Incident report form

Introduction

When completing this incident report form, please reference the incident reporting procedure, which details:

* Why are incidents reported?
* What is defined as an incident?
* What is the incident reporting process?

Headline information

|  |  |  |
| --- | --- | --- |
| Location |  | |
| Date of incident |  | |
| Incident type | e.g., device confiscated | |
| Incident description |  | |
| Reported by |  | |
| Received by |  | |
| Incident reason | | Choose an item. |
| Was the incident avoidable or unavoidable? | | Choose an item. |
| Was the CIMT activated to respond to the incident? | |  |
| Did any of the affected persons ask for the CIMT to be activated? | |  |

Incident information

|  |  |
| --- | --- |
| Date and time  Describe when the incident occurred as precisely as possible (use the local time zone) |  |
| Location  Describe where the incident occurred as accurately as possible |  |
| Incident description  Describe the nature of the incident and events leading up to the incident, including:  *Who was involved?*  *What caused the incident?*  *What is the impact / material loss resulting from the incident?*  *Are there any witnesses?*  *Please attach sketches / photos when necessary.* |  |
| Specifically targeted?  Describe if and how the incident directly targeted the GI-TOC, including:  *Was the incident targeted against the GI-TOC?*  *Was the incident targeted against individuals (team members, ad-hoc consultants, implementing partners, grantees and fellows)?*  *Were any individuals directly targeted because of any profile factors that resulted in their increased exposure to risk (e.g., gender, sexual orientation, gender identity, gender expression)?* |  |
| Actions taken  Detail any decisions and actions taken following the incident |  |
| Implications for others  Highlight possible implications of the incident in relation to safety, security, health, wellbeing and operations |  |
| Further assistance  Detail any further assistance that is required (e.g., relocation, wellbeing support, leave) |  |

Review

|  |  |  |
| --- | --- | --- |
| Requested?  Would any of the affected persons(s) like the incident to be reviewed? | |  |
| Recommended?  Would the affected person's tether, supervisor, the security committee or the director / deputy director like the incident to be reviewed? | |  |
| Contributing factors  Detail the factors that contributed to the incident.  Consider:  Was it targeted or ‘wrong place, wrong time’?  The environment / context changes  The profile factors that resulted in their increased exposure to risk (e.g., gender, sexual orientation, gender identity, gender expression)  The organization(s) affected  Behaviours before or at the time of incident  Was there a breach in policy / procedure leading or contributing to the incident? |  | |

Follow-up action

|  |  |  |  |
| --- | --- | --- | --- |
| No. | Action required | Owner | When completed? |
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