Supervisor Report of Injury or Illness

Return this form and the Employee's Report of Injury or Illness to the district office.

Employee's Name:	
Job Position/Title:	Supervisor's Name:
Date Time Injury/Illness:	Location:
Task being performed when injury occurred:	
Date Time injury was reported to you:	
Name(s) of witness(es):	
Accident resulted in: Injury Fatality	Medical Property Damage
First aid given? Treatment requ	uired? Workdays lost
Describe how the injury or illness occurred:	
Could anything be done to prevent occurrence of this type? If so, what?	
Signature of Supervisor	Date
Cignoture of Cofety Officer/Cuperintendent	Data
Signature of Safety Officer/Superintendent	Date
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Comments:	

See next page

Basic Rules For Accident Investigation

- The purpose of an investigation is to find the cause of an accident and prevent further occurrences, not to fix the blame. An unbiased approach is necessary to obtain objective findings.
- Visit the accident scene as soon as possible while the facts are fresh and before witnesses forget important details.
- If possible, interview the injured worker at the scene of the accident and "walk" him or her through a re-enactment.
- All interviews should be conducted as privately as possible. Interview witnesses one at a time. Talk with anyone who has knowledge of the accident, even if they did not actually witness it.
- Consider taking signed statements in cases where facts are unclear or there is an element of controversy.
- Document details graphically. Use sketches, diagrams, and photos as needed, and take measurements if appropriate.
- Focus on causes and hazards. Develop an analysis of what happened, how it happened, and how it could be prevented. Determine what caused the accident itself, not just the injury.
- Every investigation should include an action plan. How will you prevent such accidents in the future?
- If a third party or defective product contributed to the accident, save any evidence. It could be critical to the recovery of claims costs.
- * Every employer shall report immediately (within 24 hours) by telephone or telegraph to the nearest District Office of the Division of Occupational Safety and Health any serious injury or illness, or death of an employee occurring in a place of employment or in connection with any employment (see Cal. Code Reg., tit. 8, § 342)