This form is intended for use following all near miss incidents which result in, or could have resulted in, serious injury or substantial material damage, and which are not reported under RIDDOR. Its main purpose is to identify how to avoid recurrence.

|  |  |
| --- | --- |
| **Employee/Volunteer:** | **Location:** |
| **Job Role:** | **Name of person reporting near miss if not:** |
| **Date of Incident:** | **Time of Incident:** |

|  |  |  |
| --- | --- | --- |
| **Description on incident:** | | |
| **Description of any Injury/stress caused:** | | |
| **Name:** | **Signature:** | **Date:** |

**Facilities Team to complete below**

|  |
| --- |
| **Remedial actions:** |
| **Was this a ‘high potential’ near miss:** |

|  |  |
| --- | --- |
| **Liability incident:** | **Safety Alert:** |
| **Similar incidents:** |  |
| **Facilities Team name:** | **Signature:** |
| **Facilities Manager:** | **Signature:** |

*A ‘high potential’ near miss is one that could, with a minor alteration in circumstances, have lead to a fatality, significant financial losses or severe reputational damage to the company.* ***Please e-mail completed form to Facilitiesreception@mndassociation.org.***