

**First-aid injury (minimal or minor harm):** A work-related injury, typically a minor injury, which results in no lost time from work and which can be treated by a trained first-aid provider, including an Occupational Health nurse. These injuries are not reportable to the WSIB. Some examples of first aid include:

- cleaning minor cuts, scrapes or scratches
- treating a minor burn
- applying bandages, a cold compress or ice bag
- changing a bandage during a follow-up check that does not result in further treatment
- needle sticks (unless medication is prescribed)

**Hazardous situation (no harm):** A situation when a hazard is identified before an incident occurs, or when an incident occurs but results in no harm or injuries that are minor and no treatment is required. Some examples include:

- a slip on a wet floor that does not result in an injury
- verbal abuse by a patient where no threat of physical violence is uttered
- patient violence where the injury does not result in harm that requires treatment, i.e. a minor pinch, grab, light strike

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### 1.3.2 Reportable WSIB Events

**Critical injury:** A special class of injuries as defined in Reg. 834/90. They require specific notification to the MLTSD and the JHSC, as outlined in section 51 of the Occupational Health & Safety Act.

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

**Note:** Immediate notification to a safety manager is required following a critical incident (pager: 416-790-6066). If possible, do not disturb scene.

**Fatality:** An incident that results in death. Workplace fatalities require investigation by a number of outside agencies including the MLTSD, police and the coroner. The scene must not be disturbed. Immediate notification to a safety manager is required (pager: 416-790-6066).

**Healthcare incident:** An incident resulting in an injury that requires medical treatment by a healthcare practitioner beyond basic first aid.

**Lost time incident:** An incident resulting in an injury that prevents the worker from performing their regular duties and from returning to work for their next shift following the incident.

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## 2. Procedure

1. Ensure that the injured [worker](#) immediately receives medical attention, as indicated in the following matrix for treatment of work-related injuries:

Injury Severity	Examples	Monday to Friday 0730 to 1530 Hours	Weekends, Holidays or Clinic Off Hours
Injuries that do not require immediate treatment by physician	Sprains, strains, needle sticks, minor cuts, abrasions or burns, etc.	<ul style="list-style-type: none"> <li>• Health Services Clinic</li> </ul>	<ul style="list-style-type: none"> <li>• Emergency Department</li> </ul>
Injuries requiring immediate treatment by physician	Fractures, unconsciousness, cuts requiring stitches, major burns, etc.	<ul style="list-style-type: none"> <li>• Emergency Department</li> <li>• At Toronto Rehab, use Emergency Department if accessible or call 911</li> </ul>	<ul style="list-style-type: none"> <li>• Emergency Department</li> <li>• At Toronto Rehab, use Emergency Department if accessible or call 911</li> </ul>

2. Notify the immediate supervisor/manager or administrator-on-site (AOS) of the injured worker.
3. Once notified, the supervisor/manager ensures that the incident scene is reviewed immediately to determine what action must be taken to eliminate the hazard.
4. If the hazardous situation cannot be rectified immediately, the supervisor or manager ensures that all precautions are taken for the safety of workers, patients and visitors until the hazard has been eliminated.
5. The person reporting the injury or hazard or the manager/supervisor to whom the injured worker reports to completes and submits an incident report via the [Safety Event Portal](#).

**Note:** Refer to the USS [Accident/Incident Reporting intranet page](#) for assistance.

6. Upon notification of the incident, USS:
  - Reviews the details.
  - May initiate a formal investigation.
  - Provides feedback to parties involved, if required.
  - Maintains the information in the Parklane database for trending and statistical analysis.

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- Completes a WSIB form on the worker's behalf and sends the WSIB information package and a copy of form 7 to the worker's home address.
  - Sends the section 52 report to the respective JHSC and trade unions within four days.
  - Notifies the MLTSD and respective JHSC and trade unions immediately of a critical injury/fatality, and sends a written report to both parties within 48 hours.
7. If the injured worker requires work restrictions, the worker and their manager or supervisor consults with Health Services.
  8. The injured worker and their manager or supervisor notifies Health Services immediately if the worker's injury worsens and they are unable to continue to work.

### 3. Reference

Occupational Health & Safety Act, s. 52, 9.31.

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