

SAFETY CONCERN REPORT

(use for reporting near misses or hazards)

Safety Concern Reporting is the process of identifying and preventing an unsafe act or unsafe condition before it causes an injury or illness. This form is used to formally document the recognition of a hazard, the change that is made to prevent a reoccurrence of the hazard and to share the lessons learned with the district.

All information is required. (Your name and contact information will be kept confidential.)

Incident Date/Time: _____ Reporting Person: _____

Contact Number: _____ Email: _____

Description of the near miss.
Please explain the following:

- 1) **Who** was involved?
- 2) **What** exactly happened?
- 3) **Where** did it occur?
- 4) **When** did it occur?
- 5) **How** did it occur?

What acts or conditions led directly to the near miss incident?

What steps have/will be taken to prevent a similar incident?

Who is responsible for taking these actions and following up on their completion?

Expected Completion Date: _____ Actual Completion Date: _____

Send form to Confidential Safety Liaison, Kiski Area Central Office

SAFETY COMMITTEE USE ONLY

Notes and Comments