Standards of Practice
Report of Accidents, Incidents, and Near Misses

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I. PURPOSE

To provide specific guidelines for the timely reporting and investigation of all incidents involving personal injury accidents, near misses, unsafe acts and property damage involving College of Agriculture (COA) employees and student workers.

II. SCOPE

This procedure applies to COA employees and students that may be directly or indirectly involved in a personal injury accident, incident or near miss that may or may not involve bodily injury.

III. CONSEQUENCES OF DEVIATION

This procedure serves as an essential element in identifying and managing risk to staff and students associated with accidents, incidents or near misses. Ignoring this procedure could result in a more serious outcome in the future.

IV. PROCEDURE FOR INVESTIGATING ACCIDENTS, INCIDENTS AND NEAR MISSES

Immediately upon notification of any accident, incident or near miss incident that did or could have resulted in an injury or property damage, the manager/supervisor of the employee should:

- Verify that the scene is secure and does not pose a hazard to other personnel in the area
- Gather as much information as possible from the scene, employees and witnesses
- Take pictures
- Complete the Accident/Incident/Near Miss Investigation Form (see Appendix A) and return it to the COA EH&S Office.

The INVESTIGATION should determine the following:

- The cause(s) of the accident, incident or near miss
- The relevant events leading up to the accident, incident or near miss
- Unsafe conditions which contributed to the accident, incident or near miss
- Actions of the employee which contributed to the accident, incident or near miss
- Witnesses

- Recommendations to prevent a similar accident, incident or near miss from recurring in the future.

V. TRAINING

Accident, incident and near miss reporting should be included in new hire orientation and periodic refresher training for staff and student workers.

VI. RELATED DOCUMENTS & TOOLS

KSU Accident/Injury Reporting Program
KSU Accident Report KWC 1101-A

Revision Log			
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APPENDIX A
ACCIDENT/INCIDENT/NEAR MISS
INVESTIGATION FORM

Revision: 1.4
06.01.16

PURPOSE: The reason for investigating an accident, incident or near miss is to determine: the cause(s) of the incident, to identify any risks, hazards, systems or procedures that contributed to the incident, and to recommend corrective action to prevent similar incidents.
SCOPE: An accident/incident/near miss investigation should answer the WHO, WHERE, WHEN, WHAT, WHY and HOW questions with regard to an incident, no matter how minor.
DESIRED OUTCOME: Actions taken to mitigate risk resulting from the reporting of accidents, incidents and near misses can create a safer working environment for all employees.

Check Box(s): ☐ Accident   ☐ Near Misses   ☐ Unsafe Equipment   ☐ Property Damage

People Data	
Employee's Name:	Today's Date:
Department:	Job Title:
How long have you been employed at KSU?	☐ Full Time ☐ Part Time ☐ Student Worker
Location of accident/incident/near miss (Building, Field Site):	
Date of accident/incident/near miss:	Time of accident/incident/near miss: ☐ AM ☐ PM
Supervisor's Name:	Signature:

Incident Data/Contributing Factors
How did the accident, incident, or near miss occur?
What was the employee doing just prior to the incident (job task, include any tools or machinery used)?
What body part was injured? What type of injury occurred? Example: index finger, right hand, superficial laceration

Weather conditions at time of incident:	
Visibility/Lighting (e.g., poor, work lights):	
Type and condition of floor surface (e.g., concrete, wet surface):	
What PPE was required for the job?	
Was PPE being utilized?	☐ Yes ☐ No
Was there any damage to property or equipment? Explain:	☐ Yes ☐ No
Name(s) of witness(es):	Phone #:
Name(s) of witness(es):	Phone #:

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Causes

PLEASE CHECK ALL OF THE FOLLOWING WHICH CONTRUBUTED TO THE ACCIDENT, INCIDENT OR NEAR MISS

Direct/Immediate Causes (Supervisor complete)

☐ Defective Tools/Equipment	☐ Unaware of Potential Hazard	☐ Unauthorized Equipment Use
☐ Unsafe Work Procedures	☐ Lack of Safety Devices	☐ Guard Removed/Needed
☐ Insufficient Procedures	☐ Not employees Normal Job	☐ Poor Housekeeping
☐ Not Following Procedures	☐ Improper Use of Tools	☐ Violated Safety Rule(s)
☐ Improvising/Shortcuts	☐ Proper Tools Not Available	☐ Not Wearing Proper PPE

Root Causes

☐ Employee Unaware of Hazard	☐ Failure to Recognize Unsafe Act	☐ Equipment Maintenance
☐ Complex Procedures	☐ Poor Attitude	☐ Weather Condition, e.g., Rain
☐ Unclear Instruction	☐ Personality Conflict	☐ Excessive Production Pressure
☐ Inadequate Training	☐ Lack of Training	☐ Communication Error
☐ Inadequate Comprehension	☐ Job Design/Workstation Layout	☐ Lack of Employee Cooperation
☐ Lack of Skill/Knowledge	☐ Lighting	☐ Other, Please Explain:

Corrective Action

What engineering control(s), training, or program/policy changes are recommended?

What remedial training was given?

Was a work order submitted for solution(s)?
Please provide details of request including job/project number and deadline for completion.

What action was or should be taken to prevent recurrence?
Describe any corrective or remedial actions taken to mitigate or help prevent recurrence.

Correction Action Completed?	☐ Yes ☐ No	If no, please explain:

Investigated By:	Date:
Reviewed By:	Date: