

Incident Investigation Form

White Settlement ISD

INCIDENT INFORMATION

Date of Accident:	Time:	Day of Week: S _ M _ T _ W _ T _ F _ S _	Shift: 1_2_3_	Department:
Specific Location of Accident:				School Property: Y_ N_

INJURED EMPLOYEE DATA

Name:		Address:		
Age:	Phone:			
Job Title:		Supervisor's Name:		
Length of Employment with District:		Length of Employment at Job:		
Employee Classification: Full Time _ Part Time _ Contract _ Temporary _				
Nature of Injury	Bruising	Dislocation	Other (specify)	Injured Part of Body:
Strain/Sprain	Scratch/Abrasion	Internal		
Fracture	Amputation	Foreign Body		
Laceration/Cut	Burn/Scald	Chemical Reaction		

WITNESSES

Name:	Title:	Phone:
Name:	Title:	Phone:
Name:	Title:	Phone:
Name:	Title:	Phone:

DAMAGED PROPERTY

Property, Equipment, or Material Damaged:	Describe Damage:
	Has equipment been:
	Removed from service - Yes _ No _
Object or Substance Inflicting Damage:	Repaired Yes _ No _
	Other

INCIDENT DESCRIPTION

Describe what happened - Reconstruct the sequence of events leading up to and including the incident
 Attach photos and a sketch of the area where the incident occurred. Note any causal factors on the sketch

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ROOT CAUSE ANALYSIS (Mark all that apply)

Improper work technique	Poor workstation design or layout	Lack of written procedures or policies
Safety rule violation	Congested work area	Safety rules not enforced
Improper PPE or PPE not used	Hazardous substance	Hazards not identified
Operating without authority	Fire or explosion hazard	PPE unavailable
Failure to warn or secure	Inadequate ventilation	Insufficient worker training
Operating at improper speeds	Improper material storage	Insufficient supervisor training
By-passing safety devices	Improper tool or equipment	Improper Maintenance
Guards not used	Insufficient knowledge of job	Inadequate supervision
Improper loading or placement	Slippery conditions	Inadequate job planning
Improper lifting	Poor housekeeping	Inadequate hiring practices
Servicing machinery in motion	Excessive noise	Inadequate workplace inspections
Horseplay	Inadequate guarding of hazards	Inadequate equipment
Drug or Alcohol Use	Defective tools or equipment	Unsafe design or construction
Unnecessary haste	Insufficient lighting	Unrealistic scheduling
Unsafe act of others	Inadequate fall protection	Poor process design

Other:

INCIDENT ANALYSIS

Using the root cause analysis above explain the cause of the incident in as much detail as possible.

Could incident have resulted in more serious outcome?	What is the likelihood this incident could recur? High _ Medium _ Low _
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CORRECTIVE ACTIONS

Describe actions to be taken to prevent recurrence:	Due Date	By Whom	Completed

REPORT COMPLETED BY

Name: _____ Date: _____
Title: _____
Signature: _____