**SERIOUS INCIDENT REPORT TEMPLATE**

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| **REPORT ON E&S SERIOUS INCIDENT IN [NAME OF COMPANY]** |
| **Date of report** |  |
| **Company Contact Person** |  / |
| **Date and time of accident / Date of notification to FI**  |  [Date, Time] / [Date/ explanation of delay] |
| **Type of accident** | (e.g. Fatality, major oil spill, explosion) |
| **Victims and damage** | * Fatalities (including number deceased and differentiating between employee/ contractor fatalities and members of the public).
* Number injured (mention hospitalisations/ loss of limb).
* Loss/ damage to company facilities or operating environment.
* Environmental damage (e.g.water pollution).
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| **Immediate response** |  |
| **Description of issue** | Include the following where available or relevant:* names of involved (if fatalities)
* witnesses (including where relevant staff, unions, police, other authorities and other parties)
* routine/non-routine activity being undertaken
* factual statement of what happened
* scene inspection photos/notes
* sequence of events pre-dating accident
* immediate cause
* unsafe acts in sequence
* unsafe conditions in sequence
* underlying causes of unsafe acts/conditions (initial view)
* root cause(s)
* corrective / preventive action for EACH significant cause
* actioned, timed-bound plan (can be attached)
* Interim preventive measures
* Other interim actions required cross-check to other activities / locations for lessons learned
* Any negative publicity (including media) resulting from the incident
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| **Conclusion** | Outline of accident, key causes, corrective/ preventative actions, final position, and lessons learned. |
| **Follow-up by FI**  | * **Complete Sheet B based on preliminary investigation**
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| **SHEET B: FOLLOW-UP CHECKLIST FOR FI** |
| **Areas where further clarity is desired based on current information:** |  |
| **Further information awaited** (utilising third party expertise where necessary): |  |
| **Critical review of accident and investigation status** |  |
| **Credibility of causes and corrective****/preventive actions identified**  |  |
| **Outcome based on above:** | 1. Accept report / findings

Or1. Conditionally accept report / require additional / different corrective actions

Or1. Reject report
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| **Key follow up points**  | Schedule to check / verify implementation of corrective and preventive actions. Include dates. |
| **Additional plans for verification / close-out of actions?** | Is third party expertise required? |
| **Lessons learned that could be shared with other portfolio companies?** |  |