

**MENOMINEE TRIBAL ENTERPRISES
SAFETY PROGRAM**

**ACCIDENT INVESTIGATION
PROGRAM**

ACCIDENT INVESTIGATION PROGRAM

I. PURPOSE

An accident can indicate a weakness within the organization's safety program. Accident investigations should be conducted by trained supervisory personnel to ensure that a comprehensive, objective, and methodical approach is used. The purpose of this program is to define and document the accident investigation program at Menominee Tribal Enterprises. The program defines the responsibilities of all company management and supervisors in investigating the causes of accidents and implementing appropriate corrective actions to prevent similar situations from recurring.

II. SCOPE

The purpose of any accident investigation must be to discover the causes of the accident, and then take corrective action. Several key factors affect accident investigations. The timeliness of the initial report, management's support and assistance in the accident investigation process, and adequate training of all persons who may be part of the investigation are variables that determine the accurateness of an investigation. The accident investigation program/policy must state what must be investigated, when the investigation should take place, why an investigation is taking place and how accident investigations are to be conducted. The implementation of such policies may differ depending on the severity and type of accident.

III. BENEFITS

- Maintains a good worker and management relationship, which shows Management's commitment to the safety program and concern for employees' well being.
- Prevent recurrence.
- To determine direct and indirect costs.
- Meet regulatory worker injury investigation requirements.

IV. ACCIDENT INVESTIGATION

A. Accident Investigators

Persons appointed to investigate accidents should be experienced and able to carry out the investigation in an objective and impartial manner. The supervisor is usually the most qualified investigator, due to his/her familiarity with the workplace and knowledge of the employees involved and their work activities. Depending on the severity of the accident a safety professional could also assist in carrying out the investigation.

Persons conducting the investigations must be trained in such areas as investigation procedures, securing and protecting evidence, and interviewing witnesses. An investigator must not assign blame to anyone, to do so during an investigation would be counter productive to the investigation process and may hamper future investigations.

B. Conducting the Investigation

Accident investigations must be conducted as soon after the incident as possible. When personal injuries are involved, this usually means after medical assistance has been provided and the injured employee has been transported as necessary to a medical facility. However, if an investigation can be started without hampering medical assistance, then it should begin immediately.

1. The first step is to cordon off the accident location to prevent disruption of the accident scene and to protect evidence.
2. Second, witnesses should be located and verbal statements taken. Witnesses must never be interviewed together and should be asked to refrain from discussing the accident with others until such time as a written or a recorded statement can be taken by the investigator or a member of the investigation team.
3. Finally, the investigation scene should then be inspected and photographed from all angles. It is also wise to sketch the accident location. An accident location may have to be visited a number of times as new information or questions arise.

C. Several Steps Which Should Be Followed When Investigating Accidents

- Be prepared. Have appropriate equipment on the job site and readily available (i.e., camera, recorder, tape measure, report forms, sketch pads, etc. (if necessary)).
- Begin investigating the accident immediately after the injured person has been treated, before the scene can be changed and important evidence is removed or destroyed. Look and listen for clues.
- Discuss the accident with the injured person if possible, after first aid or medical treatment has been administered.
- Talk with witnesses, and those familiar with conditions of the workplace before or after the accident. Have these discussions separately. These should happen immediately following the incident and preferably away from the distractions of the work area.

- Probe for small details, which might yield clues to the cause of the accident. Sometimes a clearer account of events can be attained by having the witnesses recite or re-enact the events. Encourage witnesses to give their ideas on how the accident occurred.
- Reconstruct the events leading up to the accident if possible.
- Determine the most probable cause of the accident. Accidents can be caused by four sources: people, equipment, materials, and the work environment.
- Write a detailed, accurate report of the accident and follow the incident/injury/illness reporting procedures.
- Correct any unsafe conditions or procedures discovered during the investigation or advise proper authorities of corrections that need to be made.

