If a health and safety or wellbeing incident or near miss occurs while participating in the Essex RiverWatch, complete this form. Please report even minor incidents and near misses. Knowledge of all incidents help us to make the RiverWatch safer for all.

Once completed, please return this form (a scan, photo or typed) to [RiverWatch@essexsuffolkriverstrust.org](mailto:RiverWatch@essexsuffolkriverstrust.org)

This will be logged and a discussion can be had about further mitigation.

|  |  |  |
| --- | --- | --- |
| Full name |  | |
| Date of incident/date of report (DD/MM/YYYY) | \_\_\_/\_\_\_/20\_\_\_ | \_\_\_/\_\_\_/20\_\_\_ |
| Sample site (write unknown for any information you are unsure of) | Grid Reference: | Catchment: |
| What3Word: | River: |
| Did you comply with the Risk Assessment and fill out a dynamic risk assessment on the day? | □ Yes □ No | |
| Which ERW group does the person filling in this form belong to? (If an independent participant, please put: IND) |  | |
| Full names of all persons directly involved in the incident (please indicate if not an ERW participant) |  | |
| Full names of any witnesses to the incident (please indicate if not an ERW participant) |  | |
| Did the incident result in an injury? | □ Yes □ No | |
| Did the emergency services attend? | □ Yes □ No | |
| Did the incident result in a hospitalisation or doctor’s visit? (specify) |  | |
| Describe the incident in detail:   * What exactly happened? * How did this happen? * Who did it happen to? * When exactly did this occur? * Where exactly did this occur? * What did you do as a result of this/how did you get out of any situation? | If you need additional space, use a separate sheet and attach to this form | |
| Would you suggest any changes to the generic risk assessment following your incident/near miss? Please describe |  | |
| We would like to discuss your incident/near miss with you. Do we have permission to call you? If so, please add a telephone number and let us know when would be suitable. |  | |
| Additional notes or comments |  | |
| Sign to confirm the above information above to be correct to your best knowledge |  | |