

Line manager to complete this section (Please state what action has been taken to prevent a recurrence)

(Please attach any other relevant information in respect of this incident)

Name of reporting officer Signature Date

This should now be reported to Senior Management in accordance with Service arrangements

Name of senior manager Signature Date

This form plus the Management Investigation Report (HSF3), where applicable, must be processed in accordance with the Service arrangements for incident reporting, to include prompt recording on CIRIS.