

# Incident Investigation and Report

SSSP Form 9



**File number:**

**Hazard entered in register:**

## 1 Investigation details

**Write** investigator name

**Signature**

**Investigation start date**

**Investigation end date**

 /  /  /  / 

## 2 Occurrence details

**This report relates to:**

Injury/Harm

Property damage

Near-miss

**Incident date**

**Time**

 /  / 

**Location**

**Date reported**

 /  / 

**Person involved**

**Address**

Mr

Mrs

Miss

Ms

**Phone number**

**Length of employment**

**Age**

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## 3 Injury / harm details

**Indicate** the type/s of injuries sustained

Crush / Impact	Bruising
Strain / Sprain	Scratch / Abrasion
Fracture / Break	Amputation
Cut / Laceration	Burn / Scald
Dislocation	Internal Injury
Foreign body	Allergic Reaction
Penetration	Other (Describe Below)

**Describe** limb / body part affected and the nature of the injury

**Injury severity rating**

**WorkSafe notified?**

Minor

Moderate

Notifiable injury

Yes

No

**Injury response**

Nil

First Aid only

Medical attention

Emergency services

**Comment**

**Outcome**

Return to work

Alternative duties

Time off

**File number:**

## 4 Near-miss details

**Describe** the occurrence

**Severity**

**WorkSafe notified?**

Significant

Notifiable injury

Yes

No

## 5 Damage details

**Describe** the property/item/material damaged

**Describe** the nature of the damage

**Describe** the action/object/vehicle/thing involved

**File number:**

## 6 Incident description

**Describe** what happened - attach additional notes if necessary (attach diagrams - essential for all vehicle incidents)

## 7 Analysis

**Write** about contributing causes (these are the actions or inaction or conditions at the time that triggered the incident)

**Write** about primary causes (these are the system or process failures, planning and / or management failures that allowed the potential for the incident to develop in the first place)

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## 8 Prevention

**What** action has or will be taken to rectify the situation and/or prevent a recurrence?) **By whom** **When**

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## 9 Sign-off

**Signed** for employer

*Date signed*

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**Signed** by employee/s

*Date signed*

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## **10** Additional incident notes