



## INCIDENT & CONCERN REPORT FORM

This form must be completed as soon as possible after receiving information that causes a concern. Contact the Wellbeing and Protection Officer on **07788393939** to report the concern then email the completed form to **[safeguarding@hiberniancf.org](mailto:safeguarding@hiberniancf.org)** as soon as possible after completion; do not delay by attempting to obtain information to complete all sections.

### COMPLETING THE FORM

#### Part A – Contact Information

Please complete Part A to include all relevant contact information. Where the concern is about a child and the conduct of an adult relating to that child then both parties information must be completed. You must also include your contact information.

#### Part B – Details of the Concern

Please complete this section to include as much information as possible. Where possible please include information about dates, times and location. If the concern has been reported to you by a child, please use the child's words and also record anything that you said to the child.

#### Part C – Information Sharing

Please complete this part of the form if you have shared the information with any third party including a child's parents/carers, named person or with other services including the police, social services, adult protection, school or any other relevant organisation

Remember to maintain confidentiality on a need to know basis – do not discuss this incident with anyone other than those who need to know.

#### Part D – For use by the Wellbeing and Protection Officer

This section is for use by the Wellbeing and Protection Officer and should not be completed by the person reporting the concern.

#### IMPORTANT INFORMATION:

Please do not keep any electronic, printed or written versions of this form. It is important to maintain confidentiality to delete or shred as soon as the information has been passed on. This information will be retained by the Wellbeing and Protection Officer in a secure and confidential manner.



## PART A - CONTACT INFORMATION

### Your details

Name:	Telephone: Email:
Position/Role: Date:	

### Child / vulnerable adult details

Name:	Date of Birth:
Address:  Post Code:	Telephone:
Preferred Language	Is an interpreter required? YES / NO
Any Additional Needs?	

### Parent / carer / next of kin details

Name:	Relationship to person above:
Address:  Post Code:	Tel No:  Email:
Preferred language:	Is an interpreter required? YES / NO

### Wider support details (school, teacher, social worker, support worker, etc – if known)

Name:	Occupation:
Address:	Tel No: Email:



Post Code:	
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Other people directly involved in incident / concern

Name:	Tel No:
Address:	Relationship to person above (if any):
Post Code:	

**PART B – DETAILS OF THE CONCERN**

Details of incident / concern, including dates & times:
Person affected view (if expressed). Where possible, please use the person's own words:
Details of any other witnesses/other people involved:
Details of any injuries:
Action taken so far and when:

Other relevant information:

**PART C – INFORMATION SHARING (if applicable)**

PLEASE NOTE – it will usually not be necessary to share information. Only share information on a need to know basis. If you are unsure as to who you should inform, please contact the Wellbeing and Protection Officer.

Who has been informed?	
Person's parents/carers/next of kin?	<p>If yes, record details:</p> <p>If no, please state why?</p>
Wider support (school, teacher, social worker, support worker, etc)	<p>If yes, record details:</p>
Police	<p>Name, role and contact number:</p> <p>Incident number (if applicable):</p> <p>What information was shared and why:</p> <p>Details of advice received:</p>

Return completed form to [safeguarding@hiberniancf.org](mailto:safeguarding@hiberniancf.org)



**PART D – FOR WELLBEING AND PROTECTION OFFICER OR DEPUTY USE ONLY**

Wellbeing or protection incident / concern:

Your name:

Action taken:

Information shared with third party:

Outcome:

Process recommendations: