

Checklist

Checklist for Investigating Accidents Causing Personal Injury



This checklist is designed for use by employees who investigate any type of accident that occurs on campus or school grounds resulting in personal injury. United Educators has found that good investigation practices can significantly reduce the chance of litigation or strengthen the institution's defense when litigation does occur. Not all the steps outlined in the checklist will apply to every situation; and the checklist should be adapted as appropriate for use at your institution.

As a rule, the first step after any accident should be immediately obtaining medical assistance for injured parties and calling appropriate authorities, such as police or fire responders. Institutions should conduct their investigations and document the conditions at the time of an accident before making any repairs or changes. In addition, investigators should aim to determine the facts surrounding the accident rather than the accident's cause or who is to blame. In doing so, it is important to avoid speculation, be as objective as possible, and focus on gathering evidence instead of drawing conclusions.

① Investigating the Accident Scene and Circumstances

A. All Accidents

Completed?

Immediate Actions at the Scene

1. Secure the scene and prevent unauthorized access during the investigation. ☐ Yes ☐ No
2. Determine the precise location of the accident.
3. Take measurements at the accident scene. ☐ Yes ☐ No
4. Diagram or sketch the scene. ☐ Yes ☐ No

Actions Needed

Actions Needed

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| 5. Take photographs or video. | ☐ Yes ☐ No |
| ▫ Include a measuring tape or other device in photographs to provide perspective | ☐ Yes ☐ No |
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| ▫ Include images of the victim and witnesses indicating the accident location | ☐ Yes ☐ No |
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| ▫ Preserve photographs and video of the incident and scene, including security camera footage | ☐ Yes ☐ No |
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| 6. Take samples, or document presence, of any unusual substances or fluids, such as water on the floor. | ☐ Yes ☐ No |
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| 7. Collect or document the presence of any foreign objects. | ☐ Yes ☐ No |
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| 8. If the accident occurred outdoors, document weather conditions. | ☐ Yes ☐ No |
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| 9. Document footing and lighting conditions. | ☐ Yes ☐ No |
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| 10. Document any unusual sound or noise conditions. | ☐ Yes ☐ No |
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| 11. Determine the number of people who were present, especially if crowded conditions may have contributed to the accident. | ☐ Yes ☐ No |
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| 12. If the accident occurred outdoors, document the type of ground surface, such as grass, artificial turf, or gravel. | ☐ Yes ☐ No |
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| 13. If the accident occurred indoors, document the type of floor surface, such as wood, tile, or concrete. | ☐ Yes ☐ No |
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| 14. Document any surface covering on the ground or floor, such as carpet, mats, or tarps. | ☐ Yes ☐ No |
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| 15. Document whether the surface was level or sloped. | ☐ Yes ☐ No |
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| 16. Document any apparent defects in the ground or floor, such as broken or uneven concrete, warped wood, or torn or loose vinyl. | ☐ Yes ☐ No |
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| 17. If the accident involved stairs, determine whether a handrail and anti-slip strips were present and in good repair and note the condition of the risers. | ☐ Yes ☐ No |

Follow-Up Investigation

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| 18. For accidents occurring indoors, document when the floor was last swept/cleaned/waxed/mopped, and whether any "wet floor" signs were posted if required. | ☐ Yes ☐ No |
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| 19. If defects exist, determine how long they were present and whether there was prior notice to the institution. | ☐ Yes ☐ No |
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| 20. Examine any prior history of accidents at the location. | ☐ Yes ☐ No |
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| 21. Examine any prior complaints made about the location. | ☐ Yes ☐ No |

22. Determine whether any recent repair work has been done at the location. ☐ Yes ☐ No

23. Determine whether regular or periodic inspections of the area were required and, if so, were conducted. ☐ Yes ☐ No

B. Specific Types of Accidents

Completed?

1. If the accident involved athletics:

▫ Determine whether participants were using protective equipment, such as helmets and pads ☐ Yes ☐ No

▫ Determine whether equipment was in good operating condition ☐ Yes ☐ No

▫ Examine whether participants followed any recommended practices, such as using spotters or having coaches or trainers present ☐ Yes ☐ No

▫ Investigate whether coaches or others in authority took actions to increase or decrease the risk of injury (e.g., obtain team practice schedules and videos of practices) ☐ Yes ☐ No

2. If equipment or tools were involved in the accident, determine:

▫ Their operational condition ☐ Yes ☐ No

▫ Whether they were used properly and with needed authorization ☐ Yes ☐ No

▫ Whether users received appropriate training ☐ Yes ☐ No

3. If the accident resulted in a fire or explosion, determine:

▫ Whether chemicals or other hazardous substances were being used ☐ Yes ☐ No

▫ Whether any chemicals or hazardous substances were used properly, with authorization, and after required training ☐ Yes ☐ No

▫ Whether sprinklers were present and operational ☐ Yes ☐ No

4. In the case of a fall from a building, determine the:

▫ Condition of windows, screens, and any crash bars ☐ Yes ☐ No

▫ Condition of balconies, porches, decks, or fire escapes, including stairs and guardrails ☐ Yes ☐ No

▫ Condition of the roof ☐ Yes ☐ No

▫ Ease of access to the windows or roof ☐ Yes ☐ No

▫ Presence and condition of barriers limiting access, such as locked doors ☐ Yes ☐ No

▫ Presence of warning signs if access is limited ☐ Yes ☐ No

Actions Needed

Actions Needed

5. If the accident involved one or more vehicles:

▫ For the accident location, determine:

