

Safeguarding Incident Reporting Form

Victim/survivor must consent to their name being used. Where they do not consent, let them know what information is being provided in the form and how that information will be used.

Please put in sealed envelope marked confidential or write confidential in the message subject line if emailing the form.

Your information					
•					
Name					
Email					
Contact number(s)			1		
Name of organisation		Your role			
Personal information know	own about the v	victim/survivor	(if this information is being provided)		
Name			Gender		
Date of Birth					
Age					
Is the victim/survivor a pr No Yes If yes, provide de		cipant?			
Is there any other information that would be useful to share? E.g. languages spoken, accessibility requirements etc.					
Is the victim/survivor currently safe? No Yes Don't know					
What security measures are required to make the victim/ survivor safer?					
Contact information about the parent/carer (for children under 18 and vulnerable adults if					
known)		T			
Name (s)					
Address					
Contact number(s)					
Email					
Have they been notified of incident?	of this	• No	Please explain why not		

	• Yes	Please give details of what was said/actions agreed		
Information about the subject of the co	mplaint			
Name				
Gender				
Age				
Name and address of organisation				
Role				
Email				
Contact number (s)				
aware of the complaint.	u be useful to s	share? E.g. where are they now, are they		
Incident details (Attach a senarate shee	t if more space	a is required)		
Incident details (Attach a separate sheet if more space is required) Please provide details about the reported safeguarding allegation or concern including dates,				
names, observations of behaviour, injuries, emotional state, and the victim/survivor account of				
the incident (if known) and any witness a		, , ,		
Any advice sought				
Please provide details of who else has been informed and advice given.				
External agency involvement				
Has the incident been reported to any	● No	Yes - Please provide details		
external agencies				
Name of organisation/agency				
Contact person				
Contact number(s)				
Email				
Agreed action or advice given				
Agreed action or advice given				
Agreed action or advice given				
Agreed action or advice given				
Action Taken	data			
	date.			
Action Taken	date.			
Action Taken Please provide details of action taken to	date.			
Action Taken Please provide details of action taken to Declaration	date.			
Action Taken Please provide details of action taken to Declaration Your signature	date.			
Action Taken Please provide details of action taken to Declaration	date.			

ALL INFORMATION MUST BE HELD AND HANDLED SECURELY IN LINE WITH THE REPORTING AND INVESTIGATION PROCEDURES AND DATA PROTECTION REQUIREMENTS