

Employer!	c name		Work Cafa DC again	nt num	T ₁	ncident num	Τ.	D-tfiidt		
Employer's name		WorkSafeBC account num		ncident num		Date of incident Type of incident				
Employer division or department		Employer address				Employer contact in	nformation	1		
						. ,				
Inv	estigation team	Name (p	print)		Signature	<u> </u>			Date signed	
Lead inves	tigator									
Employer	representative									
Worker re	presentative									
Investigati	on start date	Inves	stigation complete o	date			F	Report only - no inv	estigation/	
Location -	physical address, or road o	r highway name with ı	reference to nearby	identifiable	feature	1				
City / near	est community			Province			T	ime of incident		a.m. / p.m.
Type of r	oadway									
	Worksite		Re	source road	- single lane			Two-lan	e highway	
	Parking lot		Re	esource road	- two lanes			Three-lan	e highway	
	Alley / laneway			Reside	ential street			Four or n	nore lanes	
	Rural secondary road		Primary /arterial road			Other (describe below)				
Roadway	features									
	Straight		Anį	gle or merge	intersection			Other (descri	ibe below)	
	Curve - left			F	Round-about					
	Curve - right			Ligh	it-controlled			Other (descri	ibe below)	
	Steep grade			Sig	n-controlled					
	4-way intersection		Uncontrolled				Other (descri	ibe below)		
	T-intersection		Marked crosswalk				`	·		
	Weather conditions		Road conditions			Visibility conditions				
	Clear				Dry				Good	
	Rain		Wet			Poor				
	Snow		Snow accumulations		Sunrise					
	Fog		Slush		Sunset					
	Extreme hot		Ice		Night					
	Extreme cold									
			Mud		Obstructions					
Other (describe below)				Other (des	cribe below)			Other (descr	ribe below,)
Informat	ion about vehicles invol	ved	Number of work ve	ehicles involv	ed:	Numb	er of n	non-work vehicles ir	nvolved:	
Π								Vehicle Identific	cation	Insurer / Policy
Vehicle	Owner (name)	Driver (name)	Make /	Model	Year	Licence Plate	:	Number		Number
#1										

Vehicle	Owner (name)	Driver (name)	Make / Model	Year	Licence Plate	Vehicle Identification Number	Insurer / Policy Number
#1							
#2							
#3							
#4							

Injuries	and	other	losses
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Serious injury or death of employee	Injury to employee, requires medical treatment	Property damage less than \$25,000
Serious injury or death of non-worker	Minor injury to employee or had potential for causing serious injury	Property damage more than \$25,000
Injury to non-worker, requires medical treatment	Minor injury to non-worker or had potential for causing serious injury	Environmental spill or damage



he people involved						
Party	Description or Name	Role	Contact Information			
-	·					
What happened? Before the incide or had bearing up	nt: Describe circumstances, conditions,	decisions, actions and ev	rents that happened before the crash itself, but are relevant to			
The incident: Des documents.	scribe the sequence of events of the inci	dent. Make notes to iden	tify relevant photos, sketches, diagrams and other supporting			



Determine immediate causes: Choose the category and then describe the unsafe or substandard acts, practices or conditions that lead directly to the incident, or had significant bearing on it.

Substandard Conditions

Substandard Acts and Practices

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ve	nıcı	e Co	ndii	tions

Not fit for purpose

Unsafe operating condition

Safety features absent or inoperable

No winter tires

Worn or damaged tires

Faulty brakes

Faulty lights

Cracked / damaged windshield

Incorrect / inoperable equipment

Poor housekeeping - cab

Improper maintenance

No emergency kit

Other

Environmental Conditions

Adverse weather

Poor lighting (sun, dark)

Poor visibility (fog, etc)

Excessive noise

Temperature extremes

Road surface, obstructions

Road design or maintenance

Other

Other Conditions

Actions of other driver(s)

Actions of pedestrian or cyclist

Defective vehicle(s) - others

Violence from passenger or other

Poor communications

Medical condition - driver

Poor vision or hearing - driver

Inadequate traffic control

Improper clothing or footwear

Wildlife / animals on road

Unguarded devices

Other

Substandard Acts

Driving while distracted

Following too close

Ignoring traffic control devices

Failing to yield

Improper passing

Speeding; too fast for conditions

Not wearing seatbelt

Insufficient skill / competency

Inattention / complacency

Does not recognize hazard

Does not react correctly to hazard

Improper entry / exit of vehicle

Improper seat or mirror adjustment

Improper backing / reversing

Does not know operating procedure

Does not follow operating procedure

Other

Other

Substandard Practices

Impairment - fatigue, alcohol or drugs

Inadequate training or orientation

Driver not familiar with route

Poor / unrealistic scheduling

Poor journey management

High-risk route or intersection

Long duration trips

Insufficient rest breaks

Irregular / unpredictable schedules

Drive between midnight and 6:00 am

No check-in or emergency procedure

Vehicle not inspected before use

Improper loading / securement
Improper use of equipment

Improper lockout

Other

Other



Determine underlying causes: Describe gaps, deficiencies, circumstances, conditions, decisions or acts that contributed to the incident. Explain the underlying reasons that the immediate causes exist or occurred. From the list below, choose all that apply.

Basic Cause	Describe Basic Cause	Describe
1) Inadequate hazard identification or risk assessment	12) Inadequate vehicle inspections	
2) Inadequate or ineffective control measures	13) Inadequate vehicle maintenance	
3) Inadequate policy, procedures or practices	14) Inadequate system for reporting or correcting safety issues	
4) Incomplete implementation of policy or procedure	15) Improper motivation / incentives; poor performance tolerated	
5) Inadequate training or orientation	16) Employee not empowered to make driving-critical decisions	
5) Inadequate process for confirming driver competency	17) Inadequate experience, knowledge or skill	
7) Inadequate work (trip, journey) planning	18) Fatigue - task load / duration or lack of rest	
8) Inadequate management oversight, or supervision	19) Mental / physical stress or illness	
9) Inadequate purchasing standards or specifications	20) Misconduct - intentional or unintentional	
9) Inadequate or incomplete communications	21) Other – specify:	
11) Inadequate engineering or design	22) Other – specify:	

Corrective Actions

Туре	Actions	Assigned To	Target Completion Date	Date Completed	Verified by (initial)

Review and Approval

Member	Print Name	Signature	Role	Date
Reviewed by Manager				