WILTSHIRE YOUNG MUSICIANS SERIOUS INCIDENT REPORT FORM

Ensemble/event Name: ……

Physical Address:

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Phone Number(s): ……

Date/Time of Incident: ……

Date/Time Reported to WYM: ……

CHILD(REN) INVOLVED IN INCIDENT (only list children who were involved in the incident; use additional piece of paper if needed)

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ADULTS INVOLVED IN INCIDENT (only list adults who were involved in the incident; use additional piece of paper if needed)

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WITNESSES (may be children or adults; use additional piece of paper if needed)

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DESCRIPTION OF INCIDENT (thoroughly describe the nature and circumstance of the incident and include all relevant details; use additional piece of paper if needed)

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INTERVENTIONS (describe interventions made during and after the incident, such as medical intervention, contacts made, or other follow-up actions; include names, dates, and times of contacts made to CVS, law enforcement, or other individuals; if any child or adult required medical treatment, document date of the exam, name of health-care professional, their findings, and any provided treatment; use additional piece of paper if needed)

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RESOLUTION TO INCIDENT (use additional piece of paper if needed)

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WYM INTERVENTIONS AND FOLLOW-UP (use additional piece of paper if needed)

Report Completed by: _____ Date: _____

Reviewed by Supervisor: _____ Date: _____

WYM Reviewed by: _____ Date: _____

WYM Reviewed by: _____ Date: _____