



# SAFEGUARDING INCIDENT REPORTING FORM

You may use this form to report concerns related to a breach of the safeguarding policy or other relevant policies.

Submit to: *Safeguarding Trustee* **Simon.m@vcr.email**

**NOTE: This report is confidential and must not be given or the contents disclosed to any unauthorised person.**

Safeguarding incident reporting form	
To be filled by the complainant or safeguarding focal person either with or without the complainant	
<b>Details of the person completing the form (leave blank if you prefer to stay anonymous)</b>	
Name:	
Organisation's name:	
Designation:	
Relationship to the vulnerable individual :	
<b>Details of the individual with safeguarding concern (child/vulnerable adult)</b>	
This information will only be shared on a need-to-know basis.	
Name:	
Age:	
Gender:	
Address:	
Phone number:	
Language spoken:	
In the case of a child, whom does the child live with? (e.g., household structure/ caretaker)	
In your opinion, would it be safe to contact the individual?	
Any other information:	
<b>About the safeguarding concern</b>	



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Date, time and place of the incidents(s):

## Details of concern/suspicion/incident

When receiving a report from an individual remember these key points: do not be judgemental and assure the person that it is ok to tell. [Click here to read more about how to receive a report and the Dos and Don'ts.](#)

How did you come to know about the incident? How did you come to have a concern: was abuse observed or suspected? Was an allegation made?

Details of what happened, including time, dates, location, and names of others involved. Note behaviour, emotional state, or physical signs you may observe and details of the alleged perpetrator.

Note: Continue on a separate sheet if required.

Have you contacted anyone already about this concern (e.g., family member, parents, caretaker, line manager, co-worker, safeguarding focal person or agencies, etc.)?

If yes, then please provide details such as time, date of reporting and person to whom the report was made.



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Advice given by that person (if any):

Any action you may have taken so far (e.g., emergency medical or any other immediate support provided such as safety measures, or psychological support)?  
If so, what, when and by whom?

## Current state/safety concerns of the survivor

Include any immediate safety concerns (e.g., access of the alleged perpetrator to the individual, whether they are displaying behaviour that is a cause for concern).

Undertaking: I can confirm that to the best of my knowledge, the information provided above is correct and that I will be available to answer any further questions on this matter.

**Signed:**

**Date:**

**Note:** Please fill out as much information as possible and submit it to the safeguarding focal person immediately. Please remember that all information contained in this report must be kept confidential and must not be revealed to anyone except the person you reported to.