



Safeguarding Incident Report Form



This form should be completed at the time or immediately following disclosure, but after all necessary actions have been taken. Please complete the form as fully as possible.

It should be used to record safeguarding concerns relating to Children or Adults at risk. In an emergency please do not delay in informing the police or social services. All the information must be treated as confidential and reported to the Regional Safeguarding Officer as soon as possible.

1. Your details – the person completing the form:

Name	
Position within HRGB	
Address	
Telephone	
Email	

2. Details of the person affected:

Name	
Address	
Telephone	
Email	
Date of birth if under 18	
Name & contact details of the parent/carer/guardian if applicable	

3. Details of the incident – please describe in detail using only the facts:

Date & time	
What have you seen or heard?	
What has the person affected said to you? (do not lead or investigate - just record actual details.)	

Additional relevant information (please detail anything else that you believe to be helpful or important)	
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4. Details of any other witnesses:

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5. Action taken so far:

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I have completed this form and provided information that is factual and does not contain my own views or opinions on the matter.

Print name	
Signature	
Date	

Do not discuss this incident with anyone other than those who need to know.