WELL SKILLS CHECK

Writing

TAFE NSW NORTH COAST INSTITUTE

WELL WORKPLACE ENGLISH LANGUAGE & LITERACY Community Services & Health

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Author: The Department of Education, Employment and Workplace Relations

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Writing

NAME: _____

Imagine that there has been an accident or incident at your workplace that needs to be recorded in writing.

Use the form on the next page to fill in your details and describe what happened. Pretend that you are the injured person. The witness can be someone you know or someone you have made up.

You may use the ideas below or describe an incident from your own experience at work. The incident can be real or imagined, for example:

- You slip on a wet floor and sprain your ankle
- An electrical fire starts in the kitchen and you burn your hand
- You hurt your back while lifting a client

You have 15 minutes to complete the task. Write as much as you can and check for mistakes when you are finished.

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Incident / injury report form

Please write clearly and tick the correct boxes.

1. DETAILS OF INJURED PERSON

Name: _____

Address: _____ Sex: ☐ M ☐ F

City: _____ Postcode: _____

Phone: (H) _____ (W) _____ Mobile _____

Date of birth: _____

Email address: _____

Position: _____

Experience in the job: _____ (years/months)

Start time: _____ ☐ am ☐ pm

Work arrangement: ☐ Casual ☐ Full-time ☐ Part-time ☐ Other

2. DETAILS OF INCIDENT

Date: _____ Time: _____

Location: _____

Describe what happened and how:

_____

_____

_____

_____

_____

_____

_____

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2. DETAILS OF INCIDENT CONTINUED

_____

_____

_____

_____

_____

_____

3. DETAILS OF WITNESSES

Name: _____ Phone: (H) _____ (W) _____

Address: _____

_____

4. DETAILS OF INJURY

Nature of injury (e.g. burn, cut, sprain) _____

Cause of injury (e.g. fall, grabbed by person) _____

Location on body (e.g. back, left forearm) _____

Other issues (chair, another person, hot water) _____

5. TREATMENT ADMINISTERED

First Aid given ☐ Yes ☐ No

First Aider name: _____

Treatment: _____

Referred to: _____

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