D. Securing Evidence

- Evidence should be labeled/tagged.
- Items that could be damaged by weather or otherwise damaged or lost should be secured.
- Evidence that is removed from the accident location must be secure in a protected area, where it will not be contaminated or lost.
- An evidence log, that must remain with the accident investigation file, should list all evidence that has been secured, sketched or photographed. This log should state each type of evidence, how it was secured, where it is located, and who is in control of it.
- When equipment or machinery is involved in an accident it is important to note the exact name, make, model number, serial number, and any additional features.

E. Expert Assistance

It may be necessary to bring in experts from inside or outside of the organization to assist with an investigation. When equipment is involved, a person knowledgeable in its safe operations and design should assist the investigator with an inspection of the equipment. Human Resource Department will develop and maintain a list of consultants with expertise in all areas that pertain to the organization.

G. Creating a File

After an investigation has been conducted, an accident file must be created. This file should contain:

- A narrative of the investigator's findings and pertinent information about all personnel involved in the accident and the investigation process.
- The originals of the statements taken from each witness, photographic logs with photographs, evidence log, sketches, consultant reports, and pertinent product literature.
- All memos, letters, and investigation notes. Inspections and safety meeting reports that may relate to the accident or to the investigation should be placed in the file.

The file should be reviewed by upper management. The original must be stored in a secure storage area with other files of this type. As any future information develops regarding an accident, the file must be update.

V. ACCIDENT RECORDS

Examining the past safety performance of the organization can be very informative. The following safety performance information will be reviewed and tracked.

A. Experience Modification Rates

Every organization receives an experience modification rate (EMR) on their workers compensation insurance premium. An EMR can be influenced by a number of factors. These factors include size, payroll, and insurance rate. The lower the EMR value the better. According to the Business Roundtable, values can range from .3 to 2.0 or higher. One (1.0) is considered average. Values below 1.0 mean the company is getting a discount on their insurance premium while over one mean the company is paying extra for a worse than expected safety performance.

B. OSHA Incidence Rate

The OSHA Incident Rate is a better indicator of past safety performance than EMRs. Incidence rates are all based on 100 full time equivalents (200,000 employee hours) so that gives a common base for comparison. To calculate the incident rate, one would do the following:

$$\frac{\text{(Number of OSHA Recordable Accidents)} \times \text{(200,00 man-hours)}}{\text{Total Man-hours Worked}}$$

This same formula can be used to compare lost workday cases. Just replace OSHA Recordables with Lost Workday Cases. Incidence rates are valuable information, because one can look at the company's safety performance over a number of years. Since everything has been adjusted to 100 full time equivalent employees one can make comparisons of consistent data.

The Bureau of Labor Statistics (BLS) also tracks incidence rates for recordables and lost workday cases. That information is published annually by Standard Industrial Classifications (SIC) Code.

C. Loss Analysis

In addition to looking at the company performance from year to accident trends will need to be looked at. For example is the workers experiencing a lot of eye injuries, burns, back injuries, etc. To do a proper loss analysis different sources of information may have to be looked at including:

- Accident reports filled out at the time of the accident
- Insurance company loss runs
- OSHA log
- Information contained on near hit/incident reports or property damage only type reports may also be helpful.

Identify key types of injuries that want to analyze. Typically companies look at:

- Falls (from elevation)
- Muscle sprain/strains (Look at back injuries. Separate if appropriate)
- Cuts
- Falls (same level), i.e., slips and trips
- Eye injuries

The categories set will vary according to the accident history and the type of work performed. For example, a column for electrical shock may be set up if those type of accidents had occurred. Or leave those accidents in a miscellaneous category because there was only one accident in the last five years.

Look at loss information for at least three years, if not longer to get an idea of accident injury trends.

If one finds several accidents that may involve similar procedures or equipment look at the accident investigation reports for more information. The goal is to see if another accident can be prevented by changing job procedures, using different equipment, providing employee training or other measures.

VI. RECORDING INJURIES ON OSHA'S 200 LOG

All employers must keep a log of work-related injuries and illnesses. However, only injuries of a certain type and severity need to be recorded. OSHA requires this to be accomplished on a particular form, the OSHA 200 Log, and in a specific manner.

