# **Data Mapping**

You can find the CSV template here.

| **Template Column** | **Description** | **Format** |
| --- | --- | --- |
| **Date of Incident** | What date did this incident occur? | dd/mm/yyyy |
| **Company Responsible** | Which company was responsible for the work task? | Choose from:   * Contracted 3rd party * Hire company * Manufacturer personnel * Owner / operator * User * Unknown |
| **Country** | Which country did this incident occur? |  |
| **Incident Outcome** | What was the main outcome? | Choose from:   * Fatality * Major injury * Minor injury * First aid * Near miss * Damage to machine or property |
| **Incident Classification** | What type of incident occurred? | Choose from:   * Falls: Fall from platform * Falls: Fall from height (not platform) * Falls: Slipped, tripped, fell from same level * Contact: Collision - contact with an object or person * Contact: Bump - person walks into object / machine * Contact: Crushing, trapping, pinching * Contact: Entrapment * Contact: Hit by falling object * Contact: Hit by vehicle or machine * Contact: RTA vehicle accident * Electrical: Electric shock * Electrical: Electrocution * Electrical: Fire / explosion * Stability: Overturn * Stability: Loading / unloading tipover * Stability: Ground condition instability * Stability: Machine sinking * Personal: Fluid injection / exposure to harmful substances * Personal: Manual handling * Personal: Using hand tools * Personal: Using power tools * Personal: Inadequate safety equipment * Personal: Unsafe situation (describe in comments) * Machine: MEWP inoperable mechanical / technical * Machine: Environmental damage * Machine: Transport * Machine: Theft of machine * Machine: Theft of components |
| **Number Injured** | How many people were involved? | Number (0-10) |
| **Description** | Description of the incident and investigation | Free text box  Please do not include personal, or identifiable, data such as:   * Names * Contact details * Date of Birth / Age * IPAF Licence Number   Note: Further examples of what is classed as personal data can be found in the [ICO website](https://ico.org.uk/for-organisations/guide-to-data-protection/guide-to-the-general-data-protection-regulation-gdpr/key-definitions/what-is-personal-data/#1) |
| **Machine Make** | What is the machine brand? | Free text box |
| **Machine Model** | What is the machine model? | Free text box |
| **Machine Type** | What category is the machine? If you are unsure, please visit [www.ipaf.org/categories](https://www.ipaf.org/categories) | Choose from:   * No machine involved * 1a * 1a PAV * 1b towable * 1b tracked / spider * 1b vehicle * 2a * 2b * 3a * 3b * 3b tracked * Mast Climbing Work Platform * Telehandler * Goods Hoist * Transport Platform Hoist * Passenger Hoist * Unknown |
| **Machine Configuration** | How was the machine positioned when the incident occurred? | Choose from:   * Elevated * In transit * Load / unload * Maintenance * Manually manoeuvring machine * MCWP erection and dismantling * Not in use * Platform entry or exit * Set up / stowing * Travel in elevated position * Travel in lower position * Walking MEWP * Unknown |
| **Location** | Where did the incident happen? | Choose from:   * Construction site * Commercial premises * Office * Public area * Roads and highways * Training centre * Workshop * Yard |
| **Industry Sector** | What is the type of industry? | Choose from:   * Construction * Electrical * Arboriculture * Facilities management service (maintenance / painting / cleaning) * Telecommunications * Manufacturing / logistics * Rental activity * Other (describe in comments) |
| **Ground Conditions** | What were the ground conditions when the incident occurred? | Leave blank or choose from:   * Indoor even hard surface * Indoor uneven surface * Outdoor hard standing / concrete * Outdoor even firm ground * Outdoor uneven firm ground * Outdoor soft ground / gravel / sand * Outdoor sloping ground |
| **Industry Sector Other** | Complete if you have chosen ‘Other (describe in comments)’ | Free text box |
| **Time and Light Levels** | When in the day and what were the light levels when the incident occurred? | Leave blank or choose from:   * Morning - dark * Morning - light * Afternoon * Evening - light * Night - dark |
| **Weather Conditions** |  | Leave blank or choose from:   * Sunshine * Cloud * Light rain * Heavy rain / storm * Snow / ice * Mist / fog |
| **Wind Strength** |  | Leave blank or choose from:   * No wind * Light breeze * Strong wind * Storm |
| **Person 1 Outcome** | What was the outcome for the person? | Choose from:   * Fatality * Major injury * Minor injury * First aid * No injury |
| **Person 1 Body Part Injured** | What body part was most injured? | Choose from:   * N/A * Ankle * Eye * Foot * Hand * Head / face * Lower limb * Trunk * Upper limb * Unknown |
| **Person 1 Role** | Which best describes their role in the incident? | Choose from:   * Company staff * Delivery driver * Ground person / banksman * Hire company operator * Inspector / instructor * Operator or occupant * Public * Technician / engineer * Other |
| **Person 1 Training and Experience** | What is the level of training and experience of the person involved? | Choose from:   * IPAF trained / novice * IPAF trained / experienced * Trained / novice * Trained / experienced * Self taught / experienced * No training / zero experience * Unknown * N/A |
| **Person 1 Primary Injury** | What was the worst injury sustained? | Choose from:   * N/A * Amputation * Bruising / impact pain * Burns * Concussion * Cut / laceration / puncture * Electric shock * Eye contamination / injury * Fracture * Medical condition / illness * Sprain / strain * Unknown |
| **Person 2 Outcome** | What was the outcome for the person? | As above (if applicable) |
| **Person 2 Body Part Injured** | What body part was most injured? | As above |
| **Person 2 Role** | Which best describes their role in the incident? | As above |
| **Person 2 Training and Experience** | What is the level of training and experience of the person involved? | As above |
| **Person 2 Primary Injury** | What was the worst injury sustained? | As above |
| **Person 3 Outcome** | What was the outcome for the person? | As above (if applicable) |
| **Person 3 Body Part Injured** | What body part was most injured? | As above |
| **Person 3 Role** | Which best describes their role in the incident? | As above |
| **Person 3 Training and Experience** | What is the level of training and experience of the person involved? | As above |
| **Person 3 Primary Injury** | What was the worst injury sustained? | As above |