

# Accident report

for children in daycare facilities or preschool language training, schoolchildren, university students

1 Name and address of the institution

2 Institution

3 Number the institution is registered under with the accident insurance provider

4 Recipient

Unfallkasse  
Baden-Württemberg  
70324 Stuttgart  
GERMANY

5 Family name, given name(s) of the insured person					6 Date of birth	Day	Month	Year		
7 Street address				Postal code	City					
8 Gender <input type="checkbox"/> male <input type="checkbox"/> female		9 Nationality		10 Name and address of the person legally authorized to represent the insured person						
11 Fatal accident? <input type="checkbox"/> yes <input type="checkbox"/> no		12 Time of the accident		Day	Month	Year	Hr	Min	13 Accident location (street address, city, postal code)	
14 Detailed description of how the accident occurred (esp. the type of event; in case of a sports accident, please specify the type of sport)										
The information is based on a statement provided by <input type="checkbox"/> the insured person					<input type="checkbox"/> (an)other person(s)					
15 Injured body parts					16 Type of injury					
17 Did the insured person cut short his/her visit to the institution					<input type="checkbox"/> no	<input type="checkbox"/> immediately	<input type="checkbox"/> later, on	Day	Month	Time
18 Has the insured person resumed visiting the institution?					<input type="checkbox"/> no	<input type="checkbox"/> yes, on	Day	Month	Year	
19 Who first took note of the accident? (Name, address)							Was this person an eyewitness?			
							<input type="checkbox"/> yes	<input type="checkbox"/> no		
20 First aid: Name and address of the medical professional or hospital					21 Start and end of the visit to the institution					
					Start	Hr	Min	End	Hr	Min
22 Date		Director (authorized person) of the institution				Phone no. for further questions (contact)				

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## I. General notes

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- **Who** should report the accident?  
**Employers** (responsible for material costs) are obliged to report an accident. They can authorize other persons to report the accident on their behalf. In schools and daycare facilities for children, this will typically be the director.
- **When** should an accident be reported?  
Work accidents and accidents that occur on the way to work (e.g. enroute between the employee's home and his/her place of work/institution) must be reported, if they cause **inability to work for more than three calendar days** or lead to the **death** of the insured person.
- **Who** receives the accident report?
  - The responsible accident insurance provider.
  - If the company is supervised by general occupational safety (agricultural companies only insofar as they employ staff), **one copy** must be forwarded to the state authority responsible for occupational safety (e.g. trade supervisory authority, occupational safety authority).
  - If the company is under the supervision of a mining authority, **one copy** must be forwarded to the relevant lower mining authority.
  - **One copy** must remain at the company for documentation purposes.
  - **One copy** must be forwarded to the staff council, if applicable. The accident report must be co-signed by the staff council.
- **Who** should be informed of the accident report?
  - Insured persons must be informed about their right to demand a copy of the accident report.
  - Safety engineers and in-house physicians.
- **How** should the accident be reported?  
By post or online, if the accident insurance company offers such a service.
- What is the **deadline** for reporting an accident?  
The accident should be reported **within three days** of learning about it.
- What should I consider in regard to **grave** accidents, mass accidents and fatalities?  
Fatal accidents, mass accidents and accidents with severe health repercussions must be reported **immediately** by phone, fax or email to the responsible accident insurance provider and/or the responsible state authority (e.g. trade supervisory authority, lower mining authority).

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## II. Instructions for completing the accident report

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- ad 2 You should state the name of the institution (e.g. parish, city)
- ad 3 You should state the number (membership number) the company is registered under with the accident insurance provider (e.g. as shown on the bill (Beitragsbescheid) or the insurance coverage letter (Bescheid über die Zuständigkeit)).
- ad 14 The description of how the accident occurred should include detailed information about the accident and the immediate circumstances leading up to it (e.g. where, how, why, under which circumstances the accident happened). The description of the circumstances of the accident should provide detailed information about the following:
- **Location that the accident happened**  
e.g. in a corridor, in the school yard, in a seminar room, in the sports hall
  - **Event type**  
e.g. regular class, Bundesjugendspiele (annual youth sports event), class outing, special tutoring, childcare over lunch
  - **Circumstances that characterize how the accident occurred**  
e.g. falling with the bicycle, slipping on a wet floor, collision with another child, tussle/dispute among schoolchildren, stumbling on the stairs, injury by snowball
  - **Special circumstances**  
e.g. hard-packed snow, wet floor or leaves, handling of hazardous substances
- In regard to sports accidents that happen at school, the type of sport and event type (mandatory physical education as per the class schedule, working group/club, required elective and/or elective subject, school sports competition) must be stated. If required, please continue the description of the accident on a separate sheet.
- ad 15 Examples: Right forearm, left index finger, left foot and right side of the head
- ad 16 Examples: Contusion, fracture, sprain, burn, laceration, cut