

# Weld County School District RE5J Management Accident Investigation Report

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| <ul style="list-style-type: none"> <li><input type="radio"/> Injury – First Aid Only</li> <li><input type="radio"/> Injury – Medical Treatment</li> <li><input type="radio"/> Property Damage</li> <li><input type="radio"/> Decline Treatment – Record Only</li> </ul> | <b>Injured Employee</b>    | <b>Occupation</b> |
|   | <b>Assigned Department</b> | <b>Supervisor</b> |

<b>Date &amp; Time of Incident</b>	<b>Date Incident Reported</b>	<b>Incident Location</b>	<b>Witnesses</b>
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**SUMMARY** – Describe the incident (where and how did accident occur) (photos and/or sketches may be necessary). Nature of injury and what part of body was affected:

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**ANALYSIS** – Describe conditions that led to the incident (environmental conditions, tools/equipment used or task being performed).

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**RECOMMENDATIONS** – Describe any controls and/or corrective procedures that may prevent the recurrence of similar incidents.

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**ACTION TAKEN** – Describe measures taken by management to improve the system (employee training, new equipment, changes in safety policies, changes in operating procedures, etc.) and to prevent occurrence of similar incidents.

**Safety Violation:** Yes \_\_\_\_\_ No \_\_\_\_\_

Report completed by: \_\_\_\_\_ Date: \_\_\_\_\_

## >> Sample Accident Investigation Questions

### **HOW**

How does the injured employee feel now?  
How did the injury occur?  
How could this accident have been prevented?

### **WHO**

Who was injured?  
Who saw the accident?  
Who was working with the injured person?  
Who had assigned the person to the work task?  
Who had trained the person on the hazards and protective measures for this task?  
Who else was involved?

### **WHAT**

What were the causal factors of the accident?  
What were the injuries?  
What was the person doing when injured?  
What had the person been instructed to do?  
What tools was the person using?  
What machinery was involved?  
What training had been given?  
What specific precautions were necessary?  
What personal protective equipment was being used?  
What personal protective equipment should have been used?  
What will be done to prevent a recurrence?  
What safety rules were in place to prevent this type of accident?  
What safety rules were being followed?  
What were the environmental conditions (e.g., lighting, floor surface, etc.)?

### **WHEN**

When did the accident occur?  
When did the person start this task?  
When was the person assigned to this department?  
When had the supervisor last checked on the job progress?

### **WHY**

Why was the person injured?  
Why did the person do what he/she did?  
Why wasn't protective equipment used?  
Why weren't specific instructions issued?  
Why didn't the person check with the supervisor when he/she noted things weren't as they should be?  
Why did the person continue to work under these circumstances?

### **WHERE**

Where did the accident occur?  
Where was the person at the time of the accident?  
Where was the supervisor at the time?  
Where were fellow workers at the time?

## **Workman's Compensation Process**

Employee completes the First Report of Injury form which can be found on the districts website. Once the form is completed email to [annette.miller@weldre5j.org](mailto:annette.miller@weldre5j.org). The employee must designate which workman's comp provider they will be going to.

The district office (Annette) submits the workman's comp claim. The employee will receive an email from RAS who is our Workman's Comp provider. This information needs to be taken with the employee to their appointment. Annette will work with the Workman's Comp claim's representative to provide any earning information when contacted.

### **Employees Responsibilities:**

Once the claim has been filed the employee is responsible for getting any and all providers their claim number and Workman's Comp provider (RAS). The employee is responsible for working with their designated Workman's Comp claim representative.

Workman's comp does not pay the employee until they have missed three days of work. The employee can use their leave during these three days. The employee needs to provide to their workman's comp representative any hours missed from work after the 3<sup>rd</sup> day.

The employee is responsible for giving their building principal and Annette in the Human Resource department a copy of their Physicians report every time they are seen by a workman's comp doctor.

The employee is responsible for following the restrictions stated on the physicians report.

If the building principal cannot accommodate the restrictions that fall within the scope of the employee's position, the employee will be off work until they have been released or until accommodations can be made.

Employee will receive compensation from Workman's Compensation as stated in the District policy. Compensation is 2/3's gross wage, as they do not take out taxes.

If the employee has any issue with their workman's compensation doctor, they will work with their workman's compensation claim representative to find a new provider.

If the employee has any issues with the process or if they are not receiving payment, they will contact Annette in the Human Resources department for assistance.

### **Principal's Responsibilities:**

Complete Supervisors forms regarding employee's injury. Follow-up with employee to make sure they are receiving the Physicians report each time the employee has an appointment. Review form to see what restrictions have been made and make determination if you can accommodate the restrictions listed within the scope of the employee's position.

If they cannot, please contact Annette in HR to discuss.

The building principal will work with Workman's Comp claims representative regarding any time the employee has missed from work and will provide the claim representative with the date the employee returned to work and if the date of return was a full day or half day. The building principal will ensure the employee is putting in dock days if they have not been able to work.

Provide any missed time to Annette and to the assigned workman's comp representative.

Notify Annette once the employee is back to work full time.