NTU Sport Accident & Near Miss Report Form

Complete fully ASAP after the incident and return to: Claire Moore – NTU, Lee Westwood Sports Centre, Clifton Campus, Nottingham. NG11 8NS

NOTTINGHAM TRENT UNIVERSITY		
Sports	_	

Trip, Event, or Activity:						
Date of Accident / Incident:/ Time:						
Exact Location:						
Description of Accident / Incident / Near Miss						
Describe what happened including what the injured person was doing at the time:						
Describe factors affecting the accident (weather, local conditions, equipment etc)						
Full Name and contact no. of witnesses:						
		(Atta	ch additional sheets	if necessary)		
Details of Person Injured						
Full Name:	Fracture		Head			
Username (e.g. N0123456):	Cut		Back			
Contact No: Male / Female	Laceration Bruise		Arm Hand			
Job Title/Course:	Sprain		Leg			
Full Address:	Burn	⊒	Foot	_		
	Scald		Torso Other			
Post Code Age:			(please s	_		
Injured Persons Signature	Left ☐ No Injury	Right □		, ,,		
Action Taken						
Describe what happened after the Injury / Accident / Near Miss (incl. any treatment, whether they went to						
hospital, any advice given by the first aider, etc.):						
First Aid Given by:	Contact no.:					
Recommendations						
Could the accident have been avoided?						
What actions can be taken to minimise the risk of such an accident happening again?						
Was the accident dealt with quickly and effectively?						
Can any action be taken to improve emergency procedures?						
Signed (Activity Leader) Contact No						
Sport and Fitness Facilities Manager						
Director of Sport						

DATA PROTECTION: Nottingham Trent Student Union & Nottingham Trent University are registered under the terms of the Data Protection Act 1998 to enable them to hold and process personal data for the purposes of ensuring and monitoring health & safety. The data supplied on this form will be kept secure and accurate and will only be disclosed to people who have a need to know in accordance with the registration under the act.