Section 5: 60. Incident Form

|  |  |
| --- | --- |
| Date  |  |
| Who was involved in the incident? (Please circle) | Child | Adult | Member of staff |
| Name |  |
| Date of birth  |  |
| Date of incident  |  |
| Time of incident |  |
| Place incident occurred |  |
| Explain fully the events leading up to the incident and the incident  |  |
| Witnessed by |  |
| Is there anything we could do to prevent this happening again? |  |
| Staff signature |  |
| Manager signature |  |
| Parents’ comments  |  |
| Parent signature & print name |  |

|  |  |  |
| --- | --- | --- |
| **This policy was adopted on** | **Signed on behalf of the nursery** | **Date for review** |
| *01/01/2020* | *Mrs S Bath (Director)* | *31/12/2021* |