**BPSS Accident/Incident reporting form**

In the event of an incident/accident, the following procedure should be followed by the lead BPSS Team Member:

* Fill in 2 copies of the Accident/Incident reporting form.
* Ensure relevant adult makes contact with parents/guardians, where appropriate
* One copy of form to incident folder.
* Forward 1 copy to designated person for record keeping/action required – Jo Eames
* Contact emergency services if required.
* Record in detail all facts surrounding the accident/incident - witness's etc.
* Any further action.
* Sign off on any action required from senior management officer.

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| Name of young person involved in incident/accident |  |
| School |  |
| Date of Birth |  |
| Gender |  |
| School Teacher Name |  |
| Contact Number |  |
| Accident/Incident information |
| Date of incident |  |
| Time of incident |  |
| Date recorded |  |
| Time recorded |  |
| Name of person recording |  |
| Location of incident  |  |
| Details of incident – please include any injuries |  |
| Nature of how accident/incident happened |  |
| Name of witness of incident/accident |  |
| First aid involved:*(Please provide details including any emergency services contacted)* |  |
| Parents/Carers notified | Yes No  |
| Form completed by |  |
| Recommended action to be taken |  |
| Referred to designated persons | Yes NoName of referral to:  |
| Signature |  |
| Print Name |  |
| Date |  |

Please date and detail below any further updates post the accident / incident including communication between BPSS and the student/school involved

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