

# ACCIDENT RECORD



When dealing with an accident be guided by your 'purple card'.

## About the person who had the accident

Full Name			
Role (e.g. Cub, ASL)		Age (if under 18)	
Their signature (or adult if under 18*)		Name	

\* Usually the parent. If the parent does not collect the child, the adult who informed the parent.

## About the person reporting the accident

Full Name			
Role (e.g. GSL, BL)		'Group'	
Signature		Date	

## About the accident – when, where and what

Date		Where	
Time		Activity	
Describe the accident			
What were the injuries?			

## About the action – what then happened

What action was taken to deal with the injuries?	
Did, or will, the person visit a doctor or hospital?	Yes / No
Who are you handing this form to?	

Hand this form on promptly, and in confidence. Your thoughts would be welcomed overleaf.

This form will be stored securely and confidentially. The details will not be passed to anyone other than those adult volunteers who follow up accidents or manage safety. See [christchurchscouts.org.uk/privacy](http://christchurchscouts.org.uk/privacy).

### Reflection by person reporting the accident (optional)

What actions, if any, have already been taken to prevent a reoccurrence?	
Do you have any suggestions to prevent reoccurrence?	

### Review – to be completed by Managers and/or Exec

Received by		Date	
Was HQ informed and their form completed?			
Please record details of any investigations, further actions and notes of the Executive committee			
Date reviewed by Executive Committee			
Date this form should be destroyed			

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