



## INCIDENT INVESTIGATION REPORT

(Completed after an Incident Report is submitted)

---

### 1. LINKED INCIDENT DETAILS

Incident Report Reference Number: \_\_\_\_\_

Date Investigation Started: \_\_\_\_\_

Investigating Staff Member: \_\_\_\_\_

Role: ☐ Supervisor ☐ Manager ☐ Duty Manager

### 2. ACTIVITY UNDER INVESTIGATION

Activity Involved (tick one):

☐ Pro Karts

☐ Fun Karts

☐ Two Seater Kart

☐ Bumper Boats

☐ Trampoline Park

☐ Mini Golf

☐ Hydro Slide

☐ Laser Tag

☐ Spa Pools

☐ Other: \_\_\_\_\_

Specific Area / Lane / Kart / Boat / Zone:

---

---

### 3. PARTICIPANT PROFILE (INVESTIGATION CONTEXT)

**Participant Age:** \_\_\_\_\_

☐ Child ☐ Youth ☐ Adult

**Was the participant eligible for this activity?**

☐ Yes ☐ No ☐ Unclear

**Height / Age / Weight requirements met (if applicable):**

☐ Yes ☐ No ☐ Not Applicable

### 4. BEHAVIOUR & USE ASSESSMENT

**Was the activity being used in accordance with company policy and briefing?**

☐ Yes

☐ No

☐ Unsure

**Behaviour observed (tick all that apply):**

☐ Excessive speed

☐ Deliberate contact

☐ Unsafe manoeuvres

☐ Ignored staff instructions

☐ Horseplay

☐ Standing or leaning incorrectly

☐ Misuse of equipment

☐ Sliding incorrectly

☐ More than one person at a time

☐ Other: \_\_\_\_\_

**Comments / Findings (detail what was observed):**

---

---

---

---

## 5. WARNINGS & INTERVENTIONS PRIOR TO INCIDENT

**Had the participant received any warnings or strikes prior to the incident?**

- ☐ No
- ☐ Yes – verbal warning
- ☐ Yes – behaviour strike
- ☐ Yes – final warning
- ☐ Unknown

**Details of warnings or staff intervention:**

---

---

---

## 6. STAFF RESPONSE AT TIME OF INCIDENT

**Did staff intervene immediately?**

- ☐ Yes ☐ No

**Actions taken (tick all that apply):**

- ☐ Participant stopped
- ☐ Activity paused
- ☐ Activity shut down
- ☐ Equipment isolated
- ☐ Supervisor called
- ☐ Manager notified

**Comments / Findings (response and timing):**

---

---

---

## 7. EQUIPMENT & FACILITY INVESTIGATION

**Was equipment inspected?**

- ☐ Yes ☐ No

**Equipment Identification (kart number, boat number, lane, etc.):**

---

**Inspection Outcome:**

- ☐ No faults identified
- ☐ Minor issue found (not causal)
- ☐ Fault identified that may have contributed
- ☐ Fault identified as primary cause

**Comments / Findings:**

---

---

**Was equipment removed from service?**

- ☐ No
- ☐ Yes – temporarily
- ☐ Yes – until repaired

---

**8. ENVIRONMENTAL & OPERATIONAL FACTORS****Conditions present:**

- ☐ Dry
- ☐ Wet
- ☐ Slippery
- ☐ Wind
- ☐ Poor visibility
- ☐ High patron numbers
- ☐ Other: \_\_\_\_\_

**Were controls adequate (signage, supervision, briefings)?**

- ☐ Yes
- ☐ Partially
- ☐ No

**Comments / Findings:**

---

---

---

## 9. ROOT CAUSE ANALYSIS

### Primary cause identified:

- ☐ Participant behaviour
- ☐ Equipment condition
- ☐ Environmental factors
- ☐ Operational or staffing issue
- ☐ Combination of factors

### Root cause explanation:

---

---

---

## 10. CORRECTIVE & PREVENTATIVE ACTIONS

### Immediate corrective actions taken:

### Further preventative actions required:

- ☐ Staff retraining
- ☐ Policy clarification
- ☐ Equipment repair or replacement
- ☐ Signage or briefing update
- ☐ Increased supervision
- ☐ No further action required

### Details & responsibility:

Person Responsible: \_\_\_\_\_

Target Completion Date: \_\_\_\_\_

---

## 11. ESCALATION & NOTIFICATION (MANDATORY)

### Does this incident require escalation or external notification?

- ☐ No
- ☐ Yes – internal review
- ☐ Yes – external authority

**⚠ If YES to any option above, you MUST contact Nick or Betsy immediately and directly to notify them.**

☐ Nick contacted ☐ Betsy contacted

**Time & method of contact (call/text):**

---

---

## **12. INVESTIGATION CONCLUSION & SIGN-OFF**

**Investigator Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Manager Review Completed:**

☐ Yes ☐ No

**Manager Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_