



FAQs to support Incident Reporting Form

How do you report an accident/ incident?

You will need to complete the online form by clicking on the 'report an incident' button which you will find on the homepage on the [insurance hub](#). This will take you through a series of questions about what happened and who was affected. In the event of a claim, this form will provide a detailed view of what happened.

Can I still complete the current accident form?

No. This [new online form](#) will replace the current accident form which will no longer be accepted by our insurer.

When do I complete this form?

Scottish Gymnastics clubs should keep a record of all accidents/incidents whether major or minor in your Accident Report book which should be kept within the club. However, it is important that all accidents that may give rise to a claim are reported to Scottish Gymnastics as soon as possible after the event and this is done by completing the online form. If the injured person visits the hospital as a result of an accident/incident, this should be reported by completing the online form.

What information is needed to complete the form?

You will need to provide information around the club, where the incident happened, details about the person injured, what type of injury, what were they doing when it happened, treatment provided and witness details in case there is any further action.

Why is this form now online?

The form is online to make it easier to complete and return direct to the Insurer. This is the same process that all clubs follow under British Gymnastics. The form provides a much more detailed summary of what happened which is helpful if there are any future claims or further investigation needed.

My gym has no internet access, what can I do?

The report needs to be submitted soon after the incident. This can be done from another location later on. Refer to the report form below to capture key information at the time. There is more information required than on the previous accident reporting form which enables a full picture of the incident to be captured. Many of the questions provide drop down menu options and yes/no options.

Will I get a copy of the form?

Yes. A copy of the completed form will be emailed to the person who completed the form.

	Notes
Club Name	
Address	
Postcode	
Daytime Telephone Number	
Email address	
Where did the incident happen? (e.g. club/ competition/ school)	
About the Injured Person	
Is the injured party a Scottish Gymnastics Member	
Enter the injured party's membership number	
Name	
Address	
Postcode	
Date of Birth	
Type of membership	
Daytime Telephone Number	
Email address	
Does the injured party hold any coaching awards?	
Details of Incident - Activity and Location	
Date of Injury	
Time of Injury	
Discipline	
Equipment being used	
Cause of Incident	
Details of incident	
Circumstances of Incident Please be as specific as possible and explain how the accident happened	
Skill being attempted Please be as specific as possible e.g. stating the skill was a double twisting double back isn't accurate enough - was it tucked or straight?	
How many times has this skill been successfully completed	
Was the injured party being supervised?	
Where was the coach when the incident occurred?	
Coach's Scottish Gymnastics Membership Number	
Coach's Name	
Coach's Membership Level	
How many people were being supervised by the above	
Coach qualified to supervise this activity?	
Details of Incident - Injury Details	

Nature of Injury	
Body Part Injured	
Was any First Aid treatment given	
Details of first aid given	
Did the injured person go to hospital	
Was the injured person hospitalised for more than 24 hours	
Property Damage - incident details (if applicable)	
Place of incident	
Date of incident	
Time of incident	
Circumstances of incident	
What property has been damaged?	
Who owns the property that has been damaged?	
What is the estimated value of the property that has been damaged?	
Was the activity risk assessed prior to the incident	
Was an accident book entry made at the venue?	
Name of the person who dealt with the accident book entry	
Contact telephone number of the person who dealt with the accident book entry	
Witnesses	
If the incident was witnessed please provide the name and contact number for each witness	
Potential Claim	
Has any threat of or actual legal action been made?	
Other Information	
Is there any other information you feel is relevant	
Your Details	
SG Membership Number	
Name	
Address	
Postcode	
Daytime Telephone Number	
Email address	
Position (e.g. coach, safeguarding officer etc.)	