



ACCIDENT and INCIDENT REPORT

This report should be completed immediately after any accident or untoward incident has occurred. One copy should be retained by the Leader of the group and a copy given to the Church Wardens. Insert one copy into the Church Accident and Incident Folder and discuss with the Incumbent and Churchwardens what follow up action is necessary.

Name of Church

Name of your Group

Day, date and time of the incident:

What are the names, addresses and ages of those involved in the incident?

Where did this incident take place?

Who is normally responsible for group? (name, address and telephone number)

Who was responsible for the group at the time of the incident, if different from the above? (name, address and telephone number)

**Which other workers were supervising the group at the time of the incident?
(names, addresses and telephone numbers)**

Accident and Incident Report - continued...

Who witnessed the incident? (names, addresses, telephone numbers and ages if under 16. Normally only two witnesses will be needed)

Describe the accident/incident (include injuries received and any first aid or medical treatment given)

Have you retained any defective equipment? (yes/no/none involved)

If so where is it being kept and by whom?

What action have you taken to prevent a re-occurrence of the incident?

Is the site or premises still safe for your group to use? YES/NO

Is the equipment still safe for your group to use? YES/NO

Who else do you need to inform?

Have they been informed? YES/NO

Signature of person in charge of group at the time of the accident/incident:

Date:

This sheet should be photocopied