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 timeDescribe when the incident occurred as precisely as possible (use the local time zone) |  |
| LocationDescribe where the incident occurred as accurately as possible |  |
| Incident descriptionDescribe 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 takenDetail any decisions and actions taken following the incident |  |
| Implications for othersHighlight possible implications of the incident in relation to safety, security, health, wellbeing and operations |  |
| Further assistanceDetail 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 factorsDetail the factors that contributed to the incident.Consider:Was it targeted or ‘wrong place, wrong time’?The environment / context changesThe profile factors that resulted in their increased exposure to risk (e.g., gender, sexual orientation, gender identity, gender expression)The organization(s) affectedBehaviours before or at the time of incidentWas 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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