INCIDENT REPORT FORM – VULNERABLE ADULTS

Toronto Monthly Meeting

Friends’ House

60 Lowther Ave

**Information on person completing report**

|  |  |
| --- | --- |
| Name: | |
| Position (employee/member/attender) | |
| Phone: | E-mail: |
| Date of completion of report: | |

**Information on individuals directly involved in incident:**

|  |  |
| --- | --- |
| Vulnerable adult allegedly harmed: | Person allegedly causing harm: |
| Age: |  |
| Connection to Meeting: | Connection to Meeting: |
| Address: | Address: |
| Telephone: | Telephone: |
| E-mail: | E-mail: |
| Other information: | Other information: |

**Witnesses:**

|  |  |
| --- | --- |
| **Witness # 1** | Phone or e-mail: |
| Relationship to person who allegedly caused harm: | Relationship to vulnerable adult allegedly harmed: |
| **Witness # 2** | Phone or e-mail: |
| Relationship to person who allegedly caused harm: | Relationship to vulnerable adult allegedly harmed: |

**INCIDENT DETAILS**

|  |  |
| --- | --- |
| Time & date of incident(s): | |
| Location of incident: | |
| Description of incident: | |
| **Action taken:** | |
| Reported to police? | If yes, police report number?  Name of officer? |
| Reported to Contact Person? | If yes, who? |

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**INCIDENT REPORT FORM II**

**ACTIONS TAKEN**

Toronto Monthly Meeting

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60 Lowther Ave., Toronto ON

**Record all details of followup action, including: dates people spoken to, and meetings with them, decisions made, final resolution**

**Store in the locked files in Toronto Monthly Meeting office.**