

INCIDENT/ACCIDENT REPORT FORM [INC-001]

- STEP 1** Part A completed immediately after the incident by First Aid Attendant or appropriate Ministry Volunteer.
- STEP 2** Ministry Leader/Supervisor to complete Part B
- STEP 3** Forward Incident Investigation Report to Church Secretary
- STEP 4** Church Secretary to review incident report and develop Part C, corrective and preventative action plan.
- STEP 5** All incident reports to be closed out when required actions are completed.

Part A

Details of Injured person involved in incident

Name _____ Gender _____ Age _____

Address _____ Phone no. _____

Is this person a staff member / volunteer / contractor / church attendee / visitor / youth person / other -

Incident Report completed by _____ Date completed _____

Your involvement in the incident eg. ministry leader / first aid attendant / other: _____

Details of Incident

Day & Date of Incident _____ Time of Incident _____

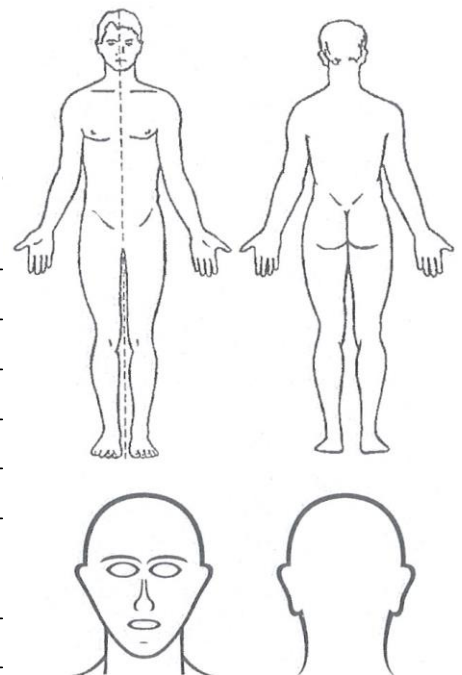
Area that incident occurred _____

Type of Incident: Property Damage Personal Injury Incident

Mark injuries on the diagram and use the legend indicating type of injury: -

- | | | |
|-----------------------|----------------------|-----------------------|
| <i>A - Abrasion</i> | <i>Bl - Bleeding</i> | <i>Bu - Burns</i> |
| <i>C - Contusion</i> | <i>D - Deformity</i> | <i>T - Tenderness</i> |
| <i>L - Laceration</i> | <i>P - Pain</i> | <i>S - Swelling</i> |

Describe Incident (include photos/diagrams if applicable) & what Immediate action was taken?



Witness Statement (other than person completing this form if possible)

Name of Witness _____

Address _____

Phone _____ Date _____

Statement _____

PART B

Investigation (To be completed by Ministry Leader/Supervisor)

Name Ministry Position.....

Does this incident require further investigation? YES NO (If YES, please continue)

Has equipment been checked and found suitable. Has broken or damaged equipment been retained?

Has personal equipment been checked? Was it suitable? _____

What instruction and training was given in relation to the activity? _____

What was the root cause of the incident? _____

What corrective action was instigated immediately (refer to page 3 for ongoing) in relation to incident?

Was First Aid given and by whom was it given? Provide details. _____

Was medical attention sought as a result of the incident? _____

Was there any damage to equipment and/or building/property due to the incident? _____
