

James R. Favor & Company
Fraternity and Sorority
Risk Management & Insurance Program
Accident Investigation

Purpose

To assist your chapter in the proper and thorough investigation of injuries and accidents so that unsafe acts or conditions can be identified and corrected.

All accident reports should be completed within 24 hours of the occurrence.

It is important that the team conducting the accident investigation be completely familiar with the conditions of the incident as well as the people involved in order for the investigation to be effective.

Investigation reports must be completed in addition to the First Report of Injury where Workers' Compensation insurance is involved. This should be completed in addition to the administrative liability insurance forms.

The report form should contain the following information:

- School and Chapter
- Date of Accident
- Time of Accident
- Name of Person Involved
- Date of Accident Report
- Employee? (Yes or No)
- If Yes-Job Title/Position
- Duration of Employment
- Witnesses (names, addresses and phone numbers)
- Nature and extent of injury
- How did the accident happen?
- What unsafe acts, conditions, or circumstances caused or contributed to the accident?
- Recommendations: What action needs to be taken?
- What is the status of needed action?
- Will the above action prevent future accidents of a similar nature?
- Was disciplinary action taken or recommended (where applicable)?
- Who investigated the accident?
- Who reviewed the investigation report?

In addition to the completed Accident Investigation Report, a narrative description of the events surrounding the accident should also be developed and submitted immediately to: