

Causal Factors and Root Causes Worksheet

After completing your analysis, review the data to identify causes below (check box). Next, review the identified causes and evaluate them to determine if they are a contributing factor (CF) or the root cause (Root).

Causes	CF	Root	Causes	CF	Root
Environment/Work Space			Equipment		
<input type="checkbox"/> Adverse weather	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Poor design	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Walking/working surface	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Repeated failure	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Poor housekeeping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> No hazard controls	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Inadequate illumination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Preventative maintenance failure	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Layout/congested work space	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Unexpected failure	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Poor machine/human interface	<input type="checkbox"/>	<input type="checkbox"/>
Personal Protective Equip.			<input type="checkbox"/> Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> PPE not available	<input type="checkbox"/>	<input type="checkbox"/>	Tools		
<input type="checkbox"/> PPE not worn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Wrong tool	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> PPE inadequate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Defective tool	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> PPE defective	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Correct tool not available	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Tool not used correctly	<input type="checkbox"/>	<input type="checkbox"/>
Process			<input type="checkbox"/> Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Improper storage	<input type="checkbox"/>	<input type="checkbox"/>	Training		
<input type="checkbox"/> Unexpected movement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> No training	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Incompatible chemicals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Inadequate practice	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Inadequate controls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Understanding not tested	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Materials not secured	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Inadequate technical safety and health training for	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> manager, <input type="checkbox"/> supervisors, and/or <input type="checkbox"/> hourly.		
Procedures			<input type="checkbox"/> Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> No SOP	<input type="checkbox"/>	<input type="checkbox"/>	Communications		
<input type="checkbox"/> SOP not followed correctly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> No communication	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Wrong SOP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Terminology not understood	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> No way to implement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Communication not timely	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Inadequate SOP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Complex and confusing instructions	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Limit/load/speed exceeded	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Message misunderstood	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> SOP not used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>	Human Performance		
Worksite Analysis			<input type="checkbox"/> Hazard not recognized	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Inadequate hazard survey/inspection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Employee short cut	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Inadequate change analysis	<input type="checkbox"/>	<input type="checkbox"/>			

<input type="checkbox"/> Inadequate hazard reporting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Failure of supervisor to detect/ anticipate/fix/report hazard	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Inadequate injury/illness reporting/trend analysis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Failure of employee to detect/ anticipate/fix/report hazard	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Untimely hazard correction			<input type="checkbox"/> Fatigue/reduced alertness	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Inadequate hazard analysis/Job Hazard Analysis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Hazard recognized but not eliminated	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Inadequate incident investigation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Lack of experience	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other (specify):			<input type="checkbox"/> Improper positioning	<input type="checkbox"/>	<input type="checkbox"/>
Management Leadership – Employee Involvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Distraction	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Work site safety policy not clear	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Failure to follow SOP	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Management not visible			<input type="checkbox"/> Horseplay	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Employee involvement not encouraged			<input type="checkbox"/> Improper work pace	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Unclear safety responsibilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Inadequate accountability	<input type="checkbox"/>	<input type="checkbox"/>	Supervision		
<input type="checkbox"/> Inadequate program review	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Inadequate planning	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Inadequate goals and objectives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Inadequate pre-job briefing	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Poor mgmt/supervisor example	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Inadequate oversight	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Low employee comfort level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Poor worker selection	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Unclear authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Scheduling	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Inadequate/improper rewards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Worker fatigue	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>
Business – Management Sys.	<input type="checkbox"/>	<input type="checkbox"/>	Hazard Prevention and Control		
<input type="checkbox"/> Conflicting priorities/goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Untimely hazard control	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Production pressures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Inadequate preventative maintenance	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Incentives/rewards/improper rewards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Inadequate access to health care providers/medical care	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Ineffective hazard control	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Ineffective emergency planning	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>