

St Gabriel's C.E. Primary School

Near Miss and Incident Form

Completion of form requested (date/time) \_\_\_\_\_

By \_\_\_\_\_

*The reason for investigating an incident, or near miss, is to determine: the cause or causes of the incident; to identify any risks, hazards, systems or procedures that contributed to the incident; and to see if there is any corrective action that could be taken to prevent similar incidents.*

**Date:**

**Time:**

**Area where incident occurred:**

**Incident (what happened)**

Please describe what happened including the sequence of events, who was involved; how many pupils were involved, the number of staff present, conditions present at time of incident; what activity was taking place at the time of the incident. What hazards were staff or pupils exposed to? What, if anything may have contributed to the incident occurring?

**Name of person completing this form**

**Signature**

**Date**

**Received by Headteacher on**

**Signature of Headteacher**

To be completed by the Headteacher, or Deputy in her absence

**INVESTIGATION RECOMMENDATIONS** eg. new equipment, re-design trip practices, review training standards, etc

**IMPLEMENTATION DETAILS** including action taken, date implemented, responsible person, date for review