

Safeguarding Incident Report Form

Name of person completing form:	
Your position within the club:	
Your contact email:	

Incident details

Child / young person's name:		
Child / young person's address:		
Child / young person's date of birth & membership no:	DOB:	SASA No:
Parents / carers name:		
Parents / carers contact details:	Email:	Tel:
Parents / carers address (if different to above):		
Any special requirements: (e.g. learning disability / 1st language not English)		
Your observations:		

Exactly what the child said (write in child's words) and what you said:
(Remember, do not lead the child – record actual details. Continue on separate sheet if necessary)

Action taken so far and when:

Further actions to be taken:

External Agencies	Yes/No	If Yes - Details of:
Police Scotland	Yes	Name and contact number: Case Incident Number:
	No	Details of advice received:
Social Services	Yes	Name and contact number: Details of advice received:
	No	
Scottish Swimming	Yes	Name and contact number: Details of advice received:
	No	
Local Authority	Yes	Name and contact number: Details of advice received:
	No	
Children 1st	Yes	Name and contact number: Details of advice received:
	No	
Other (NSPCC etc)	Yes	Name and contact number: Details of advice received:
	No	



Signature:

Print name:

Date:

A copy should also be sent to Scottish Swimming on wellbeingprotection@scottishswimming.com within 48 hours of incident.

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

See [Data Protection Policy](#) for storage implications.