



# CUPE LOCAL 3906

CANADIAN UNION OF PUBLIC EMPLOYEES – MCMASTER ACADEMIC & RESIDENCE WORKERS

Tel: 905-525-9140 ext. 24003 Fax: 905-525-3837 Email: [staff@cupe3906.org](mailto:staff@cupe3906.org)  
McMaster University, Kenneth Taylor Hall B111, 1280 Main St W, Hamilton, ON, L8S 4M4

## Guideline: How to Fill Out an Incident Report

If you experience or witness a **hazard, injury, or unsafe situation** at work, you must complete an **Injury/Incident Report** within **24 hours**. You can find a link to this form here: <https://hr.mcmaster.ca/app/uploads/2018/11/injury-incident-report-fillable-1-36.pdf> This ensures your rights are protected and helps improve workplace safety.

### ● *Step 1. Determine the Type of Report*

On the first page, check the appropriate box:

- ✓ **No Injury** – unsafe situation but no one was hurt.
- ✓ **Injury** – any physical harm (minor or serious).
- ✓ **Hazardous Situation** – a condition or event that *could* have caused harm.
- ✓ **First Aid** – minor treatment with band-aid, ice pack, etc.
- ✓ **Healthcare** – medical treatment by a doctor/clinic (but no time lost).
- ✓ **Lost Time** – injury resulting in time away from work.
- ✓ **No First Aid** – if no treatment was required.

### ● *Step 2. Complete Section 1 (You – the Worker/Student)*

Fill out your personal information:

- ✓ **Name and Student/Employee ID**
- ✓ **Department/Faculty/Unit**
- ✓ **Occupation at time of incident** (e.g., “Lab TA”, “Graduate Student Researcher”)
- ✓ **Date and Time** of incident and when it was reported.
- ✓ **Location** – building and room number.
- ✓ **Description** – clearly explain what happened:
  - What you were doing
  - What caused the incident (slipped on wet floor, chemical exposure, etc.)
  - Environmental factors (temperature, noise, equipment, chemicals)



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- ✓ **How could it have been avoided?** – suggest safer practices.
- ✓ **Witnesses** – names and contact info.
- ✓ **Area of injury** – check the body part affected.
- ✓ **Treatment** – first aid, clinic, emergency, none.
- ✓ **Previous injuries** – indicate if this is similar to a past issue.

## ● *Step 3. Complete Section 2 (Supervisor's Part)*

Your **supervisor/PI/manager** will fill this out, but you should ensure it is done:

- ✓ Record whether the incident caused **lost time** or modified duties.
- ✓ Identify **contributing factors** (e.g., unsafe equipment, lack of training).
- ✓ Describe **root causes** and **property damage** (if any).
- ✓ List **corrective measures** to prevent recurrence (e.g., repair equipment, retraining, better PPE).
- ✓ Signatures are required from:
  - **You (the worker/student)**
  - **Your supervisor**
  - **Department chair/manager**

## ● *Step 4. Submit the Form*

- Submit the completed form **within 24 hours** to either:
  - **University Health and Safety (UHS)** – Gilmour Hall, Room 304  
 [uhs@mcmaster.ca](mailto:uhs@mcmaster.ca)
  - **Faculty of Health Sciences Safety Office (FHSSO)** – HSC Room 1J11A  
 [fhssso@mcmaster.ca](mailto:fhssso@mcmaster.ca)
- If in doubt, email [healthandsafety@cupe3906.org](mailto:healthandsafety@cupe3906.org) for guidance.

## ● *Step 5. Follow Up*

- Keep a copy for your records.



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- The Employer will need to complete a **WSIB Claim (Form 7)**. You should report any workplace injuries to the Workplace Safety and Insurance Board (WSIB) using a “Form 6,” even if the injury does not lead to lost time ([https://www.wsib.ca/sites/default/files/2024-09/0006a\\_202407\\_workersreportofinjury\\_web.pdf](https://www.wsib.ca/sites/default/files/2024-09/0006a_202407_workersreportofinjury_web.pdf)). If you seek medical attention, your physician should fill out a “Form 8.” You should also notify your Union if you are hurt on the job.
- Participate in the **incident investigation** and support corrective actions.

### ***⚠ Important:***

- Report **all hazards and injuries**, even minor ones – they help prevent bigger accidents later.
- For **critical injuries** (life-threatening, loss of consciousness, major fractures, etc.), immediately call **911 (off-campus)** or **Security at 88/5555 (on-campus)**, and notify UHS.