

ACCIDENT INVESTIGATIONS

INVESTIGATING AND REPORTING A WORK-RELATED ACCIDENT

Accidents do not just happen; they are caused either by an unsafe act and/or an unsafe condition or a combination of the two. In some cases the person performing the unsafe act does not realize just how serious the consequences can be. In most cases, an unsafe condition or improper use of a tool is the cause of an accident.

Investigations of accidents and incident are necessary, not to set blame but to primarily determine the cause or causes and to do everything within reason to preclude the same thing from happening again. Incidents, which could develop into an accident, are part of the investigation scheme to prevent such occurrence.

An accident investigation must be conducted for any incident/accident. The report must include information on the person injured, a complete description of the incident/accident, a statement of what caused or might have caused the incident/accident and any corrective action that has been taken or that should have been taken to prevent recurrence.

Before actually beginning an investigation of a work-related accident or incident, the supervisor/investigator should be thoroughly familiar with "EMPLOYEE REPORT OF INJURY/ILLNESS" form. After affirming that all necessary and appropriate steps have been taken to provide medical assistance to the injured, the supervisor will complete the following steps in investigating the accident:

1. Survey the accident scene for information. Gather or note any objects that might have contributed to the accident. Take whatever interim action is needed to prevent recurrence of the incident until permanent action can be formulated and implemented. It is the responsibility of the supervisor to recommend and initiate corrective action. Check equipment being used (e.g., computer, lawn mower, copier, power tool, etc.), to determine if the equipment is functioning properly. If there is any question about the equipment, take it out of service until it can be assured the equipment is safe.
3. Get names, addresses and phone numbers of all witnesses. Witnesses, including the person or persons involved, if they are physically capable, should be asked to give a written statement. If not, take an oral statement from them. Statements should provide a description of what happened; what activity was taking place; what tools, if any were in use and any other contributing factors. Witness(es) should be informed that the investigation is intended primarily to determine the cause or causes to determine corrective action and not to place blame.
4. Complete "EMPLOYEE REPORT OF INJURY/ILLNESS" form and promptly forward it to Grace Spangler at the district office.

5. Repeat accident patterns, whether by persons or circumstance should be noted, investigations, and corrective actions identified.

Examples:

Same Individual: Employee slipped and fell at the same location a week ago

Same Operation: Another worker was involved in an accident performing the same operation several days ago.

As result of the investigation, the supervisor/investigator should be able to state: an opinion as to how the accident occurred; if an unsafe act and/or condition was a factor in the accident; what interim actions have been taken to avoid recurrence; if any permanent action is necessary and a recommendation for any future action such as training, changes to procedures and/or environmental factors.

An accident is an occurrence that results in injury or property damage. All personal injuries should have an Injury/Illness Loss Investigation Report and Employer's Report of Injury completed.

An incident is an occurrence that could have resulted in an injury or property damage; or could have had an effect on implementation on the safety programs. Policies and procedures. A narrative of the incident should be sent to the Risk Control Contact.

CASE NO:	ILLNESS/INJURY LOSS INVESTIGATION REPORT <i>Colleton County School District</i> _____ <i>School</i>		
DATE OF INJURY/ILLNESS/LOSS:	NAME OF INJURED:	IMMEDIATE SUPERVISOR:	
1. DESCRIBE HOW THE ACCIDENT OCCURRED.			
<i>IDENTIFY THE DIRECT AND CONTRIBUTING CAUSES OF THE ILLNESS/INJURY</i>			
1. Was the employee made aware of hazards and proper safety procedures associated with the task prior to the accident. (Explain)			
2. What mechanical, physical or environmental conditions contributed to the accident (broken equipment, poor lighting, noise, material slippery surfaces, lack of warning signs or posted directions, etc.)			
3. What act(s) by the injured and/or others contributed to the accident (wrong tool or equipment, improper position or placement, work rule failed to follow instructions, etc.)			
4. What personal factors contributed to the accident (improper attitude, fatigue, inattention, substance abuse, etc.)			
5. Was the accident the result of failing to wear personal protective equipment? (Explain)			
6. What corrective action(s) has been or will be taken to prevent a recurrence of this type of accident (repair/modify/replace equipment, training, policies, procedures, etc.)			
7. Who is responsible to implement correction actions?			
INVESTIGATED BY:	DATE:	REVIEWED BY:	DATE:

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Distribution: Grace W. Spangler – District Office