

Machine Accident Investigation Kit

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Machine Accident Investigation Kit



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Notes for Managers

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Four-Step Guide to Investigating Machine Accidents

Step 1

The **Machine Accident Report Form** must be completed as soon as reasonably practicable after the accident - and definitely within 24 hours.

Step 2

Pay particular attention to the following documentation:

- Make sure that the incident has been recorded in the company's Accident Book, including the First Aider's report.
- Report the accident to the director or senior manager responsible for the site.
- Check the **RIDDOR Guidance Notes** ⁽¹⁾ to see if **RIDDOR Form F2508** ⁽²⁾ needs to be completed.
- Complete the insurers' claim form (if appropriate).
- Obtain a copy of the pre-accident risk assessment for the machine.

Record statements from the injured person, his or her supervisor or line manager, and any eyewitnesses or employees in the immediate vicinity using the **Machine Accident Statement Form**.

Step 3

Do the following within 48 hours of the accident:

- Make contact with the injured person. If they are off work, it is important to make visual contact. Ideally ask them to call into work but, if this is not possible, call at their home or visit them in hospital.
- Record any action taken.
- Record any additional factors that come to light in relation to the accident or the injured person.

Step 4

Do the following at the next Health and Safety meeting:

- Review the information available.
- Record any subsequent changes to the machinery involved. If changes have been made, has a new risk assessment been carried out? If not, make sure one is carried out as soon as reasonably practicable.
- Record any subsequent changes to the system of work.
- Record any subsequent changes to the laid down procedures.
- Record any subsequent changes to training/education.
- Record any subsequent changes to the scene of the accident.
- Record any changes that have been made that are unrelated to the circumstances of the accident.

Useful Resources

The following may be helpful during an investigation or afterwards.

Risk Assessment Calculator

Procter Machine Guarding provides a free Risk Assessment Calculator based on the requirements of BS EN 14121-1, the standard for machinery risk assessments. This will be sent by email upon request ⁽³⁾. Easy to use, the calculator incorporates checklists and look-up tables to enable risk assessments to be carried out on almost any static machinery.

Guide to Workshop Safety

Procter Machine Guarding has published a free Guide to Workshop Safety that covers the following topics: costs and benefits; regulations and legislation; general requirements for machine guards; specific machine types; other measures relating to machinery safety; standards; official information and guidance; useful resources; and sources of further information. The guide will be sent by email upon request ⁽⁴⁾.

On Your Guard

A free email newsletter from Procter Machine Guarding that contains information about standards and regulations pertinent to machinery safety, new machinery guarding products, application stories and technical articles ⁽⁵⁾.

Health and Safety Performance Indicator

Developed by the HSE (Health and Safety Executive), the Health and Safety Performance Indicator ⁽⁶⁾ is intended to help SMEs regularly assess their health and safety performance, for example, from one year to the next. It can also be used to demonstrate to insurers how well companies are managing health and safety so that insurance premiums can be more accurately calculated on the basis of individual performance.

Annual Accident Cost Calculator

This online tool from the HSE provides three methods for estimating the potential annual uninsured costs of accidents to an organisation ⁽⁷⁾.

Incident Cost Calculator

An interactive online form from the HSE that allows the user to input the actual (or best estimated) cost of an incident so that it can be tracked ⁽⁸⁾.

Ill-Health Cost Calculator

A simple tool from the HSE to help work out the costs of employees who are off work because of a work-related illness ⁽⁹⁾.

'Investigating Accidents and Incidents - a workbook for employers, unions, safety representatives and safety professionals'

This guidance from the HSE, reference HSG245 (ISBN 0 7176 2827 2), contains more detail and has a far wider scope than the Machine Accident Investigation Kit. Copies may be purchased directly from HSE Books ⁽¹⁰⁾.

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About the Machine Accident Investigation Kit

This Machine Accident Investigation Kit has been produced by Procter Machine Guarding to help small and medium-sized enterprises in the UK investigate machine-related accidents in the workplace. It is aimed primarily at those in the manufacturing sector, but other organisations may also find it helpful. The kit is continually under review, so users are advised to send an email to **MAIK@procterbedwas.co.uk** to request the most up-to-date version.

Users must satisfy themselves that the Machine Accident Investigation Kit fulfils their organisation's needs and those of the relevant health and safety authorities. Procter Machine Guarding cannot be held liable in any way for the outcome of an investigation performed using the Kit.

Procter Machine Guarding is the UK's leading machine guarding specialist. From its sites in Leeds and South Wales, Procter offers a comprehensive service to survey, design, manufacture and install machine guards nationwide. Bespoke guards, modular guards and standard guarding products are supplied to suit each customer's requirements. All guards are designed to comply with EU and HSE requirements; a Declaration of Conformity is issued on completion.

If required, Procter Machine Guarding can provide a single point of contact for risk assessments, PWER assessments, design services, machine guarding and safety-related control systems - including safety light curtains, pressure-sensitive mats and other safety devices.

For more information or to discuss particular guarding requirements, please contact Procter Machine Guarding.

The information contained in this publication is intended as a guide only and is believed to be correct at the time of going to press. However, it is the reader's responsibility to ensure that all current legislation is complied with when specifying or designing machinery guarding.

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References

- (1) **RIDDOR Guidance Notes**
<https://www.hse.gov.uk/forms/incident/f2508notes.htm>
- (2) **RIDDOR Form F2508**
<https://www.hse.gov.uk/forms/incident/f2508.pdf>
- (3) **Risk Assessment Calculator**
Email RA@procterbedwas.co.uk
- (4) **Guide to Workshop Safety**
Email GWS@procterbedwas.co.uk
- (5) **On Your Guard email newsletter**
<http://www.machinesafety.co.uk/create-an-account/>
- (6) **Health and Safety Performance Indicator**
<http://www.businesslink.gov.uk/bdotg/action/haspi?r.l1=1073858799&r.l2=1074402480&r.s=tl>
- (7) **Annual Accident Cost Calculator**
http://www.hse.gov.uk/costs/accidentcost_calc/acccosts_calc.asp
- (8) **Incident Cost Calculator**
http://www.hse.gov.uk/costs/incost_calc/incost_calc_intro.asp
- (9) **Ill-Health Cost Calculator**
http://www.hse.gov.uk/costs/ill_health_costs/ill_health_costs_calc.asp
- (10) **HSE Books**
<http://www.hsebooks.com/>

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Statement Form

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Read the **Notes for Managers** that accompany the Machine Accident Investigation Kit prior to completing this form.

Statements must be recorded on this form as soon as reasonably practicable after an accident has occurred
- and definitely within 24 hours.

Separate forms should be completed by the injured person(s), their supervisor or line manager, and any eyewitnesses or employees in the immediate vicinity. Witnesses should be interviewed alone, rather than in a group, and the interview should be conducted either in the vicinity of the accident or in a quiet office or meeting room, depending on the circumstances and the witnesses' preferences. When interviewing, let the interviewee talk; do not interrupt, prompt or ask leading questions.

In the event of this form being completed by hand, use separate sheets if additional space is required.

The interviewer and the interviewee should bear in mind that the aim of the accident investigation is to find out what happened and why - so that action can be taken to prevent similar accidents occurring in the future.

Statement Form

Interviewee

1. Full name:

2. Job title:

3. Were you injured in the accident? Yes/No

4. Did you witness the accident? Yes/No

5. If no, are you the injured person's line manager or supervisor? Or do you have specialist knowledge of the machine involved in the accident?

About the Accident

6. Where did the accident occur?

7. What machinery was involved? (Make/Model/Serial Number)

8. What was the date and time of the accident?

9. Where were you at the time of the accident?

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10. What were you doing at the time of the accident?

11. What did you see or hear?

12. What were the environmental conditions at the time of the accident (weather, lighting, temperature, noise, airborne dust, fumes, etc)?

13. What was the injured person doing at the time of the accident?

14. What do you think caused the accident?

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15. What do you think should be done to prevent similar accidents from occurring again?

Interview Information

16. Full name of interviewer:

17. Job title of interviewer:

18. Full names and job titles of any other persons present at the interview:

19. Date and time of interview:

20. Location of interview:

Signatures

Interviewee:

Date:

Interviewer:

Date:

Others present:

Date:

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Machine Accident Report Form

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Read the **Notes for Managers** that accompany the Machine Accident Investigation Kit prior to completing this form.

This form must be completed as soon as reasonably practicable after an accident has occurred
- and definitely within 24 hours.

If this form is being completed by hand, use separate sheets if additional space is required.

Note that any defective equipment or materials must be retained in the 'as found' condition.

Photograph the scene of the accident as soon as possible.

Location

1. Where did the accident occur?

2. What was the date and time of the accident?

3. What machine was being used? (Make/Model/Serial Number)

4. Were there any defects with the equipment? Yes/No

4.1. If yes, describe the defects (include as much detail as possible):

5. Were there any defects with the materials being processed? Yes/No

5.1. If yes, describe the defects (include as much detail as possible):

6. Were there any other substances involved? Yes/No

6.1. If yes, describe them (include as much detail as possible):

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7. Have any changes been made to the location after the accident but before the photographs were taken? Yes/No

7.1. If yes, what are the changes?

8. If the accident occurred outdoors, what were the weather conditions at the time of the accident?

9. Was there anything different or unusual about the machine, materials, working conditions, working practices or other circumstances? Yes/No

9.1. If yes, what was different or unusual and why was this so at the time of the accident (describe in as much detail as possible)?

Injured Person

10. Name:

11. Job title:

12. If the injured person is not an employee, what is their position (eg on work experience/training scheme, employed by someone else, self-employed contractor, member of public, etc)?

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13. What task was being carried out at the time of the accident?

13.1. Is this task part of the person's normal job? Yes/No

13.2. If no, was the person authorised to perform the task or be present there? Yes/No

14. Were there any breaches of laid down procedures (including any relating to PPE – personal protective equipment)? Yes/No

14.1. If yes, what were the breaches?

15. Who was the first person on the scene? (Full name and job title)

16. Was the accident reported immediately? Yes/No

16.1. If no, why not and how long was it before the accident was reported?

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17. What injuries or ill health effects resulted from the accident?

18. Describe in as much detail as possible how the injuries or ill health effects were caused:

19. Any other comments pertinent to the investigations that could help to prevent similar occurrences in the future.

Investigator

20. Name:

21. Job title:

22. Signature:

23. Date on which Machine Accident Report Form was completed:
