

Definitions

**Hazard:** A hazard is any source of potential damage, harm or adverse health effects on something or someone under certain conditions at work.

**Near Miss:** is an unplanned event that did not result in injury, illness, or damage – but had the potential to do so. Only a fortunate break in the chain of events prevented an injury, fatality or damage; in other words, a "What almost happened?"

Instructions

Any person who has experienced or witnessed a Near Miss or believes a hazard exists at WVC may submit a Hazard / Near Miss Report by completing this form entirely and turning it in to Campus Safety.

Type of Report:     Near Miss                                     Hazard

Reported by:    Name: \_\_\_\_\_

Local Address: \_\_\_\_\_

Phone (Work): \_\_\_\_\_ Phone (Home): \_\_\_\_\_

Status:    Employee (Staff / Faculty)    Student    Visitor    Other: \_\_\_\_\_

**Part I: HAZARD/ NEAR MISS INFORMATION:**

Exact Location of Hazard/ Near Miss:

Describe the Hazard/ Near Miss:

Why do you think this is a Hazard?

What do you think could be done to resolve this situation?

Who have you told about this Near Miss/ Possible Hazard?

Supervisor    Department Head    No one    Submitted Work Order   Other: \_\_\_\_\_

I verify this information is true and correct. I understand my responsibility to turn this completed form into the SSEM Manager, Maria Agnew at [magnew@wvc.edu](mailto:magnew@wvc.edu), as soon as possible.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Part II: HAZARD INVESTIGATION**

Investigator Name: \_\_\_\_\_ Date Report Received by Investigator: \_\_\_\_\_  
 Investigator Title: \_\_\_\_\_ Date Investigation Started: \_\_\_\_\_

Investigative Actions Taken:

Persons Interviewed: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Corrective Actions Recommended:

Risk Control Options	Action Required	By Whom	By When
<b>Elimination</b> – Do you have to do the task?			
<b>Substitution</b> – Is there another way you can do the task?			
<b>Engineering</b> – Can you use tools or machinery to make the job safer?			
<b>Administration</b> – Can you improve work practices? (E.g. limit time of exposure).			
<b>Use of Personal Protective Equipment (PPE)</b> – i.e. safety glasses, reflective vests, etc. OR <b>Safety Equipment</b> – i.e. safety cones, caution tape, warning signs			
Date feedback provided to person reporting the hazard:			
Signed:		Print Name:	Ph:
Position:			Date:

Office Use Only (SSEM Recommendations)

Received By:	Date Completed:	Date Reviewed by Safety Committee:
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