



NON MEDICAL INCIDENTS

TO INCLUDE

- 1. DANGEROUS OCCURENCES**
- 2. INCIDENTS OF BULLYING**
- 3. OCCASIONS WHEN PHYSICAL RESTRAINT HAS TO BE USED**
- 4. SUSPENSIONS OR EXCLUSIONS**
- 5. LATE COLLECTION OF CHILDREN (more than 15 minutes)**
- 6. MISSING CHILDREN**
- 7. INCIDENTS OF A CHILD MAKING INAPPROPRIATE PHYSICAL CONTACT WITH A MEMBER OF STAFF**
- 8. INCIDENTS OF SUSPECTED ABUSE**

**IN THE EVENT OF A COMPLAINT PLEASE USE ONE OF THE FORMS
LOCATED AT THE BACK OF THIS DOCUMENT**



NON MEDICAL INCIDENT FORM

Date of Incident:	Time:
Nature of Incident:	
Details of people involved:	
Name of member of staff dealing with incident:	
Action Taken:	
Signature of member of staff dealing with incident:	
Signature of witnesses (where appropriate):	
Counter-signature of parent (where appropriate):	