

## INCIDENT INVESTIGATION CHECKLIST

All incidents are to be investigated. Area management must be included in this process. The objective of investigation is to identify facts and **modify management systems** to prevent a recurrence. **It is critical not to attribute blame.**

**This Checklist will assist managers gather facts and conduct a thorough investigation of any incident occurring in company work activities. An Incident includes all work related occurrences such as Near Misses, Injuries and Diseases.**

The incident reporting process is detailed in SOP 104, Appendix 3.

<b>Incident Identification:</b>	
Short Description of Incident:	
Incident Location:	
Incident Date:	

<b>Investigation Team Members:</b>			
Supervisor of Area where incident occurred:		Phone	
OH&S Representative for Area:		Phone	
OH&S Specialist:		Phone	
Technical Specialist:		Phone	

<b>Investigation Summary:</b>	
Start Date:	
Statutory regulations for activity:	
EGW SOPs applicable:	
Documented work instruction for activity?	
Completion Date:	

**Notes:**

- Photographs are to be taken of area/equipment from various angles.
- Section 39 of the OHS Act 2004 requires that an incident site be left undisturbed in the event of a reportable incident unless advised otherwise by WorkSafe Victoria. Exceptions to this include steps necessary to
  - protect the health or safety of a person;
  - aid an injured person involved in an incident; or
  - make the site safe or to prevent a further occurrence of the incident
- Record serial/registration numbers of equipment concerned.
- Sketch location of incident below or add additional sheet.

**LOCATION SKETCH** (show movement direction, distances, relative locations, etc.)

**Step 1: FACT FINDING** *(to be completed at the scene of the incident)*

<b>WHO?</b>	
Who was involved in the incident?	
Who saw the incident?	
Who was working with the involved person?	
Who instructed and/or assigned the job to the person?	
Who else was involved?	
Who has information on events prior to the incident?	
Who assessed the risks involved in the job?	
Who was responsible for implementing risk controls?	
Who checked statutory knowledge of involved person? <i>(if applicable)</i>	
Who checked safety of equipment/plant prior to work commencing?	

<b>WHERE?</b>	
Where did the incident occur?	
Where did the damage occur?	
Where was the supervisor at the time?	
Where were the witnesses at the time?	

**Step 2: INCIDENT PROCESS DESCRIPTION**  
*(to be completed after the facts have been gathered)*

<b>How did the incident occur?</b> <i>(list steps that led to incident)</i>	
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	
<b>5</b>	

<b>How did the injury occur?</b> <i>(list steps that led to injury)</i>	
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	
<b>5</b>	

**Step 3: IDENTIFY ESSENTIAL CONTRIBUTING FACTORS**  
*(refer to following table of potential contributing factors)*

List possible contributing factors.	
1	
2	
3	
4	
5	

**POSSIBLE CONTRIBUTING FACTORS**

*(This list provides the more common contributing factors; it is not an exhaustive list.)*

ENVIRONMENT		DESIGN	
Slippery surface	Rain	Equipment	Protective equipment
Rough terrain	Low light levels	Vibration	Tools
Dust/particles	Fungi	Posture	Guarding
Fumes	Bacteria	Posture	Plant
Fibres	Virus	Force _____kg	Furniture
Liquid or chemical	Insects	Weight _____kg	Material
Mist	Radiation solar	Machinery	Substance
Noise	Radiation other	Layout	
Heat	Mud		

SYSTEMS		HUMAN	
Written job procedures	Hazard detection	Inexperience	Inattention
Training (induction)	Licences	Fatigue	Illness
Supervision	Endorsements	Understanding	Relationship
Instruction	Hours of work	Procedures	Language
Maintenance	Work demands	Followed	Lifestyle
Storage or stacking	Movement	Disability	Reflex action
Policy/manuals	Repetition	Misconduct	
Housekeeping	Required equipment available		

***Essential Contributing Factors are those that satisfy the question “Would the incident have still occurred if this factor had not been present?”***

List all essential contributing factors.	
1	
2	
3	

## Step 4: ANALYSE THE RISKS

How?	
How could the incident have been avoided? ( <i>Subject to Job Analysis</i> )	
How could the injury have been avoided?	
How could better job design be achieved?	
How could the supervisor have prevented the incident?	
How could better equipment design help?	
How can we detect systems failure before it occurs?	
How can we control failure ( <i>minimise consequences</i> )?	

## Step 5: IDENTIFY PREVENTATIVE / CORRECTIVE ACTIONS (refer to the *Hierarchy of Control Table in Attachment 1 and the following list of preventative / corrective actions.*)

### PREVENTATIVE/CORRECTIVE ACTIONS (*Examples*)

Change to induction training	Equipment/machinery modifications	Change to work environment	Other job redesign
Change to ongoing training	Change to work procedures	Equipment/machinery maintenance	Other preventative action

WHAT does the work process do?	
Why do we do this?	
What could we do instead?	
How else could we do it?	



# HIERARCHY OF CONTROL WORKSHEET FOR CORRECTIVE ACTIONS (Attachment 1)

(Refer SOP 103 Hazard Management for further information)

## HAZARD CONTROL ASSESSMENT

Hazard Identified: .....

*The most appropriate control measure for the Hazard Identified is now determined using the Risk Control Hierarchy below.*

### 1. ELIMINATION

Can another work method or piece of plant be used, hence eliminating this hazard?

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### 2. SUBSTITUTION

Can the hazard source be replaced with less hazardous plant or materials. eg replace solvent based paints with water based; will a less toxic pesticide perform the same task; can ladders be replaced by elevated work platforms or scissor lifts; mechanical aids used in place of manual lifting?

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### 3. ENGINEERING CONTROLS

eg. Ventilation of confined spaces or other areas with potentially harmful fumes; fitting warning devices to mobile plant, interlocked guarding, sound barriers.

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### 4. ADMINISTRATIVE CONTROLS

eg. Job rotation, safe work procedures, site safety inspections/audits.

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### 5. PERSONAL PROTECTIVE EQUIPMENT

eg. Respiratory protection, safety harnesses, safety glasses/goggles, hard hats, safety boots, gloves.

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### RECOMMENDED HAZARD CONTROL IS:

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Management Representative: ..... Date: .....

Employee Representative: ..... Date: .....

**Transpose recommended corrective actions to Form 044**