

Incident Report Form

Capture an incident properly on the day, in the affected person's own words, with the witness details and equipment notes that become impossible to gather later.

A blank form for recording what happened, when, to whom, and what was done about it — written down while it is still fresh.

REPORTING DUTIES DIFFER — CHECK YOURS

What must be reported, to whom and within what time differ by country and by the kind of premises or work. This sheet names no scheme and sets no threshold. Check what applies where you are, and keep this alongside whatever report that requires.

HOW TO USE THIS SHEET

- 1 Fill it in the same day. Detail you are sure of now is detail you will not have next month.
- 2 Record what was said and seen, not what you concluded. Opinions can go in the notes.
- 3 Get the account in the affected person's own words where you can, and let them read it back.

THE INCIDENT

Report reference	Date of report	Date of incident	Time
Exact location	Activity at the time		

PERSON AFFECTED

Name	Role or relationship	Contact
Injury or damage	Taken to hospital	

WHAT HAPPENED

in their words where possible

RESPONSE

Immediate action taken		Machine or area stopped
First aid given by	Emergency services called	Time
Equipment involved	Kept for inspection	Where

WITNESSES

Name	Contact	What they saw

FOLLOW-UP

Reported to	Date reported	Reference given
Action taken to stop it happening again		
Completed by	Signature	Date