# SAFEGUARDING INCIDENT REPORTING FORM

***CONFIDENTIAL WHEN COMPLETED***

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| **SECTION 1: WHAT ARE YOU REPORTING?** |
| Please indicate what you are reporting:  ☐I have concerns that harm may be occurring (complete sections 2, 3 & 4)  ☐ I was involved in an incident with a child (complete sections 2, 3, & 5)  ☐ I was a witness to an incident with a child (complete sections 2, 3 & 5)  ☐ I have received an allegation of harm (complete sections 2, 3 & 6)  ☐ A child has told me that they are being harmed (complete sections 2, 3 & 6) |

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| **SECTION 2: YOUR DETAILS** |  |
| Your name: |  |
| Your contact details (email, telephone, address): |  |

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| **SECTION 3: DETAILS OF CHILD / ADULT INVOLVED** | |
| Name of child: |  |
| Child’s address (if known): |  |
| Child’s date of birth (if known): |  |
| Parent /Carer’s name & address if known: |  |
| Is the child aware of this referral? (Children should normally be informed that disclosures must be passed on). | YES / NO |
| Is the parent / carer aware of this referral? (parent/carer should not normally be informed until further advice has been taken). | YES / NO |
| Name of adult: |  |
| Role of adult: |  |

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| **SECTION 4: CONCERNS THAT HARM MAY BE OCCURRING** |
| Please use the space below to record your concerns. Include:   * Behaviour you have witnessed or things you have seen online or heard. * Times/dates and as much detail as you are able, including direct quotes where possible. * Names / details / descriptions of any alleged perpetrator if available. * Any injuries, marks or bruising visible on the child (do not remove any clothing or ask the child to do so). * Details of any witnesses * Any other information |

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| **SECTION 5: AN INCIDENT WITH A CHILD** |
| ☐ I accidentally hurt a child  ☐ A child misinterpreted or misunderstood something I did / said  ☐ I had to use physical restraint or emergency physical contact  ☐ I was witness to one of the above (please specify which): |
| Please use the space below to record details of the incident, including location, what took place, and who was present: |

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| **SECTION 6: A DISCLOSURE OF HARM** |
| Please use the space below to describe what you have been told, and by whom. Include all details including dates and times. If the disclosure is made by a child, record the conversation using their words. Include names / details / descriptions of any alleged perpetrator if available. |

SIGNED:

PRINT NAME:

DATE:

Submit this form to the Safeguarding Lead as soon as possible. Information contained within this form should not be disclosed, except to Safeguarding Lead, Police or Children’s Services, without the prior approval of the Safeguarding Lead.