**Serious Incident Review: Notification**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1** | Person’s initials | | | |  | | | | | | | | | | | | | |
| **2** | Age | | | |  | | | | | | | | | | | | | |
| **3** | Gender | | | | Male | | | | Female | | | | | | Other | | | |
| **4** | Name of responsible local authority | | | |  | | | | | | | | | | | | | |
| **5** | Reason for referral (tick one) | | | | | | | | | | | | | | | | | |
|  | A person subject to a statutory order or licence is charged with and/or recalled to custody on suspicion of a further offence that has resulted in the death or serious harm of another person.  An incident or accumulation of incidents, gives rise to significant concerns about service involvement/lack of involvement  A person subject to a statutory order or licence has died or been seriously injured in circumstances which indicate the need for public assurance. | | | | | | | | | | | | | | | | | |
| **6** | Date of incident (DD/YY/MMMM) | | | | | | |  | | | | | | | | | | |
| **7** | Date service became aware of the incident (if different) | | | | | | |  | | | | | | | | | | |
| **8** | Type and length of requirement/statutory order/licence | | | | | | |  | | | | | | | | | | |
| **9** | Date order imposed/released on licence | | | | | | |  | | | | | | | | | | |
| **10** | Current status of the person | | | | At liberty | | | | In custody | | | | | | Deceased | | | |
| **11** | Brief description of incident/charge resulting in notification:   * circumstances of the incident * nature and extent of harm * gender/age of victim(s) and relationship to victim(s) where known * source of information/ intelligence | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | | | |
| **12** | Category of further offence (select most serious) | | Death of service user | | | | | | | Murder | | | | | | | | |
| Serious violence | | | | | | | Contact sexual offence | | | | | | | | |
| Non-contact sexual offence | | | | | | | Domestic Abuse offence | | | | | | | | |
| Other | | | | | | | | Please specify: | | | | | | | |
| **13** | Intensity of supervision at the time of the serious incident? | | Very high  High  Medium  Low  UPW only | | | | | | | | | | | | | | | |
| **14** | Are other agencies involved in providing support or supervision to this person? If yes, specify who. | | | | | | | | | | | | | Yes | | | | No |
|  | | | | | | | | | | | | | | | | | |
| **15** | Do any of the following criteria apply to this person? | | | Currently looked after child | | Receiving continuing care/aftercare | | | | | | Living in a regulated care establishment | | | | Other ongoing review process | | |
| **16** | Are high levels of public or media attention anticipated? | | | | | | Yes | | | | | | No | | Not Known | | | |
| **17** | Where the notification relates to an alleged further offence are there charges pending against the person? | | | | | | Yes | | | | | | No | | Not Known | | | |
| **18** | What level of MAPPA review has been completed? | | | | | | INR | | | | | | ICR | | N/A | | | |
| **19** | **Sign Off** | | | | | | | | | | | | | | | | | |
| **Person completing the notification:** | | | | | | | | | | | | | | | | | | |
| Name & Designation | |  | | | Signature | | |  | | | | | | Date | | |  | |
| **Senior manager signing off the notification:** | | | | | | | | | | | | | | | | | | |
| Name & Designation | |  | | | Signature | | |  | | | | | | Date | | |  | |