

PROWOOD™

"NEAR MISS"

The employee should fill out the Near Miss Form, making sure all fields are complete and accurate.

NEAR MISS REPORT			
This form should be used to report and investigate near-misses. A near-miss is an unplanned event that did not result in injury, illness, or property damage but had the potential to. Pictures and additional data should be included if available.			
Date of event:		Time:	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.
Dept/Area:		Supervisor:	
Name(s) of employees/ witnesses:		Job Title:	Seniority:
Employees/ witnesses comments (Use back of sheet if necessary):			
Description of event (include tools, equipment, environment, processes, etc.):			
Possible cause of event:			
Similar or prior incidents?			
Type of damage that could have occurred:			
Type of injury that could have occurred:			
Potential for recurrence (circle one):		Potential severity of injury (circle one):	
1 = High frequency (daily or every other day)		1 = High severity (death, amputation, paralysis)	
2 = Medium frequency (weekly)		2 = Medium severity (fracture, laceration, sprains)	
3 = Low frequency (monthly or rarely)		3 = Low severity (minor cuts, bruises, first-aid)	
Priority (add the numerical value of the above items): _____ + _____ = _____			
<input type="checkbox"/> High priority = 2 or 3		<input type="checkbox"/> Lower priority = 6	
<input type="checkbox"/> Medium priority = 4 or 5			
Action plan to prevent similar incidents:			
<input type="checkbox"/> Maintenance Request <input type="checkbox"/> Policy change <input type="checkbox"/> Process change <input type="checkbox"/> Training/ retraining <input type="checkbox"/> New tool/ equip. <input type="checkbox"/> Disciplinary action <input type="checkbox"/> Incentive change <input type="checkbox"/> Other			
Completed by:		Date:	

Updated on 12/2/2025

Upon completing this form, deliver the paperwork to William Wallace in Safety.