A. Rules

An OSHA 200 Log must be maintained.

- The log needs to be kept up-to-date to within 45 calendar days and must be present at all times. (This does not apply to any other OSHA documents or to posting obligations.)
- The totaled log from the previous year must be posted on February 1.
- OSHA logs, both completed and in progress, must be retained for five years.

B. Determining Recordability

In general, four criteria are used to determine a recordable injury case.

1. Was Medical treatment, other than first aid, required?
2. Did the employee lose consciousness?
3. Does the injury restrict the employee's motion or work?
4. Does the injury require the employee to be transferred to another job?

First aid is defined in CFR 1904.12(e) as:

“Any one-time treatment, and any follow-up visit for the purpose of observation, of minor scratches, cuts, burns, splinters, and so forth, which do not ordinarily require medical care. Such one-time treatment, and follow-up visit for the purpose of observation is considered first aid even though provided by a physician or registered professional personnel.”

C. Specific Examples

The following list not all-inclusive.

1. OSHA 200 Recordables
 - Broken Bones
 - Cuts that require sutures, butterfly dressings, sterile strips or antibiotics
 - Any time a medication prescription is written, or given. This excludes any one-time medication dose given during the initial visit.
 - Burns that require medical treatment such as antibiotics, fluid replacement or the removal of dead skin.
 - Admission to the hospital for treatment.
 - Hot, cold or soaking compresses during the second or subsequent visit.
 - Removal of foreign body *embedded* in the eye.
2. OSHA 200 Non-Recordables
 - A negative X-Ray
 - Cuts that only receive first aid (even if the first aid is provided by a nurse or physician).
 - Over the counter medications, suggested by the physician, as a substitute for a prescription drug.
 - Burns that only need first aid treatment (even if the first aid is provided by a clinic).
 - Observation in the emergency room.
 - Hot, Cold, or soaking compresses applied only during the initial visit.
 - Removal of foreign body, not embedded in the eye, by means of irrigation.

VII. MEDICAL AND FIRST AID TREATMENT

A. Medical Treatment

The following procedures are generally considered “medical treatment”.
“Medical treatment” of work-related injuries are recordable:

- Treatment of Infection
- Treatment of second or third degree burn(s)
- Application of sutures (stitches)
- Application of butterfly adhesive dressing(s) or steri-strip(s) in lieu of sutures
- Removal of foreign bodies embedded in eye
- Removal of foreign bodies from wound if procedure is complicated because of depth of embedment, size, or location
- Use of prescription medications (except a single dose administered on first visit for minor injury or discomfort)
- Use of hot or cold soaking therapy during second or subsequent visit to medical personnel
- Application of hot or cold compress(es) during second or subsequent visit to medical personnel
- Cutting away dead skin (surgical debridement)
- Application of heat therapy during second or subsequent visit to medical personnel
- Use of whirlpool bath therapy during second or subsequent visit to medical personnel.
- Positive x-ray diagnosis (e.g., fractures, broken bones)
- Admission to a hospital or equivalent medical facility FOR TREATMENT.

B. First Aid Treatment

The following procedures are generally considered “first aid treatment” (e.g., one-time treatment and subsequent observation of minor injuries). Work-related injuries involving such procedure are not recordable unless they involve loss of consciousness, restriction of work or motion, or transfer to another job.

- Treatment of first degree burn(s)
- Application of bandage(s) during any visit to medical personnel
- Use of elastic bandage(s) during first visit to medical personnel

- Removal of foreign bodies not embedded in eye if only irrigation is required
- Removal of foreign bodies from wound if procedure is uncomplicated and is, for example, by tweezers or other simple technique
- Use of non-prescription medication and administration of single dose of prescription medication on first visit for minor injury or discomfort
- Soaking therapy on initial visit to medical personnel or removal of bandages by soaking
- Application of hot or cold compress(es) during first visit to medical personnel
- Application of ointments to abrasions to prevent drying or cracking
- Application of heat therapy during first visit to medical personnel
- Use of whirlpool bath therapy during first visit to medical personnel
- Negative x-ray diagnosis
- Observation of injury during visit to medical personnel.

VIII. RESPONSIBILITIES

A. **Program Administrator** – Human Resource Manager

The *Program Administrator* is responsible for:

- Administering the program and issuing written materials that support it
- Coordinating all activities related to hazard control, insurance companies and OSHA, state and local regulatory compliance
- Maintaining OSHA recordkeeping on the OSHA 200 Log and Summary of Occupational Injuries and Illnesses
- Reporting of serious accidents that result in fatalities or hospitalization of 3 or more employees to the local OSHA area office within 8 hours of occurrence
- Analyzing accident records to identify program deficiencies
- Scheduling managers, supervisors, and as appropriate, safety committee members for training
- Maintaining training recordkeeping

- Posting the Summary of the OSHA 200 during the month of February

B. Supervisors and Managers

Supervisors and Managers are responsible for:

- Conducting accident investigations within their departments and providing appropriate corrective actions
- Initiating accident investigations immediately upon notification and completing them within 24 hours of occurrence, if they involve an employee injury or illness that requires a physician's care

C. Program Activities

1. General

- All accidents that result in employee injuries, property damage or the probability thereof will be investigated.
- A Company investigation report will be completed within 24 hours of an accident if it involves an employee injury or illness that requires a physician's care.
- The accident investigation will be completed according to the accident investigation procedure.
- Department management will initiate corrective action according to the corrective action plan on the company accident report. Corrective actions that cannot be initiated immediately will be documented in a written report that indicates what will be done, when and by whom. A copy of the corrective action report will be forwarded to the Safety Program Administrator within 5 days of the incident.
- Any accident that results in sending employees to outside medical treatment will be reported to company management and the Safety Program Administrator immediately.

2. Safety Committee

- The Safety Committee will review accident investigations and make recommendations for corrections.
- The Safety Committee will review accident incident and near miss investigations and, when necessary, submit suggestions to prevent future incidents.

3. Training

- All supervisors and managers will be trained and knowledgeable in accident investigation and the safety and health hazards to which employees under their immediate directions and control may be exposed.

4. Recordkeeping

- All accident reports generated shall be kept a minimum of 3 years.
- It's recommended that records be kept indefinitely to maintain the information necessary to provide an adequate history of conditions that have been responsible for accidents and what corrective actions have been taken.
- The Summary of the company OSHA 200 will be posted on the employee bulletin board for the month of February.
- All records shall be kept documenting training for each employee, including employee name or other identifier, training dates, type(s) of training and training provider.

INCIDENT/INJURY/ILLNESS REPORT

Location		Department		Date	Time									
Name		Job Title		Employee ID #										
DOB		Employee Telephone		SEX M F	On-Site Off-Site									
Date of Incident		Date Reported		Reported By										
Alleged Date of Incident														
First Aid Given? Yes No		By Whom?												
Sent to Doctor? Yes No		Dr. Name, Address, Telephone												
Sent to Hospital/Clinic? Yes No		Name, Address, Telephone												
Witness		Department			Ext.#									
Witness		Department			Ext.#									
Witness		(Non-MTE Employee)			Telephone									
Who	What	When	Where	How										
Narrative: (Concise description of the accident, indicating who, what, when, where, and how regarding the accident)														
Property Damage			Nature of Damage											
Cost Estimate			Cost Actual											
Parts of Body: (See Body Part Map)														
Date of Injury Time AM PM			Returned to Work Date Time AM PM											
DATES OFF DUE TO JOB RELATED INJURY:														
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
31	32	33	34	35	36	37	38	39	40	41	42	43	44	45
45 th Day	Rate of Pay		Per Hour		Total Days Off		Work Days Restricted							
Incident Type: Injury or Illness		Unsafe Act (Describe)			Unsafe Condition (Describe)									
Part of Body Code:		Injury/Illness Code:		Location Code:		Claim #		Continue Pay?						
Comments:														

