



WHS Incident and Hazard Reporting Form

Privacy notice

Your personal information is protected by law, including the *Privacy Act 1988*. Your personal information may be collected by the Department of Veterans' Affairs (DVA) for employment and payroll purposes. [Read more: How DVA manages personal information](#)

GIVING FALSE OR MISLEADING INFORMATION IS A SERIOUS OFFENCE

PART A - Reporting details

- Incident reported by
- Incident reported to
- Date reported (dd/mm/yyyy) / /
- Time reported (hh:mm)

PART B - Incident details

- Date of incident (dd/mm/yyyy) / /
- Time of incident (hh:mm)
- Exact location of incident
- Were there any witnesses?
Yes Witness name
No Witness contact number (incl. area code)
- Describe how incident occurred (*include: what led up to the event, the actual event and any equipment, work practices, tasks or processes that may have been involved - attach a separate sheet if necessary*)
- Did this incident result in an injury?
Yes Go to Part C
No Forward to your supervisor to complete Part D

PART C - Injured person details

- Surname
- Given name(s)
- Branch
- Section
- Telephone (incl. area code)
- Please tick
Male Female Date of birth / /
- Is the person a worker?
Yes Please tick one
 - HRMS Employee ID No. (*this is obtained from the Summary Overview link on the HRMS home page or from your payslip*)
 - Contractor
 - Sub-contractor
 - Trainee
 - Apprentice
 - Outworker
 - Volunteer working in an employment-like setting
- No Please tick one
 - Veteran
 - Visitor
 - Other - please specify
- What part(s) of the body were affected and how? (*Attach a separate sheet if necessary*)
- What did the injured person do?
Stay on duty Go home
Seek treatment or advice Please specify: First Aid
Medical treatment
- Signature of injured person
- Date (dd/mm/yyyy) / /



WHS Incident and Hazard Reporting Form *(continued)*

PART D – Supervisor to complete

21. Full name

22. AGS number

23. Telephone (incl. area code)

24. Is this incident considered notifiable under Comcare Reporting Regulations (see Table 'Does Comcare Need to Be Notified')?

Yes ▶ Go to Question 25

No ▶ Go to Question 26

25. Have you reported this incident to Comcare?

Yes ▶ Please attach a copy of the report

No

26. What factors do you believe caused this incident? (Attach separate sheet if necessary)

27. What action has been taken to prevent a similar occurrence happening? (Attach separate sheet if necessary)

28. Declaration of Manager/Supervisor

I,

in my position as

declare that:

I have read and fulfilled my obligations as a Manager which can be found at:

<http://sharepoint/humanresources/healthsafety/Pages/Injuries%20and%20Incidents.aspx>

Signed

Date (dd/mm/yyyy)

/ /

About this form

Please complete this form to report all incidents (dangerous or not), injuries and serious illnesses. Get your supervisor to complete the relevant sections, then send the completed form to your local People Services section.

Please note that this is not a workers' compensation claim form.

Does Comcare need to be notified?

Under the *Work Health and Safety Act 2011*. Comcare must be notified of certain work incidents. See below for details of the types of incidents to be reported.

Work related incident	Method of report	Timeframe
Death of a person	Phone Comcare on 1300 366 979	Notice must be given immediately after becoming aware that a notifiable incident has occurred in the fastest possible way by phone or in writing (fax, e-mail or other electronic means).
Serious injury or illness OR A dangerous incident	Notify Comcare by: Fax 1300 305 916 OR Online at http://www.comcare.gov.au/preventing/response/incident_notification	

Before sending the notification to Comcare, please print a copy and forward it to People Services

PSG Use Only

Comments

Has this resulted in a compensation claim? No Yes

Has this been recorded in HRMS? No Yes

▶ Incident Report No.