

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:

SYMPTOMS

Describe Unsafe Acts/Conditions that Contributed:

ROOT CAUSES

Summarize Any Root Cause Leading to the Accident:

CORRECTIVE ACTION

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

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:

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

Title

Date of Review