
Incident Investigation Module

User Guide – V 12.0

April 22, 2024



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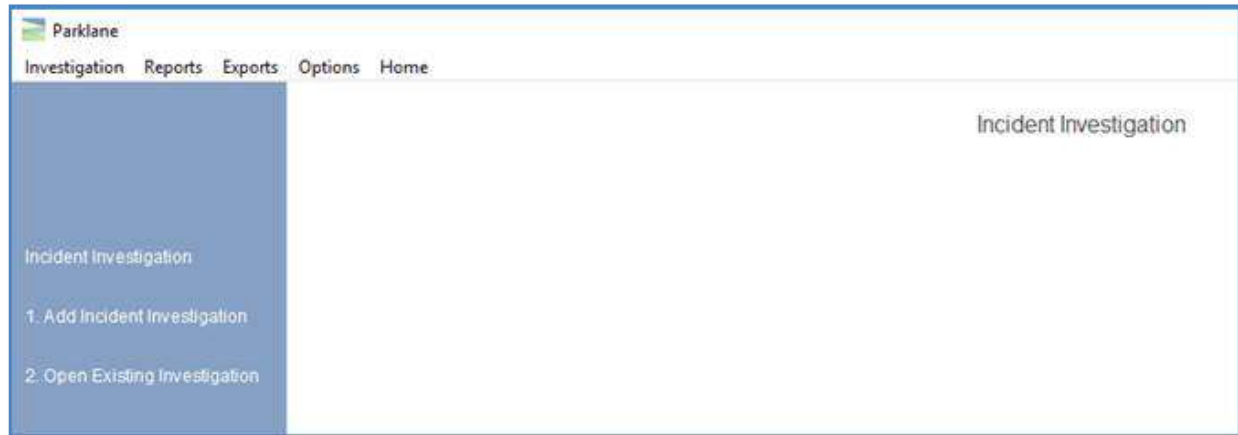
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Incident Investigation

Some organizations are required to submit specific detail of workplace incidents to their Workers Compensation partner within a specific time frame, usually 48 hours. Parklane's Incident Investigation Module is ideal for this application. Working in conjunction with the Incident Reporting Module, the Incident Investigation Module is designed to help you manage your day-to-day tasks in occupational health and safety both efficiently and effectively.



Getting Started

Access to the Incident Investigation module must be initiated by the Administrator of the Parklane System. Once enabled, the Module name will appear in the home screen menu of the Parklane application.

Prior to entering an Investigation there is some prep work to define the tables contained in the Incident Investigation Module.



Tables

Type, Causes and Corrections Injury, Equipment & Appointments Root Cause



There are a few tables that will be accessed by this module. If your organization uses Parklane's Incident Reporting Module, you will be accessing these tables directly, and there is no need to create new ones. These pre-defined tables include the "Type Causes and Corrections", "Injury, Equipment & Appointments" and "Root Cause". In the rare case your organization does not use Parklane's Incident Reporting Module, these tables will have to be created.

Seriousness of Injury

A table that is proprietary to this Module is the **Seriousness of Injury** table. A maximum of 400 entries are allowed. The **Go To F1** button will show any existing entries and they can be modified or added to by clicking on the appropriate line number. Table descriptions may be changed after they have been used, however, the Module stores the description name in the individual record once that record has been selected and saved.



Identify Safety Committees

Identify Safety Committee Members

There are two tables that will be accessed in this Module. The first identifies the names of the Safety Committees and the second is the names of the members of each Committee. Select the **Identify Committees F2** button to reveal the existing entries. New committees can be entered by selecting the first available blank number and entering the name in the Description field. A total of 400 entries are permitted.

AV79 Identify Committees

This table will apply to all companies:

No. Enter number from below and then enter description

Description

Identify Safety Committees

1.	Plant Safety Comm
2.	Admin Bldg Safety Comm
3.	Contractors Committee
4.	
5.	
6.	
7.	
8.	
9.	
10.	

Go To: **F2** Identify Committee

Maximum number of table entries is 400.

Individuals can belong to more than one committee. Select the **Identify Committee Members** option. This panel also allows members to receive emails when a preliminary (or final) investigation reports is submitted. The report is attached to this notification. The check boxes allow for the selection of which members receive emails based on the type of investigation.

AV80 Identify Safety Committee Members

Identify each of the Safety Committee Members that will have emails sent to them, include their email address.

Maximum number of entries is 1200.

No.

Name F3

User ID

Email

Identify Safety Committee ☒ F4

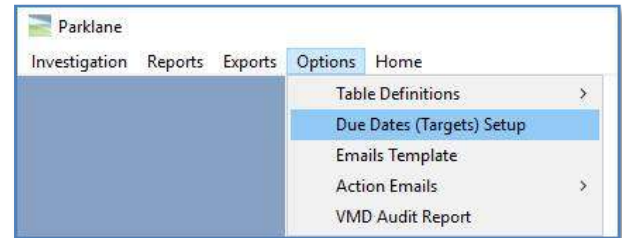
This person will be notified on the following Incident Investigations:

<input checked="" type="checkbox"/> Hazard / Near Miss	<input checked="" type="checkbox"/> Injury
<input checked="" type="checkbox"/> Health Care	<input checked="" type="checkbox"/> Critical
<input checked="" type="checkbox"/> First Aid	<input checked="" type="checkbox"/> Death
<input checked="" type="checkbox"/> Lost Time	<input checked="" type="checkbox"/> F6 Seriousness of Injury

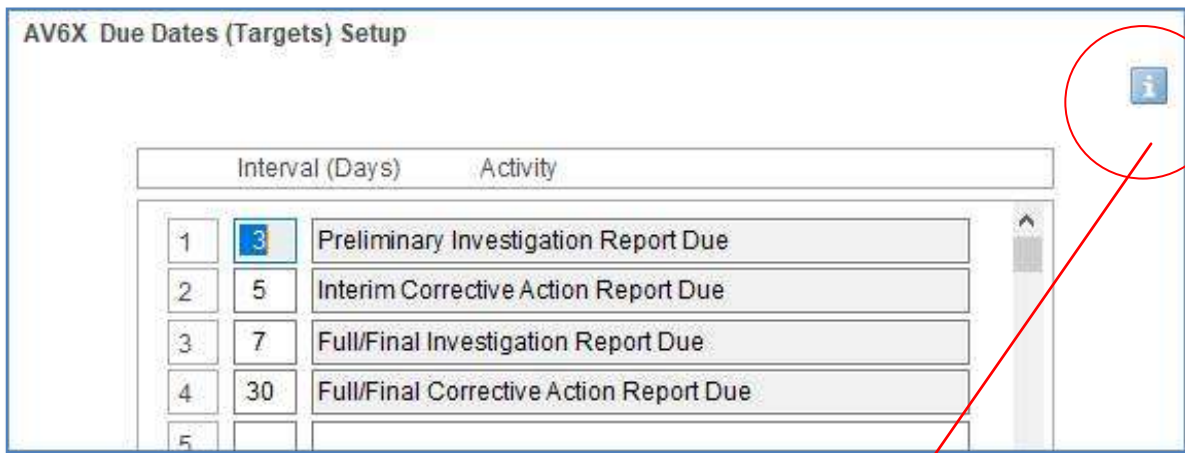
Staff Currently Identified

1.	Sara K
2.	Claudette Everitt
3.	Karen - Clms Mgr
4.	Sarah Mc - Clms Co-Ord
5.	
6.	
7.	
8.	
9.	
10.	
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23.	
24.	
25.	
26.	
27.	
28.	
29.	
30.	
31.	
32.	
33.	

