

NEAR-MISS REPORT

An unplanned, unwanted event that had the potential to lead to injury, damage or loss but did not do so (e.g. a worker narrowly missed by a box falling from the racking).

This form is to be completed by a **Manager, Director** or a person nominated by them.

Time, Date, Location

When did the incident occur? Time: Date:

Where did the incident occur?

.....

Who was involved in the incident?

.....

Incident

Provide a full description of what happened

Action to be taken

Is there any action needed to ensure this incident is not repeated

Department Manager/Supervisor

Is this an isolated incident? YES / NO

Does this incident involve other departments? YES / NO

Is the employee deemed competent in relation to this incident? YES / NO

If NO, give details:

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Risk Assessment Review

Has the current risk assessment been reviewed and any actions recorded? YES/NO

RIDDOR Notification – www.hse.gov.uk/riddor/report

Should RIDDOR be notified of the accident? YES / NO

If YES, attach a copy of the notification to this report.

RIDDOR reportable incidents – www.hse.gov.uk/riddor/reportable-incidents

Dangerous occurrences – certain specified near-miss events. 27 categories of dangerous occurrences that are relevant to most workplaces e.g. the collapse, overturning or failure of load bearing parts of lifts and lifting equipment; plant or equipment coming into contact with overhead power lines; the accident release of any substance which could cause injury to any person.

Signatures

Manager's Signature: Date:

Employee's Signature: Date:

HSE Director's Signature: Date: