

Tool 25 – Incident Learning Form

Complete this form after a mistake, misunderstanding, customer complaint, safety issue, near miss, communication problem, process problem, or other business incident.

The purpose is to learn from the incident — not to assign blame.

Section 1 – Information

Name:	
Role / Job Title:	
Business / Team:	
Date:	
Owner / Lead Name:	

Section 2 – The Incident

Describe what happened:

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What task were you performing?

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What did you think was supposed to happen?

What actually happened?

Quick Check

Was anyone hurt?

☐ Yes ☐ No

Was any equipment or property damaged?

☐ Yes ☐ No

Was a customer affected?

☐ Yes ☐ No

Section 3 – Understanding

What information do you think was missing?

What part of the task was confusing?

Did you make any assumptions?

Looking back, what should have been explained better?

Section 4 – Lessons Learned

What did you learn from this incident?

What would you do differently next time?

What advice would you give another team member?

What changes could help prevent this from happening again?

Who should know about what you learned?

- ☐ Owner / Lead ☐ Team
- ☐ Business ☐ Not Sure