

## SAFEGUARDING INCIDENT REPORTING FORM

WRAP is committed to ensuring that every person associated with its work is safeguarded from harm. This form should be used to report any incident/concern related to WRAP staff, interns, and trustees.

Whereas we will take every effort to maintain confidentiality, we will take action depending on the severity of the report or incident. We will always aim to seek consent before acting unless the contents of this form put you, or others, at immediate risk of harm or danger. In this case we are obliged to pass the concerns on, in a sensitive manner, to relevant authorities. We will always inform you of actions taken.

You may wish to submit your concerns anonymously. However please be aware that anonymized reports can limit further investigation. If you wish to disclose your name on a confidential basis, we will make every effort to maintain this confidence. Please return this form to our confidential email: [safeguarding@wrap.org.uk](mailto:safeguarding@wrap.org.uk)

### 1. Reporter's details

Date and time	
Name of person making the report. <sup>1</sup>	
Your location.	
Your contact details, including email address and phone number(s).	

### 2. Type of incident

Individual(s) involved.				
Date and time of the incident.				
Location of incident.				
Identity the nature of the incident	Child Safeguarding	Adult Safeguarding	Sexual Exploitation	Safety / Security

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<sup>1</sup> If you would prefer to stay anonymous, you can leave this box empty

### 3. Details of allegations/concerns

Summary of the incident. Please state in few words what the incident/concern comprises of.	
Details of the incident. who is supposed to have done what, to whom, when, where, who else was present? (Please include facts, not opinions)	
Were / are there any (other) witnesses? <sup>2*</sup> If yes, and where the witness is happy to be contacted by WRAP, please give their contact details.	
Are there any other factors you would like us to consider?	

### 4. Immediate action

Brief summary of any steps already taken.	
Has anyone else been informed of the matter? Please provide details of the name of the agency and of the contact person, and relevant email addresses and phone numbers.	

### 5. Preferred next steps.

What would you like to happen next in relation to this report?	
How would you like the Designated Safeguarding Lead to contact you about this report? Please give your email and telephone number.	

Thank you very much for the time you have taken to complete this report.

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<sup>2</sup> We ask this question because witness testimony can help further investigation, however it is not required.