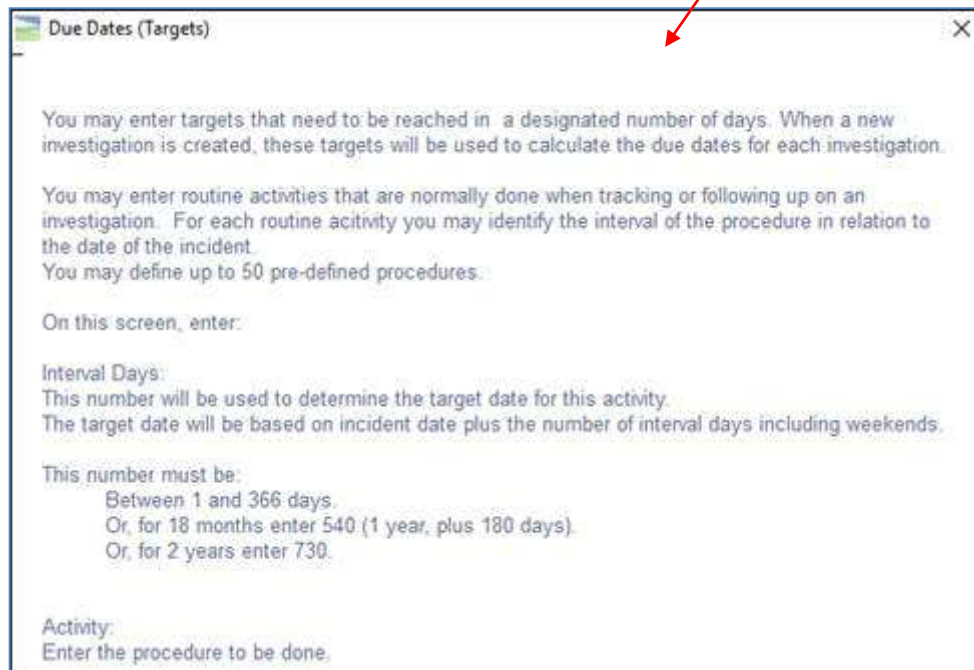
Due Dates



The **Due Dates** table will determine the time permitted for each type of report to be completed and submitted. The interval should be entered in **Days** from the time of occurrence of the incident. The first four activities are fixed (the interval can still be changed), however, there is room for a total of 50 activities.



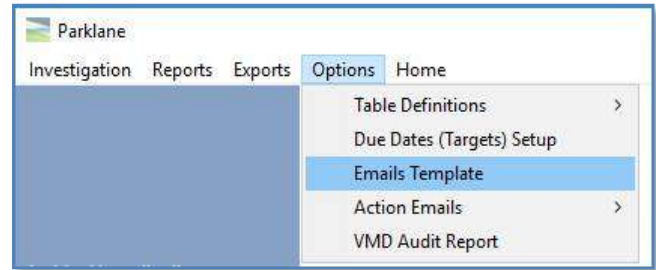
At any time throughout this Module, the **Information** icon is available to further explain each function. The rules for the Due Dates are explained in this dropdown.



Email template

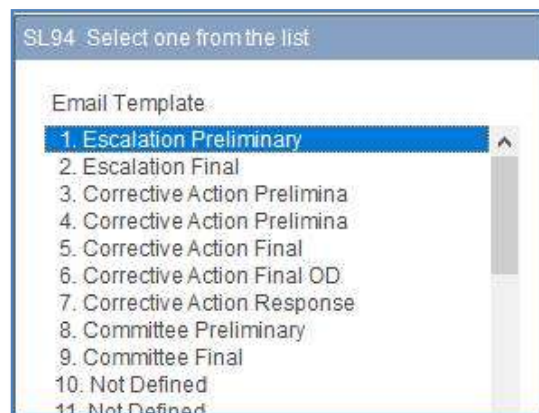
There are 9 pre-programmed email notification templates available to customize. Each custom email is sent at a specific time or when a specific action takes place.

The templates allow you to customize: From, Subject, Email Body, and portion of any PDF attachments (if applicable) that are sent with them.



1. **Escalation Preliminary:** This notification is sent when a preliminary report is not printed/submitted by the due date and is escalated to the manager. (Includes PDF attachment)
2. **Escalation Final:** This notification is sent when a final report is not printed/submitted by the due date and is escalated to the manager. (Includes PDF attachment)
3. **Corrective Action Preliminary:** This notification is sent to the person responsible for addressing a preliminary corrective action. Email automatically includes a hyperlink which will bring the recipient to a response webpage to describe actions taken. (Includes PDF attachment)
4. **Corrective Action Preliminary OD (Overdue):** This notification is sent to the personal responsible for addressing a preliminary correction action when it becomes overdue. (Includes PDF attachment)
5. **Corrective Action Final:** This notification is sent to the person responsible for addressing a final corrective action. Email automatically includes a hyperlink which will bring the recipient to a response webpage to describe actions taken. (Includes PDF attachment)
6. **Corrective Action Final OD (Overdue):** This notification is sent to the personal responsible for addressing a final correction action when it becomes overdue. (Includes PDF attachment)
7. **Corrective Action Response:** This notification is sent to the investigating supervisor when a response comes in via online response form regarding a corrective action.
8. **Committee Preliminary:** This notification is sent to the health and safety committee members informing them of a completed preliminary report.
9. **Committee Final:** This notification is sent to the health and safety committee members informing them of a completed final report.

Email Templates



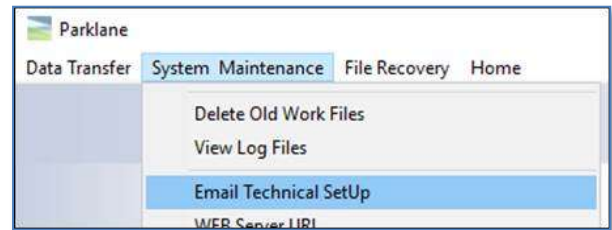
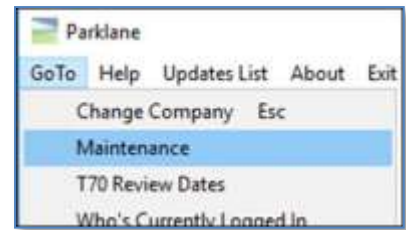
Email Template Sample

Name of e-mail Template	Escalation
To appear in the From Line	Safety Committee
To appear in the Subject line	ESCALATION of Action Item
Text to appear in the body of email	<p>** ESCALATION **</p> <p>An Action Item has not been addressed – Follow up is required</p>
Text to appear in the PDF	<p>You are being advised that an Action Item, previously issued, has not been addressed by the recipient.</p> <p>Please follow up and have this Action Item completed at the earliest opportunity.</p> <p>Should further information be required, please contact the Committee at 519-658-4497 x1234</p>

Action Emails

The **Action Emails** option allows the setup of email notifications to be sent to various personnel when a user performs one of the actions shown. Ensure that the email protocol has been set up under the **Maintenance** panel on Parklane's opening panel, by clicking **Email Technical Setup**. This may require consultation with your I.T. Support Team.

Note: Before using this feature, all users and recipients must be setup in **Security**.



AV11 Email Templates

Name of e-mail Template

To appear in the From Line

To appear in the Subject line

Text to appear in the body of email

**** ESCALATION ****

 An Action Item has not been addressed – Follow up is required

Text to appear in the PDF

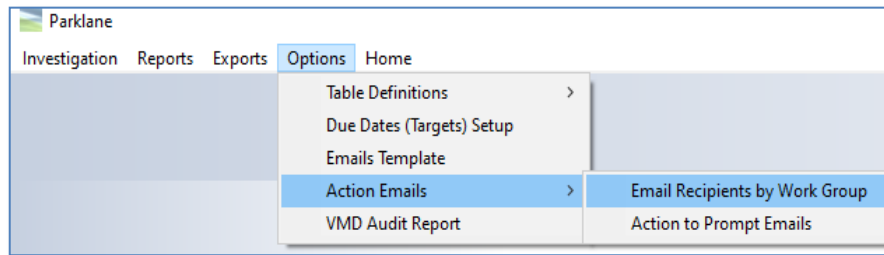
You are being advised that an Action Item, previously issued, has not been addressed by the receiptent.

 Please follow up and have this Action Item completed at the earliest opportunity.

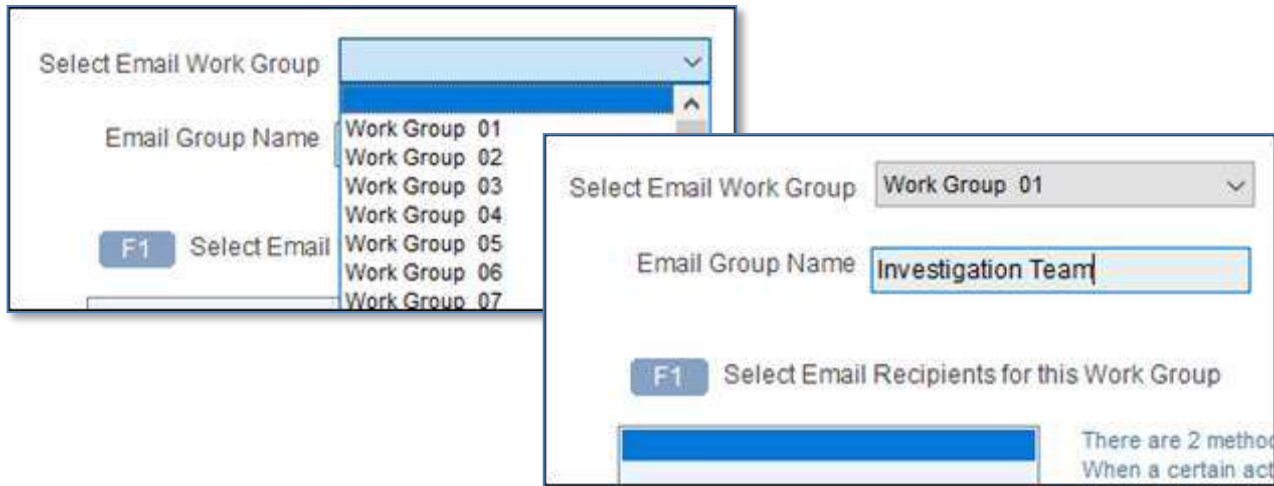
 Should further information be required, please contact the Committee at 519-658-4497 x1234

There are two options for sending Action Emails. An email will be sent to everyone that is in the email list for the specific **Action**, or an email will be sent to those who are in the same **Work Group** as the User.

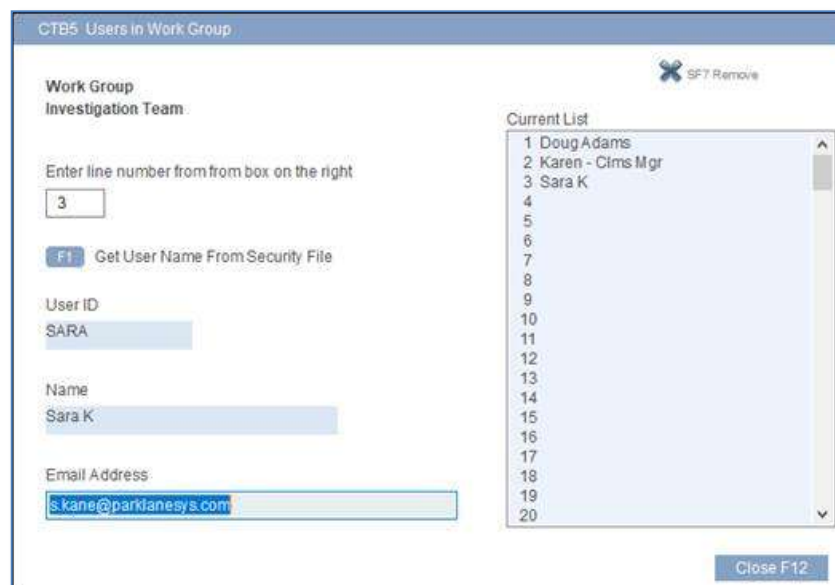
Work Groups must be pre-defined when choosing the second option. Click on **Options/Action Emails/Email Recipients by Work Group**.



Click on the drop down for **Select Email Work Group** and click on a work group heading to rename the **Email Group Name**.

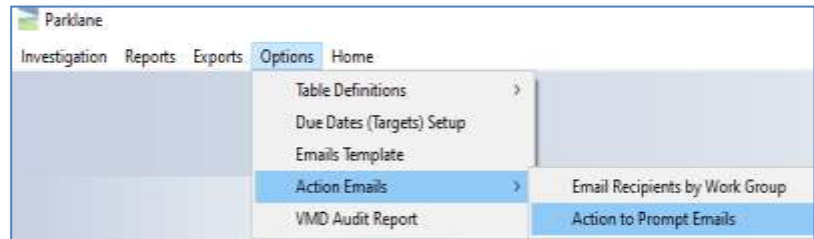


Click on **F1>** and begin to select the email recipients for this Work Group. Enter the next available line number and click **Get-F1** to select the email recipient from the list provided. Up to 200 email recipients may be selected per Work Group.



When an **Action** occurs, the system will determine what **Work Group(s)** the User is located in and will send an email to all other recipients within the Work Group(s).

To setup the **Action Emails** click on **Options/Action to Prompt Emails** and select the action(s) that should prompt an email notification.



For each Action shown, you can indicate which users will prompt an automatic email and which person(s) or workgroups will receive the email. Check the Action that should prompt an email.

AVB2 Action Emails

Make sure the email protocol has been setup under Maintenance

Check the Actions that should prompt an email notification	Action By	Email To	
<input type="checkbox"/> Added New Investigation	<input type="checkbox"/>	<input type="checkbox"/>	Email notifications can be sent to various personnel when a user performs one of the actions shown.
<input type="checkbox"/> Cancel an Investigation	<input type="checkbox"/>	<input type="checkbox"/>	For each action shown, you can indicate which users will prompt an automatic email and which person(s) will receive the email.
<input type="checkbox"/> Reinstate an Investigation	<input type="checkbox"/>	<input type="checkbox"/>	Before using this feature, all users and recipients must be setup in Security.
<input type="checkbox"/> Close an Investigation	<input type="checkbox"/>	<input type="checkbox"/>	How it works:
<input type="checkbox"/> Print Preliminary Investigation Report Due	<input type="checkbox"/>	<input type="checkbox"/>	Check the action that should prompt an email.
<input type="checkbox"/> Print Interim Corrective Action Report Due	<input type="checkbox"/>	<input type="checkbox"/>	Check the Action By box which will activate a pop-up window. Indicate the users that will prompt an email.
<input type="checkbox"/> Print Full/Final Investigation Report Due	<input type="checkbox"/>	<input type="checkbox"/>	Check the Email To box which will activate a pop-up window. Indicate the people who will be the recipients of the email.
<input type="checkbox"/> Print Full/Final Corrective Action Report Due	<input type="checkbox"/>	<input type="checkbox"/>	

Click the **Action By** box which will activate a pop-up window. On this window indicate the users that will prompt an email to be sent. Up to 120 users can be identified.

CTB1 Users that should prompt an email

Action: Close an Investigation

Enter line number from box on the right

1

Get F1: Get User Name From Security File

User ID and Name

DOUGA Doug Adams

Email Address

d.adams@parklanesys.com

Current List

1. Doug Adams
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.
- 11.
- 12.
- 13.
- 14.
- 15.
- 16.
- 17.
- 18.
- 19.
- 20.

Close F12

Next, click the **Email To** box which will activate another pop-up window. On this window indicate the people who will be the recipients of the email. Up to 20 recipients can be identified.

CTB2 Email Recipients resulting from an action

Action: Close an Investigation

☐ Send emails using Work Groups

Enter line number from box on the right
3

Get F1 To select User Name from Security File.
If not in Security, enter any ID, their name & email.
Either way, click Submit to add to table.

User ID and Name
LEE Lee - Corporate

Email Address
l.males@parklanesys.com

Submit F2

☐ Send an email to the Managing Staff,
in addition to any users selected above.

Current List

1. Claudette Everett
2. Doug Adams
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.
- 11.
- 12.
- 13.
- 14.
- 15.
- 16.
- 17.
- 18.
- 19.
- 20.

Close F12

Alternatively, click on the check box to **Send emails using Work Groups**. Once checked, all other fields will be grayed out. As previously described, when an **Action** occurs, the system will determine what **Work Group(s)** the User is located in and will send an email to all other recipients within the Work Group(s).

CTB2 Email Recipients resulting from an action

Action: Close an Investigation

☒ Send emails using Work Groups

Enter line number from box on the right
[Grayed out]

Get F1 To select User Name from Security File.
If not in Security, enter any ID, their name & email.
Either way, click Submit to add to table.

User ID and Name
[Grayed out]

Email Address
[Grayed out]

Submit F2

Current List

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.
- 11.
- 12.
- 13.
- 14.
- 15.
- 16.
- 17.
- 18.
- 19.
- 20.

Each time an Action is executed by a listed User, the Recipient will receive an email advising that the Action occurred.

Notification of User Action

Health Safety Application [noreply@parklanesys.com]

Sent: Mon 20/12/2021 2:17 PM

To: k.ferrell@parklanesys.com

The following action was taken in the Parklane System.

--

Module: Accident Investigation

Action: Cancel an Investigation

--

Date: 20 Dec 21 at 14:16

User: Karen Ferrell

--

3051 Claudette/Karen Test

--

Incident Investigation # : 0000027

Date of Incident : 15 Sep 21

Injured Worker : ANDERSON, ROBERT

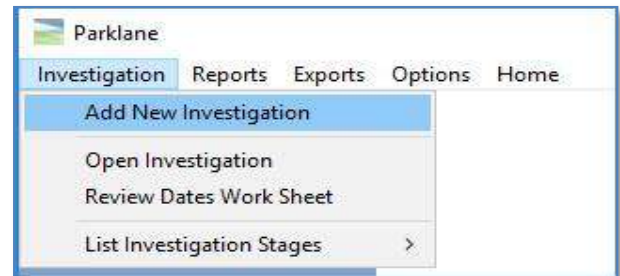
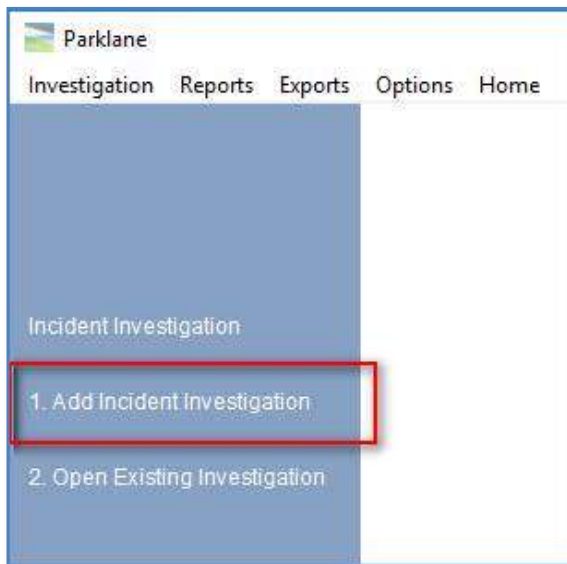
Injury : BURN

Location :

--

Please do not reply to this automated message.

Add New Investigation



There are two ways to add a new investigation. The first is the drop down menu from the top tool bar, and the second is the sidebar menu on the main panel. Either selection method will take you to the

Search For Employee panel to select the employee and then the incident related to the investigation. The **Description**

panel will open. This panel also displays a sidebar menu which provides additional panels for data entry to the new investigation.

CT30 Search for Employee PKD-Company 002

First Name Search keyword Go F7 F6 Show last 25 employees you accessed, by last time accessed

F1 Last Name Go F4 System Assigned Key Go F3 SF6 Show last 25 employees you accessed, by last name

Department Code P8 Employee no. or ID Go F2

Excludes terminated employees

Last Name	First Name	Department	Position	Status	Age	ID	Key	View
ABRAHAMS	PETER	56883	TEACHER	P_Fulltime	42	125	25	<input type="checkbox"/>
ADAMS	GREG	PLANT	ASSOCIATE	Full-time	43	359	159	<input type="checkbox"/>
AFFERD	BERT	56883	TEACHER	P_Fulltime	44	2142	142	<input type="checkbox"/>

CD09 List of Incidents				PETER ABRAHAMS P_Fulltime 56883 TEACHER 125 Key 25			
	Date	Record	Added?	Injury			
1.	13 Mar 23	Reo		RT KNEE ABRASION			
2.	01 Mar 23	LT		RT KNEE ABRASION			
3.	15 Jun 22	Reo		ANKLE RT STRAIN			
4.	24 May 22	LT		ANKLE RT STRAIN			
5.	07 Jan 22	HC		LT ELBOW STRAIN			
6.	01 Jun 21	LT		laceration lt finger - pinky			
7.	27 Aug 20	LT		EYE LT FB			
8.	25 Jun 20	Reo		NOSE FRACTURE			
9.	15 Jan 20	Reo		NOSE FRACTURE			
10.	06 Jan 20	LT		NOSE FRACTURE			

Preliminary Investigation

Description

Several fields from the incident record will auto-fill various panels of the investigation record to reduce duplication. Apart from **Other Injured Person**, **Comments** and **Closed Date**, all fields are mandatory.

Preliminary Investigation

Description

Preliminary Description

Initial Medical Treatment

Reported & Witnesses

Interim Corrective Action

Type of Occurrence

Additional Details

Preliminary Investigators

Review & Send Prelim Inv

Investigation Number 11
Investigation Date 01 Apr 19
PKD-Company 002

AV41 Description

Print Draft

Select Incident
View Incident F5
Delink Incident SF1

Closed ☐
Closed Date

Investigating Supervisor Sara K F8
Manager Sara K F9

Identify Safety Committee Plant Safety Comm SF6

Injured Person JACKSON, TOM F2
Injury BACK LOW STRAIN F3
Location Receiving Dock 1
Department WARDNW F6 North West Wing
Worksite Sara Kane - Victoria SF5
Reporting Supervisor, Contractor GRANT SMITH F7 SF3

☐ Hazard / Near Miss
☐ First Aid
☐ Health Care
☒ Lost Time
☒ Injury
☐ Critical
☐ Death

HHMM
Incident Date 01/04/2019 07:30
Date Reported 01/04/2019 08:00

Next Target Due Date
Date 04/04/2019
Time 07:30
User Id SARA
Task Preliminary Investigation Report Due

Other Injured Person

User Comments

Entered SARA 01/02/2023
SF7 Cancel Record

PrevPg CtrlQ
NextPg CtrlW
Index CtrlF1
Next Esc
Home F11
Menu F12

Preliminary Description

The Preliminary Description panel permits the addition of data including:

- Equipment or Material Involved (Will autofill from Incident record)
- Sequence of events (Summary for reporting and complete description)
- Unsafe conditions, acts, or procedures that significantly contributed to the incident.
- Brief description of incident.

AV42 Preliminary Description

Equipment or Material Involved

Sequence of events that preceded incident. Provide summary for reporting and complete description (WorkSafeBC required field)

Unsafe conditions, acts, or procedures that significantly contributed to the incident (WorkSafeBC required field)

Brief description of Incident (WorkSafeBC required field)

Initial Medical Treatment

The Initial Medical Treatment panel provides for the area of injury, the internal and external health care/treatment and where the worker was treated. If present, these fields will auto-fill from the incident record. Fields may be overwritten if necessary.

AV57 Initial Medical Treatment

Injury: BACK LOW STRAIN

a) Area of Injury (body part)

(Please check all that apply)

☐ Head ☐ Teeth ☐ Upper Back
☐ Face ☐ Neck ☒ Lower Back
☐ Eye(s) ☐ Chest ☐ Abdomen
☐ Ear(s) ☐ Pelvis
☐ Other: _____

b) Left Right Left Right

☐ Shoulder ☐ ☐ Hip ☐
☐ Arm ☐ ☐ Thigh ☐
☐ Elbow ☐ ☐ Knee ☐
☐ Forearm ☐ ☐ Lower Leg ☐
☐ Wrist ☐ ☐ Ankle ☐
☐ Hand ☐ ☐ Foot ☐
☐ Finger(s) ☐ ☐ Toe(s) ☐

c) Internal Health Care / Treatment

First Aider: _____
 Telephone: _____
 Date of first aid: _____

d) External Health Care / Treatment

☒ Employee received treatment Date of treatment: 01/04/2019
 Health professional or facility: HSC - EMERG DEPT When employer learned: 02/04/2019

e) Where worker was treated:

☐ On-site clinic/first aid ☒ Emergency
☐ Clinic, off-site ☐ Ambulance
☐ Health professional ☐ Admitted to hospital
☐ Other: _____

f) Additional Comments:

Reported & Witnesses

The Reported & Witnesses panel provides for the name and details of the person who took the report, the person who reported the incident and the names and details of the incident witnesses. If present, these fields will auto-fill from the incident record. Additional fields are provided for the entry of other personal whose presence might be necessary for proper investigation.

