

Safeguarding Incident Form



Reporter's Details

Name of Person Reporting	
Position Title	
Contact Number	
Line Manager	

<p>What do concerns relate to?</p> <p>Please circle all that are applicable.</p>	<ul style="list-style-type: none"> ▪ A disclosure from the child. ▪ A disclosure from someone else relating to the child. ▪ Possible indicators of concern. 	<ul style="list-style-type: none"> ▪ Concerns for a staff member's welfare. ▪ Concerns/observations relating to a staff member. ▪ An allegation against a staff member.
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Child's Details

Child's Full Name			
Date of Birth	DD/MM/YYYY	Age	
Residential Address			
Are there any other children at this address?			
Does the child have siblings?			
<i>(If known include their Names and D.O.B)</i>			
Are there any additional needs to be considered?	E.g. Disabilities, language needs, etc.		
Name of the Child's School <i>(If known and of school age)</i>			

Parent/Guardian Details

Full Name of Primary Carer			
Relationship to the child		Contact Number	
Residential Address <i>(If different to that noted for the child)</i>			
Are there any additional needs to be considered?	E.g. Medical needs (diagnosed or advised) Disabilities, language needs, etc.		
Are they aware of the Concerns? <i>If yes, what have they been told and what was their response.</i>	YES / NO		

Full Name of Secondary Carer			
Relationship to the child		Contact Number	
Residential Address (if different to the child)			
Are there any additional needs to be considered?	E.g. Disabilities, language needs, etc.		
Are they aware of the Concerns? <i>If yes, what have they been told and what was their response.</i>	YES / NO		

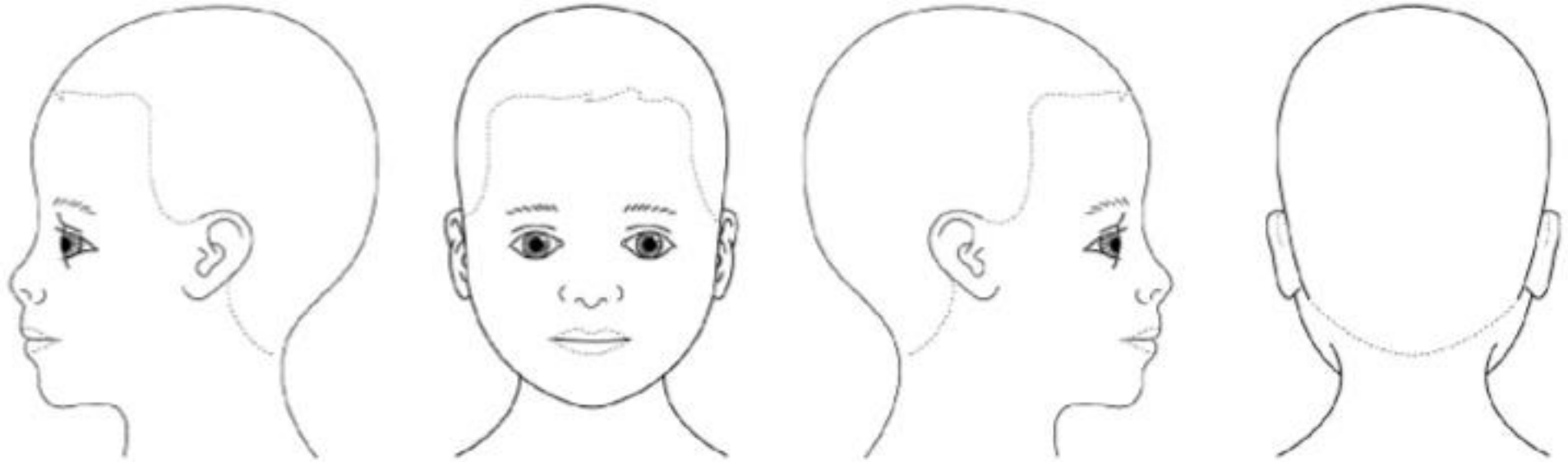
Does the Concern Relate to A Staff Member?

Full Name of the Staff member concerned			
Their Position Title		Their Area/ Place of Work	

Details of the Concern

Please detail the concerns:	Date of Incident:		Time or Approx. Time	
<p><i>Set the scene so the person reading has an idea of any context surrounding the incident.</i></p> <p>Think:</p> <ul style="list-style-type: none"> ▪ When ▪ What ▪ How ▪ Where ▪ With who? <p><i>What did you see/hear? Use quotes and the child's words.</i></p> <p><i>Use the body map to reflect any physical indicators.</i></p>	<p>Set the scene, describe what has happened and anything in particular that made you concerned.</p>			
<p>What happened after the incident?</p> <p><i>Note any actions that were taken and by who.</i></p> <p><i>Include what was said to the child or person sharing the concern/disclosure</i></p>				
<p>Have you shared this concern with anyone else?</p> <p><i>If so,</i></p> <p><i>Who?</i></p> <p><i>Were they told the full story or a summary? If different to above, what where they told?</i></p> <p><i>What actions were agreed?</i></p>				

Body Map of Facial Injuries/Concerns



Full Name of Injured Person	
Date/Time Identified	
Description of Injuries/concerns	
Name of Person Reporting	

Body Map of Injuries/Concerns

FRONT	BACK

Full Name of Injured Person	
Date/Time Identified	
Description of Injuries/concerns	
Name of Person Reporting	