



# **NEIGHBORHOOD RISK MANAGEMENT CORP.**

**CLAIMS MANAGEMENT  
Claim Reporting and Accident  
Investigation**

January 30, 2013

**Willis**



# **TODAY'S AGENDA**

- I. Introductions
- II. Claim Reporting
- III. Investigation
- III. Questions



# INTRODUCTIONS

Deborah Aschheim, Executive Director, NRMC

Mary W. Wray, Senior Vice President, Senior Principal,  
Willis Pooling Practice

Trish Ennis, CSP, ARM Senior Risk Control Consultant  
Willis Strategic Outcomes Practice



# FIRST REPORT



## **REPORTING A CLAIM**

- Identify Potential Third Parties
- Identify Investigative Agencies/Reps.
- Complete First Report of Claim
- Notify Willis Within 24 Hours of all claims
- Notify Willis Claim Advocate regarding serious accidents
- Early and direct reporting saves claim dollars and allows for proactive claims management.

# GENERAL LIABILITY LOSS NOTICE



Neighborhood Risk Management  
CORPORATION  
*A WILLIS TOWERS WATSON COMPANY*  
*NRMC working to insure safer communities*

## GENERAL LIABILITY LOSS NOTICE

Willis Claim Advocate Group (CAAG) via Phone – 877-725-9678, Fax – 877-945-3676,  
or Email – [claimcentral@willis.com](mailto:claimcentral@willis.com)

Member Name: \_\_\_\_\_ ID#: \_\_\_\_\_

Property Name: \_\_\_\_\_ Owner Name: \_\_\_\_\_

Site Manager/Contact Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Date Reported: \_\_\_\_\_ By Whom: \_\_\_\_\_

Date of Incident: \_\_\_\_\_ Time: \_\_\_\_\_ Location: \_\_\_\_\_

Description of Incident: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe injuries or property damaged: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Product or equipment involved in loss (describe): \_\_\_\_\_  
\_\_\_\_\_

Name and telephone number of injured party or owner of property damaged: \_\_\_\_\_  
\_\_\_\_\_

If injury, was First Aid given at the scene:  Yes  No By Whom: \_\_\_\_\_

Police/Fire/Ambulance at scene?  Yes  No If yes, identify names of officials: \_\_\_\_\_

\_\_\_\_\_ Hospital (if known): \_\_\_\_\_

### Weather Conditions (if a factor):

Wet  Ice  Snow  Clear & Dry  Raining

### Lighting Conditions:

Bright  Dim  Working  Not Working

Location of incident inspected?:  Yes  No If yes, date: \_\_\_\_\_

Observations: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

First employee on scene: \_\_\_\_\_ Action Taken: \_\_\_\_\_

Further Action Required: \_\_\_\_\_

### Witness 1

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

### Witness 2

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Completed By: \_\_\_\_\_ Signature: \_\_\_\_\_

Position: \_\_\_\_\_ Date: \_\_\_\_\_

# PROPERTY LOSS NOTICE



Neighborhood Risk Management  
CORPORATION  
*NRMCO working to insure safer communities*

## PROPERTY LOSS NOTICE

Willis Claim Advocate Group (CAAG) via Phone -- 877-725-9678, Fax -- 877-945-3676,  
or Email -- claimcentral@willis.com

Member Name: \_\_\_\_\_ ID#: \_\_\_\_\_

Property Name: \_\_\_\_\_ No: \_\_\_\_\_ Owner: \_\_\_\_\_

Site/Property Manager/Contact Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Date Reported: \_\_\_\_\_ By Whom: \_\_\_\_\_

Resident:  Yes  No \_\_\_\_\_ Unit #: \_\_\_\_\_ Telephone: \_\_\_\_\_

Date of Incident: \_\_\_\_\_ Time: \_\_\_\_\_ Location: \_\_\_\_\_

Description of Incident and property damage: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Any Injuries (describe): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Was First Aid given at the scene:  Yes  No By Whom: \_\_\_\_\_

Police/Fire/Ambulance at scene?  Yes  No If yes, identify names of officials: \_\_\_\_\_  
\_\_\_\_\_

Hospital (if known): \_\_\_\_\_

### Weather Conditions:

Wet  Ice  Snow  Clear & Dry  Raining

Lighting Conditions:  Bright  Dim  Working  Not Working

Location of incident inspected?:  Yes  No If yes, date: \_\_\_\_\_

Observations: \_\_\_\_\_

First employee on scene: \_\_\_\_\_

Action Taken: \_\_\_\_\_

Further Action Required: \_\_\_\_\_  
\_\_\_\_\_

### Witness 1

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

### Witness 2

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Completed By: \_\_\_\_\_ Signature: \_\_\_\_\_

Position: \_\_\_\_\_ Date: \_\_\_\_\_





# HOW TO REPORT A CLAIM

## Two ways to files a claim:

1. Dial In Number: (877) 725-9678
2. Submit at [claimcentral@willis.com](mailto:claimcentral@willis.com)
3. ALWAYS identify yourself as a member of NRMC

Available 24 / 7/ 365

Claim Number and adjuster information will follow within 24 hours

## Willis Claim Advocates:

- Robert Stanton - Direct:(312) 288-7190 [robert.stanton@willis.com](mailto:robert.stanton@willis.com)
- Karyn Brennan - Senior Claim Consultant (April 2013)





# PHOTO MOUNT DISPLAY

## PHOTO MOUNT DISPLAY

Insured	Claimant	Claim #
		Date Taken
		Time
		By
		Location
Description		
		Date Taken
		Time
		By
		Location
Description		





# INVESTIGATION



# WHY INVESTIGATE ACCIDENTS?

- To identify accident causes
- To prevent similar accidents
- Safer environment
- Reduce Costs



# **ACCIDENT INVESTIGATION HAS 4 STEPS**

1. Control Accident Scene
2. Gather Important Data
3. Root Cause Analysis
4. Determine Corrective Action



# STEP 1 - CONTROL SCENE

## Location fills out accident report

Take pictures of the scene (disposable cameras at site?)

Give as much detail as possible

## Control existing hazards

Prevent further injuries

Get more help if needed

## Preserve evidence

Contact Willis Claims Department



## **STEP 2 - GATHER DATA**

### **How it occurred:**

- Person(s) involved
- Date, time & location
- Describe the condition of the location
- Activities at time of accident
- Equipment involved
- List of witnesses



## **STEP 2 - HOW TO CONDUCT INTERVIEWS**

### **Fact finding & not fault finding:**

- Make no judgments or statements
- Conduct interviews one on one
- Be friendly but professional
- Conduct interviews near scene in private



## **STEP 2 - QUESTION WITNESS**

- Name, address & phone number?
- What did they see?
- What did they hear?
- Where were they standing/sitting?
- What do they think contributed to the accident?
- Was there anything different today?





## **STEP 3 - DETERMINE ROOT CAUSE & ANALYZE DATA**

- Gather drawings, interview material & other information collected at scene
- Develop a clear picture of what happened
- Understand sequence of events
- Identify Work & Environmental Conditions at Time of Accident



## **STEP 3- UNSAFE CONDITIONS**

List unsafe conditions involved in the accident

### Examples of unsafe conditions

- Wet/Slippery walking surface
- Poor knowledge of hazard
- Insufficient lighting/illumination
- Housekeeping not up to standard (disorderly, clutter, spills, etc.)
- Blocked walkways



## **STEP 3 - ROOT CAUSES**

- Unaware of Hazards
- Inadequate inspection/maintenance program
- Weather
- Third Party Involvement



# STEP 4 - DETERMINE CORRECTIVE ACTIONS

Define problem (What happened?)

Establish norm (What should have happened?)

Identify, locate & describe change (What, where, when, to what extent)

May require additional resources (Who?)

- Willis
- NRMC Risk Control Committee

Specify what was & what was not effected

Who will do what, when?

How will you implement?



## **HELPFUL HINTS**

**REPORT THE CLAIM IMMEDIATELY!**

Even if you are waiting for more information, make your initial report. You can always supplement it later.

Keep a record of who you reported the claim to and what date and time the report was made.

Inspect the accident location to confirm that any dangerous conditions that had existed have been remedied.

**WHEN IN DOUBT, FILE THE CLAIM!**



# OVERVIEW

Early Investigation/Reporting of Claims Results in Money and Time Saved for Your Organization

Information Gathered During Your Investigation Can Be Helpful in Preventing Future Accidents



# QUESTIONS?



# CONTACTS:

## Report a Claim:

**Willis Claim Hotline**

**(877) 725-9678 or [claimcentral@willis.com](mailto:claimcentral@willis.com)**

## Claim Advocacy:

**Robert Stanton - (312) 288-7190 [robert.stanton@willis.com](mailto:robert.stanton@willis.com)**

## NRMC Web-Portal:

**NRMC Claim Kit and NRMC Loss Notices:**

**Debra Beaver – (614) 326-4832 [debra.beaver@willis.com](mailto:debra.beaver@willis.com)**





**THANK YOU!**