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| **ACCIDENT & INCIDENT FORM**  |

**LIVE WELL EAST LOTHIAN**

**PART A INFORMATION ABOUT INCIDENT**

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| **SECTION 1: DETAILS OF INCIDENT** Near miss/unsafe conditionDamage onlyInjury |
| **Date:****\_\_\_\_\_\_\_\_\_\_\_\_** | **Time: (24-hr clock)****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Location (eg Main Building, reception)** |
| **Describe how the incident occurred: (use a separate sheet if necessary)** |
| **List any machinery or equipment, protective clothing or equipment being used:** |

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| **SECTION 2: DETAILS OF INJURED PERSON****Full name (prof/Dr/Mr/Mrs/Ms/Miss)** |
| **Home address and contact number:** |
| **Class member****Instructor****Staff** |
| **Describe type and position of injury: (eg right arm bruised, cut to leg)**  |
| **Was Health care advice sought at the time?** **If yes, what was done?**  |
| **Did the individual have to go to hospital? If yes, what was the outcome?**  |