

Please provide reference code

Initial of first name/ month/

in following format:

.....

year

Eg E0624

Dulwich Cricket Club Safeguarding Incident, concerns/ accident form for junior players

This confidential form is designed to report any safeguarding incidents concerns/ accidents involving junior players. It should be completed by the person who has been disclosed to, who witnessed the incident, was most directly involved or who provided first aid if relevant. Once completed it must be submitted to the Dulwich Cricket Club Safeguarding Officer <u>dulwichccsafeguarding@gmail.com</u>

NOTE: Confidentiality must be maintained at all times. Information must only be shared on a "need to know" basis i.e. only if it will protect the child/vulnerable adult. Do not discuss this incident with anyone other than those who need to know.

Name of person completing this form:
Position in relation to child, young person:
Date form completed:

Details of child, young person:

Name:	Address:
Contact number:	Gender:
Date of birth:	Club age group/team if relevant:

Parents/carer details:

Name:	Address:
Contact number:	Email address:
Have parents/carers been notified of the incident?: Yes / No	If yes, please provide details:

Incident Details:

Date/ Time:	Fixture and name of person in charge of the session/ competition:
Location of incident:	
Nature of the incident/ accident and extent of the injury:	
Description of the incident or concern (continue on separat (Include relevant information such as what happened and h	

behaviour witnessed and whether the information provided is being recorded as fact, opinion or hearsay)



Give full details of immediate action taken including any First Aid treatment and the name(s) of the first aiders

If you believe relevant please provide the child, young person account of the incident or concern: (try to use their own words)

If you believe helpful please provide a witness statement with name and contact details on a separate page (Consider anonymising where this will not negatively impact the ability to take immediate response actions)

Please provide details of any persons involved in the incident or alleged to have caused the incident, injury or presenting risk:

Name: Relationship to child or young person: Contact details:

Were any of the following people contacted (delete as appropriate) Police/ Ambulance / School

What happened after the incident/ accident (e.g. went home, went to hospital)

Data Protection

The Club will use the information provided in this form (together with other information it obtains about the player) to administer his/her cricketing activity at the Club and in any activities in which he/she participates through the Club and to care for and supervise activities in which he/she is involved. In some cases this may require the Club to disclose the information to County Boards, Leagues and to the England and Wales Cricket Board. In the event of a medical issue or child protection issue arising, the Club may disclose certain information to doctors or other medical specialists and/or to police, children's social care, the Courts and/or probation officers and, potentially to legal and other advisers involved in an investigation.

As the person completing this form, you must ensure that each person whose information you include in this form knows what will happen to their information and how it may be disclosed. In the event of an incident / accident occurring through insufficient training or faulty equipment / facilities, the follow up action taken should include the completion of a Risk Assessment.

Signed By Author:	Name:	Date:

Reporting to the Designated Safeguarding Lead (DSL) section: (to be completed by DSL)

Date & time DSL notified of incident/concern:

DSL comments: (actions taken / follow-up actions required):

Signed and dated by DSL: