



WORKPLACE VIOLENCE INCIDENT REPORT FORM

Workplace Violence (Bill 168) is defined as:

- a) The exercise of physical force that causes, or could cause, physical injury to the worker;
- b) An attempt to exercise physical force that could cause physical injury to the worker: or,
- c) A statement or behavior that is reasonably interpreted as a threat to exercise physical force against the worker that could cause physical injury to the worker.

PART A - TO BE COMPLETED BY EMPLOYEE

Employee Information

Name: _____ Employee#: _____

School/Location: _____ Job Title: _____

Alleged Aggressor Information

Co-worker Supervisor Someone who reports to you Parent

Member of the public Student (initials) _____ Other: _____

Incident Details

Date of Incident: _____ Time: _____ Location: _____

Name(s) of Witness _____

Type of Violence:

- The exercise of physical force that causes, or could cause, physical injury to the worker (provide details)
- An attempt to exercise physical force that could cause physical injury to the worker (provide details)
- A statement or behavior that is reasonably interpreted as a threat to exercise physical force against the worker that could cause physical injury to the worker (provide details)

Did you seek medical aid or miss time from work due to the incident? yes no

If yes, please complete the "Supervisor/Principal Incident Report" and forward it to your Supervisor/Manager for follow-up

Employee Signature: _____ Date: _____

PART B - TO BE COMPLETED BY SUPERVISOR/MANAGER

Steps Taken to Prevent Recurrence (check all that apply)

trespass order consulted employee violence threat risk assessment

relocated student contacted Human Resources contacted Police

suspended student disciplined student

(explain): _____

employee relocated in consultation with Human Resources-Labour Relations

contacted parents create/reviewed/updated/modified safety and/or behavioural plan(s) with employee

other: _____

Principal Signature: _____ Date:- _____

PLEASE SCAN and EMAIL to the H&S Dept. (healthandsafety@ucdsb.on.ca) and copy employee on the email.

Copies to: employee and school file