

# First aid, hazard, incident and injury record



## Details of person completing record

Name:

Position:

Date of record:

Time of record:

Signature:

## Details of person injured or ill (if applicable)

Name:

Date of birth:

Occupation:

Address:

## Incident details (if applicable)

Date of incident:

Time of incident:

Location:

Details of hazard or incident:

Circumstances leading to the incident:

Bodily location and description of injury or illness (if applicable):

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## Action taken

Treatment given or action taken:

Name of person giving first aid:

Referral for further treatment:

Did emergency service attend?:

What has been implemented to prevent recurrence:

## Witness details (if applicable)

Witness Information	
Full Name:	
Phone:	
Signature	

## Notifications

Name of parent:

**Note:** When children are in our care and away from their parents we should notify their parents of an injury or illness

Other agency:

**Note:** There may be additional reporting requirements, refer to our incident and injury notification manuals for NSW found **here** and for ACT found **here**.