Safeguarding incident reporting form

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| **About this form and the person completing it** |
| Your name | Your phone number | Your mobile number | Your e-mail address |
| Are you reporting:*Please tick the appropriate box(es)* | An incident | A disclosure | A concern |
| Department /Group / ministry area | Date completed |
| **About the person or people we are concerned about or involved in the incident** |
| Their name(s) | Their Address and contact details | Their Date of birth | Name & contact details for parent / (where appropriate) |
| *Please insert more lines as required* |  |  |  |
| **Details of the incident / disclosure / concern** |
| *What happened / was said / have you noticed etc?* |
| **Context of the incident / disclosure / concern** |
| *Where / when / who else was present etc*. |
| Date of incident / disclosure | Time of incident / disclosure |
| Action taken to ensure immediate safety |
| Other action taken or advice sought |
| Signature |
| **For office use only: Form reference –**  |

**Safeguarding incident reporting form**

**Notes for completion**

**About this form and the person completing it**

Please complete all sections

**About the person or people we are concerned about or involved in the incident**

When reporting a concern involving a child or young person, please complete all sections.

When reporting a concern about an adult, the parent / carer details may not be required. Where this is recorded, please include the relationship to the person involved. Please insert additional lines as required.

**Details of the incident / disclosure / concern**

Please include as much relevant detail as you can

When reporting a disclosure, please quote the individual where possible. Please also comment on their body language or any other non-verbal communication that might be useful.

When drawing conclusions, please include the evidence that has led to that conclusion.

**Context of the incident / disclosure / concern**

Please include as much relevant detail as you can

**Action taken to ensure immediate safety**

Please provide details. If no action was required, please indicate by writing “None”.

**Other action taken or advice sought**

If any advice was sought, please provide details including who you spoke to, their contact details and what advice was given or action that was taken.

**Signature**

Please ensure that you sign the form.