

Copy to be retained by SLSW Carer

Copy to be sent to nearest Shared Lives South West office within 24 hours

## Accident and Incident reporting

When to use this form:

- Missing person
- Injury requiring first aid intervention
- Physical or verbal assault
- Accidents
- Medication error – missed or wrong dose given
- Alcohol or drug abuse
- Incident to which police are called
- Admission to hospital
- Serious illness or injury requiring hospitalisation
- Any significant behavioural changes

<b>Name of person completing this form</b>	
<b>Address</b>	
<b>Telephone number</b>	
<b>Email address</b>	
<b>Name of person affected by accident/incident</b>	
<b>Relationship to the person completing this form</b>	
<b>Date and time of the accident/incident</b>	
<b>Please describe the accident/incident (Please include anything observed or reported in the build up to the incident or accident)</b>	

Any injuries sustained and to whom?	
Does a body map need completing?	
Were the emergency services called? Please give details	

Any other immediate actions taken	
Have SLSW been notified?	
Signature of person completing this form	
Date	