Years Month	Accident Type	Contact with moving machinery or material being machined	Hit by a moving, flying or falling object	Slipped, tripped or fell on the same level	Physically assaulted by a person	Injured while handling lifting or carrying	Injured by an animal	Contact with electricity or an electrical discharge	Fall from height - Please indicate height in the description	Exposed to or in contact with a harmful substance	Other - Type of accident	Hit something fixed or stationary	Sporting Injury - Not work related	Other - Pupil injury	Grand Total
2008															
Oct	1														
	Lost time >3 days	0	0	2	0	3	0	0	0	0	0	0	0	0	5
	Non Reportable Accident/ Incident	1	2	12	11	7	0	0	0	1	4	2	0	1	41
	Injury to Member of Public – Taken to Hospital	0	1	3	0	0	0	0	0	0	0	0	1	3	8
Nov															
	Lost time >3 days	0	1	3	0	3	1	0	1	0	0	0	0	0	9
	Non Reportable Accident/ Incident	0	4	10	8	9	1	0	0	2	3	3	1	1	42
	Injury to Member of Public – Taken to Hospital	0	0	1	0	0	0	0	0	0	0	0	3	1	5
Dec															
	Lost time >3 days	0	0	2	0	1	0	0	0	0	0	0	0	0	3
	Non Reportable Accident/ Incident	0	2	16	7	3	1	0	1	0	1	0	0	0	31
Grand Total		1	10	49	26	26	3	0	2	3	8	5	5	6	144