AV44 Reported & Witnesses

Person who took the report

First Name: GRANT F2
 Last Name: SMITH
 Phone: 519 657-3456 Ext. 2209
 Email: gsmith@somewhereco.ca
 Work Hours: 0700 - 1600
 Title: SUPERVISOR

Person who reported the incident ☒ Same as person who took report

First Name: GRANT F3
 Last Name: SMITH
 Phone: 519 657-3456 Ext. 2209
 Email: gsmith@somewhereco.ca
 Work Hours: 0700 - 1600
 Title: SUPERVISOR

Witnesses

First Name	Last Name	Telephone	Ext.	Position or Address
SARA	KANE	519 657-9934	2230	F4
				F5
				F6

Other persons whose presence might be necessary for proper investigation

First Name	Last Name	Telephone	Ext.	Position or Address
				F7
				F8

Interim Corrective Actions

The Interim Corrective Actions panel auto-fills the corrective actions from the incident report. If required, additional corrective actions can be added by clicking F6 and selecting from the dropdown menu. Details related to each corrective action can be entered by selecting F7 and completing the date assigned and target date. Identify the individual responsible by selecting F2 to search and select. If the email address is provided or manually entered, an email will be sent upon exiting this panel. Manually enter text to describe the detail of the corrective action. An email containing the corrective action will automatically send once you exit the module.

AV46 Interim Corrective Action

Corrective Actions:	Has Details Step 1	Go to Details Step 2
Equipment Repair or Replacement	Yes	F7
Reinstruction of Person Involved	Yes	

AV5Q Corrective Action **Equipment Repair or Replacement**

Date Assigned: 02/04/2023 Target Date: 05/04/2023 Completion Date:

Person: GRANT SMITH F2

Position or Company: SUPERVISOR

Telephone: 519 657-3386 3340 Email: g.smith@somewhereco.ca

Corrective Action Recommendation
repair equipment or replace if necessary

Correction Action Taken (appears on EIIR)
Corrective Action Taken:

Comments

Close F12

Type of Occurrence

Choose one or more types of occurrence(s) must be selected on the **Type of Occurrence** panel. It should be noted that an incident investigation report is not required under the BC Workers Compensation Act if none of the occurrence types apply, or if the incident is a vehicle accident occurring on a public street or highway.

AV49 Type of Occurrence

Type of occurrence (select all that apply) WorkSafeBC required field.

<input type="checkbox"/> Death of a worker	<input type="checkbox"/> Dangerous incident involving explosives other than blasting incident
<input type="checkbox"/> Serious injury to a worker	<input type="checkbox"/> Diving incident, as defined by regulation
<input type="checkbox"/> Major structural failure or collapse	<input type="checkbox"/> Incident of fire or explosion with potential for serious injury
<input type="checkbox"/> Major release of hazardous substance	<input type="checkbox"/> Minor injury or no injury but had potential for causing serious injury
<input type="checkbox"/> Blasting accident causing personal injury	<input checked="" type="checkbox"/> Injury requiring medical treatment beyond first aid

An incident investigation report is NOT required under the Workers Compensation Act if none of the above applies or if this incident is a vehicle accident occurring on a public street or highway.

Comments

Additional Details

The Additional Details panel allows for the optional tagging of the nature of the serious injury and detailed comments that will be included on the Investigation Form.

AV50 Additional Details

Nature of the serious injury (optional) – complete only if there has been any injury

<input type="checkbox"/> Life threatening or resulting in loss of consciousness	<input type="checkbox"/> Punctured lung or other serious respirator condition
<input type="checkbox"/> Major broken bones in head, spine, pelvis, arms, or legs	<input type="checkbox"/> Injury to internal organ or internal bleeding
<input type="checkbox"/> Major crush injuries	<input type="checkbox"/> Injury likely to result in loss of sight, hearing, or touch
<input type="checkbox"/> Major cut with severe bleeding	<input type="checkbox"/> Injury requiring CPR or other critical intervention
<input type="checkbox"/> Amputation of arm, leg, or large part of hand or foot	<input type="checkbox"/> Diving illness such as decompression sickness or near drowning
<input type="checkbox"/> Major penetrating injuries to eye, head, or body	<input type="checkbox"/> Serious chemical or heat/cold stress exposure
<input type="checkbox"/> Severe (third-degree) burns	<input type="checkbox"/> Other (specify)

Additional Details (Included on Investigation Form)


Preliminary Investigators

On this panel, identify the individuals who carried out or participated in the preliminary investigation by selecting F2 to search and select. A calendar is provided to select the date of signature by the selected individual.

An additional field is provided for text entry of an explanation of blank area on the preliminary report, if any which will be included on the Investigation Form.

AV51 Preliminary Investigators

Persons who carried out or participated in the preliminary investigation

		First Name	Last Name	Job Title	Signature	Signature Date
Employer representative	 F2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Worker representative		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Explanation of blank areas on this Preliminary report if any (WorkSafeBC required field)

Review & Send Preliminary Investigation

Select Review & Send Prelim(inary) Inve(stigation) from the sidebar. The system will open a six page incident investigation report which has been auto-filled based by the data entered on previous panels. If required, that information can be revised, or if blank, data can be entered on the report. Once revised or entered, that data will update the associated panel in which the field resides. Once complete, select **Submit – F5** to send an email with report attachment to the designated Safety Committee. Due Dates (Targets) associated with the completion of this report will be marked Done.

Employer Incident Investigation Report (EIIR)

Please refer to the companion quick guide for assistance completing the investigation and this form.

1. Employer's Information

Preliminary Investigation Report Due

Employer's Name (legal name and trade name) Parklane Demo System		
WorkSafeBC account number 1234567890	Operating Location number 853	
Employer's head office address 1234 Grand Ave.		
City Kitchener	Province ON	Postal code L7P 1J6
Employer's representative's name Lisa Sheehar		Phone number (include area code) 519-765-3386
Email address		

2. Injured persons

Last name	First name	Job title
a) JACKSON	TOM	ASSOCIATE
b)		
c)		
d)		

Page 1 of 6

Submit - F5

Page Down Close - F12

Preliminary Report

The Parklane System <noreply@parklanesys.com>

Sent: Fri 2019-06-14 2:30 PM

To: Sara Kane

Message SARA_AV1A_14282576.pdf (121 KB)

Incident Investigation # : 0000011

Date of Incident : 01 Apr 19

The following action was taken in the Parklane System.

You have received the attached Incident Investigation because you are a member of the Plant Safety Comm committee

Please refer to the attached PDF for further details.

Thank you.

Please note that we are unable to respond to any replies to this email.

