Safeguarding Case Log and Incident Reporting Form



PART 1: INCIDENT REPORT

Details of person(s) affected (if more than two, copy the table below as many times as necessary)

PERSON 1:

Name:		Gender:	Date of Birth:	
Address, including postcode:		·		
Contact details (including phone, e-mail if any):		Next of Kin (name and contact details):		
PERSON 2 (IF ANY):				
Name:		Gender:	Date of Birth:	
Address, including postcode:				
Contact details (including phone, e-mail if any):		Next of Kin (name and contact details):		
Stage 1 – Managi	ng the Alerting Process			
Brief details of alleged abuse, etc.:				
Alleged perpetrator(s) and status (e.g. staff, tutor, contractor):				
Concern / allegation / disclosure originated by:				
Date and time of concern / allegation / disclosure :				
Policy / Procedure under which the matter originated:		Who O Opfort a Appril	of and Inside of December	
RIE_Safeguarding_Apx 2_Case	e.g. Complaints, Grievance, Hea	ılıı & Salety, Accider	Page 1 of 5	

authority:		Safeguarding authority:	
If the police have been		If the police have	
informed, who		given a crime	
informed them and		reference number,	
when?		state it here:	
If a protection plan has			
been put in place, give			
brief details:			
If protection plan has			
included staff			
suspension or other			
action affecting staff,			
give brief details: Date of informing		Date this form first	
Directorate Team:		sent to Safeguarding	
Directorate ream.		Lead Officer:	
SAFEGUARDING CASE NUMBE		Lead Officer.	<u> </u>
(issued by Safeguarding Lead):	K		
, , ,		i .	
Stage 2 - Post-Referral L	iaison with	External Agencies	
Is the Safeguarding authority			
manging this as a formal	YES or	NO 🗆	
Safeguarding case?	_	_	
If NO, fill in the two sections (high	ighted green) b	elow (and update the chro	onology) and submit this form
to the Safeguarding Lead Officer.	,	•	
to the Saleguarding Lead Officer.			
	er of this form b	elow the two (areen) secti	ions below.
If YES, continue with the remainde	er of this form b	elow the two (green) secti	ions below.
If YES, continue with the remainded If NO, is any further action	er of this form b	elow the two (green) secti	ions below.
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Name and contact

details for

Date alerted to local

Safeguarding authority:

	:				
Who gave this confirmation					
and on what date?	16 :- 1-		4: /: /	(
If an ir below.		nai inves	tigation (only) is to take place, now go to St	age 3
If an external investigation is to					
take place, who (which agency					
and any named person(s)) will					
conduct it?					
Contact details of external					
investigating agency:					
	Provide up	odates o	f externa	I investigation in the Chronology Lo	oq
	· · · · · · · · · · · · · · · · · · ·				- <u>J</u>
Stage 3 - Internal Investi	gation				
33	9				
Investigating Officer			Job Title	e/Role	
Name:			•		
Date investigation brief			Date inv	restigation	
agreed:			commen	nced:	
Date investigation			Date cor	•	
completed:			report se	ent to :	
Stage 4 – Actions, outco	mes and o	closur	e		
D : (, , , , , , , , , , , , , , , , , ,					
Brief summary of outcome of investigation (internal and/or external):					
Investigation (internal and/or exter	ilai).				
Outcome of any disciplinary hearing	ng(s)				
(and any appeals):	.9(-)				
What feedback (and on what date) has				
been given to the local Safeguard	•				
Authority (and any referring / fund	ng				
authority)?			110		
Has any protection plan now ceas		$S \sqcup C$	or NO		
are some aspects to continue (giv	e briei				
details): Any action plans to be carried out	as a YE	<u> </u>	or NO		
result of learning from this case (g		3	oi NO		
brief details).					
This may include further support of					
people affected, staff training and					
supervision, etc.					
Has the Safeguarding authority no	ow .				
closed the Safeguarding case?		S 🗌 d	or NO		
Give the date of receiving confirmation of					
the closure.					
Notes This I		U	. f - 11	IDIEI Ostana III O	
				IRIE! Safeguarding Case log. En	

Stage 5 -Referral to DBS - Children / Adults Barred List (where applicable)

Person who submitted referral:	
Date referral sent:	
Date and details of acknowledgment by DBS:	

Part 2: Safeguarding Case Chronology Log

Date AND Time	Notes of contacts with external agencies, family, senior management, action taken, internal investigation, etc. LOG EVERY EVENT RELEVANT TO THE CASE	Ref No of Supporting Evidence	Manager Sign file copy