- Road conditions when the accident occurred ☐ Yes ☐ No
- Weather conditions when the accident occurred ☐ Yes ☐ No
- Other factors bearing on visibility ☐ Yes ☐ No
- The proximity and role of traffic signals/lights, signs, intersections, crosswalks, or traffic patterns, such as circles or roundabouts ☐ Yes ☐ No

▫ For each vehicle involved, determine:

- Its speed at the time of the accident ☐ Yes ☐ No
- The vehicle's operating condition, including tires, brakes, lights, turn signals, wipers, and muffler ☐ Yes ☐ No
- The operating condition of protective devices, including seat belts and air bags ☐ Yes ☐ No
- Information relating to the vehicle's load, such as weight limitations and authorized cargo type or capacity ☐ Yes ☐ No
- The date of its last service and any maintenance problems ☐ Yes ☐ No
- Whether the vehicle is owned/leased by the institution or the individual driver ☐ Yes ☐ No

▫ For each driver involved, obtain information about:

- His or her driver's license and insurance ☐ Yes ☐ No
- How long the driver has been licensed ☐ Yes ☐ No
- Compliance with traffic safety laws and rules at time of the accident ☐ Yes ☐ No
- The vehicle's registration ☐ Yes ☐ No
- Any passenger identification ☐ Yes ☐ No
- The driver's prior accident history ☐ Yes ☐ No
- The driver's mental and emotional state before the accident ☐ Yes ☐ No
- Whether the driver was fatigued or distracted, such as by use of a cell phone or other electronic device ☐ Yes ☐ No

6. If the driver is an employee or volunteer of the institution, determine whether he/she:

- Was working at the time of the accident ☐ Yes ☐ No
- Completed any required driver training or safety course ☐ Yes ☐ No

② Dealing With Accident Parties and Witnesses

A. Identify all injured parties and witnesses

Completed?

1. Interview injured parties separately from each other and from witnesses. ☐ Yes ☐ No
2. Document all injuries, both those observed and those described by the parties or witnesses, as specifically as possible. ☐ Yes ☐ No
3. Determine the injured party's physical position immediately before and after the accident. ☐ Yes ☐ No
4. Determine whether the injured party had any disability or medical condition. ☐ Yes ☐ No
5. Establish whether the injured party wore, or needed, glasses/contact lenses or hearing aids. ☐ Yes ☐ No
6. Establish whether the injured party used, or needed, a cane, walker, or other device to assist mobility. ☐ Yes ☐ No
7. Document the type and condition of the injured party's clothing and shoes. ☐ Yes ☐ No
8. Determine what items the injured party was carrying. ☐ Yes ☐ No
9. If the accident involved an employee on the job, check for compliance with relevant work procedures and rules. ☐ Yes ☐ No
10. Determine whether the injured party has made past complaints or claims of injury against the institution. ☐ Yes ☐ No

B. Interviews

Completed?

All Interviews

1. For each injured party and witness, determine the individual's:
 - Identification (name, address, phone, email, age) ☐ Yes ☐ No
 - Status (student, employee, volunteer, alumni, visitor) ☐ Yes ☐ No
 - Reason for being at the accident location ☐ Yes ☐ No
 - Familiarity with the location ☐ Yes ☐ No
2. Ask open-ended questions when possible, avoiding those that allow only "yes" or "no" responses. ☐ Yes ☐ No

Actions Needed

Actions Needed

3. Obtain the individual's account of the accident and follow up with specific questions to cover:
 - How the accident happened ☐ Yes ☐ No
 - Whether anyone besides the injured party was involved in the accident ☐ Yes ☐ No
 - The person's prior knowledge of any defects, including warning signs, tape, or barriers ☐ Yes ☐ No
 - Use by anyone involved in the accident of electronic devices, such as speaking/texting on a cell phone or using an MP3 player ☐ Yes ☐ No
4. Make short notes during the interview and detailed notes immediately following it. ☐ Yes ☐ No
5. Request a sketch or diagram of the accident location and events. ☐ Yes ☐ No
6. Consider recording (video, audio, or both) the individual's statement. ☐ Yes ☐ No
7. Request the individual's written statement or completion of the institution's form. ☐ Yes ☐ No

Injured Party Interviews

8. Document any refusal of medical treatment by the injured party. ☐ Yes ☐ No
9. Offer the injured party assistance in contacting family or friends. ☐ Yes ☐ No
10. Determine:
 - Whether the injured party was alone or accompanied when the accident occurred ☐ Yes ☐ No
 - What the person was doing immediately before the accident ☐ Yes ☐ No
 - What the person did immediately after the accident ☐ Yes ☐ No
 - The person's awareness of any witnesses to the accident ☐ Yes ☐ No
11. Ask whether the injured party consumed any alcohol, drugs, or medication (prescription or otherwise) within 24 hours before the accident. ☐ Yes ☐ No
12. Include factual observations about the injured party's condition, including any corroborating evidence, such as "the injured party appeared intoxicated based on a strong smell of alcohol, slurred speech, and difficulty walking." ☐ Yes ☐ No

Witness Interviews

13. Determine whether the witness has a relationship to the injured party or was simply a bystander. ☐ Yes ☐ No
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14. If the witness was a bystander, establish what attracted his or her attention, such as screaming or sound of impact. ☐ Yes ☐ No
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15. Establish the witness' exact location, relative to the injured party, at the time of the accident. ☐ Yes ☐ No
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16. Determine whether the witness overheard any statements by the injured party or others involved in the accident. ☐ Yes ☐ No
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17. Ask whether the witness has any knowledge of alcohol or drug use by the injured party before the accident. ☐ Yes ☐ No

Actions Needed

Acknowledgment

This checklist was written by Hillary Pettegrew, senior risk management counsel for UE.



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