Full Investigation

Full Cause of Incident

The Full Cause of Incident panel provides for the type, preliminary and root causes of the incident. These fields will auto-fill from the incident record. If required, additional types, causes and root causes can be added by clicking and selecting from the associated dropdown menu. An additional field is provided for text entry of the determination of causes which will be included on the Full Investigation Form.

Full Investigation

Full Cause of Incident

Full Incident Description

Full Corrective Actions

Full Report Investigators

Review & Send Full Invest

AV45 Full Cause of Incident

Type	Preliminary Cause	Has Root	Go to Root
<input type="text" value="Over Exposed"/>	<input type="text" value="Wrong All Unsafe Speed"/>	<input type="text" value="Yes"/>	<input type="text" value="No"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Determination of Causes (WorkSafeBC required field for full investigation)

Full Incident Description

This panel provides for manual text entry of a full description of the incident which will be included on the Full Investigation Form.

AV52 Full Incident Description

Full Description of the Incident (WorkSafeBC required field)

Full Corrective Actions

This panel will auto-fill the corrective actions and details from the preliminary investigation and allow for the tagging of additional corrective actions and details, as they relate to the full investigation, by clicking and selecting from the associated dropdown menu.

AV53 Full Corrective Actions

Preliminary Corrective Actions	Has Details	Go to Details
Equipment Repair or Replacement	Yes	F2
Reinstatement of Person Involved	Yes	F2
		F2
		F2

Additional Full Report Corrective Actions	Has Details	Go to Details
	Yes	F2
		F2
		F2

Comments

PrevPg CtrlG NextPg CtrlW Index CtrlF Next Esc Home F11 Menu F12

Full Report Investigators

On this panel, identify the individuals who carried out or participated in the full investigation by selecting F2 to search and select. A calendar is provided to select the date signed by the selected individual. Additional fields are provided for text entry other relevant workplace parties that may have been involved in the investigation.

AV54 Full Report Investigators

Persons who carried out or participated in the full investigation

	First Name	Last Name	Job Title	Signature	Date signed
Employer Rep.					
Worker Rep.					
Other Rep.					

Other relevant workplace parties

Company name: _____ Contact person: _____ Contact number or email address: _____

PrevPg CtrlG NextPg CtrlW Index CtrlF Next Esc Home F11 Menu F12

Review & Send Full Investigation

When selecting Review & Send Full Inve(stigation) from the sidebar, the system opens an eight page report which has been auto-filled based by the data entered on previous panels. If required, that information can be revised or if blank, data can be entered on the report. Once revised or entered, that data will update the associated panel in which the field resides. Once complete, select **Submit – F5** to send an email with report attachment to the designated Safety Committee. Due Dates (Targets) associated with the completion of this report will be marked Done.

Employer Incident Investigation Report (EIIR)

Please refer to the companion quick guide for assistance completing the investigation and this form.

1. Employer's Information

Full/Final Investigation Report Due

Employer's Name (legal name and trade name) Parklane Demo System		
WorkSafeBC account number 1234567890	Operating Location number 853	
Employer's head office address 1234 Grand Ave.		
City Kitchener	Province ON	Postal code L7P 1J6
Employer's representative's name Lisa Sheehan		Phone number (include area code) 519-765-3386
Email address		

2. Injured persons

Last name	First name	Job title
a) JACKSON	TOM	ASSOCIATE
b)		
c)		
d)		

Page 1 of 8

Submit - F5

Page Down

Close - F12

Full Report

The Parklane System <noreply@parklanesys.com>

Sent: Fri 2019-06-14 2:37 PM

To: Sara Kane

Message SARA_AV1A_14363937.pdf (170 KB)

Incident Investigation # : 0000011

Date of Incident : 01 Apr 19

The following action was taken in the Parklane System.

You have received the attached Incident Investigation because you are a member of the Plant Safety Comm committee

Please refer to the attached PDF for further details.

Thank you.

Please note that we are unable to respond to any replies to this email.

Other

Other

Due Dates (Targets)
 Comments
 Document Folders
 Document Links
 Forms

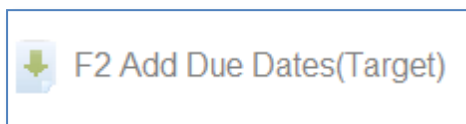
Due Dates (Targets)

AV47 Due Dates (Targets) F2 Add Due Dates (Target)

	Date	Time	User Id	SF1	Task	Done	View
1	04/04/2019	07:30	SARA		Preliminary Investigation Report Due	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2	06/04/2019	07:30	SARA		Interim Corrective Action Report Due	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3	08/04/2019	07:30	SARA		Full/Final Investigation Report Due	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4	01/05/2019	07:30	SARA		Full/Final Corrective Action Report Due	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5	18/08/2023	09:00	SARA		Review and Close	<input type="checkbox"/>	<input type="checkbox"/>

Change User F9
 Date Sort F3
 Outstanding F4
 Show All F7
 Overdue F8

A drop down calendar allows an easy method to enter the due dates of the upcoming tasks. The first four tasks are pre-populated and others can be added through the selection of the **F2 Add Due Dates (Target)** button.



August 2023

S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

2023
 Today
 Cancel

Comments

A 2500 character text field is provided to include any general comments that are applicable to the incident. The date and user are pre-populated and fields are also available when changes are made.

CTM1 General Comments

Date
 15/08/2023

Entered
 SARA
 15/08/2023
 15:03

Document Folders

A panel is provided to allow the linking of a folder where documents pertaining to the incident are stored.

Document Links

If the relative documents to this incident are in multiple places, you can link them to the incident through the use of the Document Links panel. A document file can be a Word document, a PDF, or any paper document or image that has been scanned into your computer. Using the process here, the document is copied from your computer to a Parklane folder. Once the document has been linked you may return to this screen and review it anytime.

No.	User	Date	Origin	Doc Date	Description
1	SARA	15/08/2023	Forms	15/08/2023	Preliminary Report
2					
3					

Forms

Several forms are available and can be printed or a PDF can be created for storage or print. Because the amount of information that the forms contain, the full screen is used, hence you will not have access to the sidebar menu or other tasks while this panel is active.

AV48 Forms

Click on the form from the list below.
 Note: The amount of information required for these forms, in some cases, is immense. Therefore these forms use the entire screen. You will not have immediate access to the sidebar or other tasks until you exit from the form and return to this page.

Important:

Once you have created a new form or updated an existing one, by clicking on "print", a copy of the form will automatically be created in Document Links.

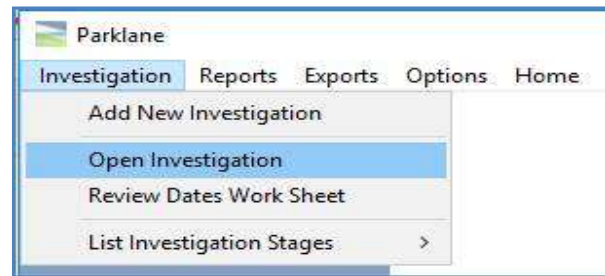
This will preserve a copy of all forms created for future reference.

Using the "Print" provides you with a historical record of all forms associated with this investigation including a printable copy (pdf) of each.

Once you have created a new form or updated an existing one, by clicking on **Print** a copy of the form will automatically be created in the Document Links panel. This will preserve a copy of all forms for future reference. Using the **Print** feature provides a historical record of all forms associated with the investigation including a PDF copy of each.

Open an Investigation

To open an investigation, select **Open Existing Investigation** from the sidebar or **Open Investigation** from the Investigation drop down menu.



There are several options provided to open an investigation.

AV12 Open Incident Investigation

Incident Investigation Number

Get last Incident Investigation accessed by this user
F3 Key 11 Incident Date 01 Apr 19 Injured Worker JACKSON, TOM

By Safety Committee

By Injured Worker **F4**

By Supervisor **F7**

By Department **F8**

Worksite **SF5**

Incident Investigation Start Date **Stop Date**

-----OR-----

☐ Check to List all Supervisor Investigations

☐ Closed ☐ Open ☐ Both

Go

Enter number and click on Go. Or enter a date range and/or Close/Open/Both and click on Go to see a list of records that matches the criteria. You may then select the desired record from the list.

Exit F12

Selecting the Go option will provide a list of incident investigations. Double click on the chosen record to open.

AV13 List of Incident Investigation							Company Name
AI#	Date	Type	Injury	Injured worker	Inj. Type	Link	Folder
1	04 Jul 16	Lost Time	RT WRIST STRAIN	ABRAHAMS, PETER	Injury		
2	11 Aug 16	Lost Time	RT GROIN	ABRAHAMS, PETER	Injury		
3	24 Aug 16	Lost Time	LT KNEE CONTUSION	ANGER, SANDRA	Injury	Link	
4	03 Feb 16	Lost Time	LOW BACK STRAIN	ABRAHAMS, PETER	Injury		
5	15 Mar 18	Lost Time	RT KNEE STRAIN	ANDERSON, JENNIFER	Injury	Link	
6	23 Apr 18	Lost Time	FRACTURED LT UPPER LEG	HALYARD, AMANDA	Critical	Link	
7	06 Apr 18	Lost Time	LT KNEE STRAIN	BENSON, JOAN	Injury		
9	09 May 18	Lost Time	Sprain Lt Thumb	ADAMS, GREG	Injury	Link	
10	06 Apr 18	Lost Time	KNEE LT STRAIN	BENSON, JOAN	Injury	Link	
11	01 Apr 19	Lost Time	BACK LOW STRAIN	JACKSON, TOM	Injury	Link	

As the system generates a number for each incident investigation created, using that number provides quick access to an existing record.

Once the investigation has been opened, the full sidebar menu will become available to review the various panels of the record.

Preliminary Investigation
Description
Preliminary Description
Initial Medical Treatment
Reported & Witnesses
Interim Corrective Action
Type of Occurrence
Additional Details
Preliminary Investigators
Review & Send Prelim Inv
Full Investigation
Full Cause of Incident
Full Incident Description
Full Corrective Actions
Full Report Investigators
Review & Send Full Invest
VMB Audit
Other
Due Dates (Targets)
Comments
Document Folders
Document Links
Forms

Close an Investigation

When the investigation is completed, return to the **Description** panel and mark the investigation closed by selecting the **Closed** check box and completing the **Closed Date** field.

AV41 Description

Select Incident View Incident: F5 Delink Incident: SF1

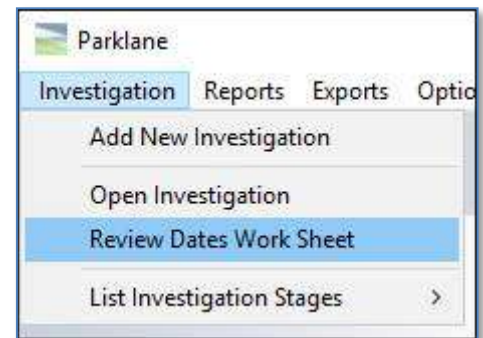
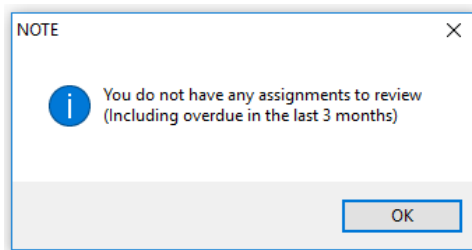
Closed ☒ Closed Date 02/08/2023

Print Draft

Review Dates Work Sheet

The Review Dates Work Sheet is accessible from the Investigation dropdown.

If there are no current assignments to review, or if there are none overdue in the past three months you will receive this notice.



If there are assignments that are due they are shown on the next panel, and can be further sorted by the appropriate due time frame, including upcoming weeks or through a range of dates, or on a particular date in the future.

AV39 Your Activities

Assignments that are due today

	Date	Overdue	AI-No.	Injured Worker	Activity	Done	View
1	15/08/2023	<input type="checkbox"/>	13	KELLY, BRENDA	Review for Closure	<input type="checkbox"/>	<input type="checkbox"/>

F1 Due today
 F2 Due this week
 F3 Due next week
 F4 Due in 2 weeks
 F5 Due in 3 weeks
 F6 Overdue
 Due between and
 Go F6
 Due on
 Go F7
 Exit F12

Reports Available In Incident Investigation

Reports

V1B	Multiple Injury Investigation
V1C	Injury by Location
V1D	Injury by Department
V1E	Injury by Supervisor, Contractor
V1F	List By Managing Staff
V1G	List By Corrective Action
V1H	List By Cause
V1J	List By Type
V1K	List By Seriousness of Injury
V1M	Link Incident to Investigation
V1N	Corrective Action Details
VLA	Accident Investigation Responses

Options

VMD audit Report

Graphs

VHA	Investigation Status Report
VHB	Target Dates Report
VHC	Incident/Investigation Statistics
VHD	Corrective Actions

Exports

V2A	Multiple Injury Investigation
V2B	Type & Cause & Corr Actions
V2C	Reported & Witnesses
V2D	Investigation Details
V2E	Investigation Type Cause & Root
V2F	Investigation Corrective Actions
V2G	Incident / Investigation Link
V2H	Detailed Incidents Log

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