**Introduction**

All incidents should be logged on the Sussex Direct System. Where the UoS safety team have determined that a more detailed investigation is required due to the harm (or potential harm) this form can be used as a guide for staff investigating an incident a level 2 incident

Where more advanced investigative processes or procedures are required the incident will be assigned as a level 3 incident. In these cases the UoS safety team will take the lead in any investigation.

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| **Section 1**  **General Information** | | | |
| A | School or Division |  | |
| B | Date of report |  | |
| C | Sussex Direct ID |  | |
| D | Sussex Direct Category |  | |
| E | Sussex Direct Sub Category |  | |
| F | Harm or potential Harm category | Fatal or Major injury  Serious injury  Minor injury  Property Damage | |
| **Members of the Investigation Team** | | | |
| **Name** | | | **Position** |
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| **Section 2**  **Incident Details** | | |
| A | Injured Party  *If this section is for a near miss or property damage please state NA. Details of staff members contact details can be found from HR, for student details Student Records should provide the information.*  *Please add rows as required* | Name:  Position:  Contact Number:  UoS Email:  Home Address: |
| B | Incident reported by  *If different from the above* |  |
| C | Date of incident |  |
| D | Location of incident  *Where applicable please include building and room numbers or a map* |  |
| E | Date and Time of the event |  |
| F | Witnesses if applicable  *Please add rows as required* | Name:  Position:  Contact Number:  UoS Email: |
| G | Is the incident reportable under RIDDOR | RIDDOR Report ID:  Date report was submitted: |
| H | Description of event  *Including*   * *A timeline of events and or details of what happened* * *Any emergency actions taken as a result of this incident* |  |

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| **Section 3**  **Incident Investigation**  *Where required please attach relevant documents to the end of this form as appendix and reference them below* | | | |
| A | What activities were being carried out when the incident occurred? | |  |
| B | Risk assessments and Standard Operating procedures | |  |
| C | List all relevant equipment used as part of this activity or activities  *Including their School or Divisional Asset codes* | |  |
| D | Maintenance logs for the equipment | |  |
| E | Monthly Checks | |  |
| F | Competency records for all relevant individuals | |  |
| G | Diagram of the working area | |  |
| H | Details of other contributing factors | |  |
| **Cause of the event** | | | |
| I | Immediate Cause(s) |  | |
| J | Underlying Cause(s) |  | |
| K | Root Cause(s) |  | |

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| **Section 4**  **Incident Follow up**  *Add additional Rows as required* | | | |
| **Actions required** | | | |
| Control Measure | Planned Completion Date | Actual Completion Date | Manager Responsible |
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| **Which Risk assessments and Standard Operating Procedures need to be reviewed** | | | |
| Risk assessment of SOP | Planned Review Date | Date Reviewed | Manager Responsible |
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| **Section 5**  **Acceptance of Report** | | | |
| Signed on Behalf of the investigation team  *This should be the senior manager of the area* | | | |
| Name | Position | Date | Signature |
|  |  |  |  |
| Report accepted by  *This should be* | | | |
| Name | Position | Date | Signature |
|  |  |  |  |
| **Distribution**  *Add additional Rows as required* | | | |
| The findings of this report with be distributed to the following people: | | | |
| Name | Position | Date | Signature |
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**Appendices for supporting evidence**

Please attached relevant documents below