

**GIBSON RISK MANAGEMENT SERVICES**  
**ACCIDENT INVESTIGATION FORM**

**IDENTIFICATION**

**QUALITY SCORE**

Location of Accident: \_\_\_\_\_ Employer's Premises: Yes No  
Date of Accident: \_\_\_\_\_ Time \_\_\_\_\_ Date Reported: \_\_\_\_\_  
Name of Injured Individual: \_\_\_\_\_ Employee Non-employee  
How long has the employee been at current job assignment? \_\_\_\_\_  
Date of Employment: \_\_\_\_\_ Job Title or Occupation: \_\_\_\_\_  
What property was damaged? \_\_\_\_\_ Owned by: \_\_\_\_\_  
Witnesses to Incident: \_\_\_\_\_

**RISK POTENTIAL**

**Severity:** Major Serious Minor      **Frequency:** Frequent Occasional Seldom

**DESCRIPTION**

Description of Events:

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**SYMPTOMS**

Describe Unsafe Acts/Conditions that Contributed:

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**ROOT CAUSES**

Summarize Any Root Cause Leading to the Accident:

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**CORRECTIVE ACTION**

Corrective Actions: What has and/or should be done to prevent re-occurrence (who is responsible for action):

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Signature of Investigator: \_\_\_\_\_ Date: \_\_\_\_\_

**POSSIBLE SYMPTOMS (not all inclusive)**

UNSAFE ACTS		UNSAFE CONDITIONS
Operating without authority	Failure to lock-out	Inadequate guard / safety device
Failure to make secure	Improper placement of material	Defective tools or equipment
Operating at unsafe speed	Improper lifting/judgment	Poor housekeeping
Failure to warn or signal	Horseplay	Protruding object
Making safety device inoperable	Under influence alcohol / drugs	Fire / explosion hazard present
Removing safety devices	Following too close	Congestion / inadequate clearance
Using defective equipment	Failure to obey warning signals	Environmental conditions
Failure to use PPE	Failure to obey safety procedure	Improper workstation design

**POSSIBLE ROOT CAUSES (NOT ALL INCLUSIVE)**

- Inadequate leadership/supervision (i.e., *poor instruction, orientation, training*, wrong person for task; inadequate feedback)
- Inadequate work standards (i.e., *inadequate development, communication and/or maintenance of standards, policies and procedures*)
- Inadequate engineering (i.e., inadequate consideration of ergonomics, inadequate design criteria, inadequate *assessment of loss exposures*)
- Ineffective motivation (i.e., improper production incentives, inadequate performance feedback; *improper supervisory example*)
- Physical stress (*fatigue due to demands*, task duration or lack of breaks; temperature extremes; health hazards)
- Inadequate maintenance (i.e., *inadequate plan or execution of maintenance and/or repairs*)
- Inadequate tools / equipment (i.e., *inadequate assessment of needs*; inadequate maintenance and/or repairs)

**REVIEW**

Reviewer's assessment of symptoms, root causes, and corrective actions:

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RECOMMENDED CORRECTIVE ACTION:	COMPLETION DATE / INITIALS:
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Reviewer's Signature

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Title

\_\_\_\_\_  
Date of Review