

Form B1**Recording allegations of bullying incidents in Education Establishments
in East Dunbartonshire****Part A****All allegations of bullying must be recorded in Part A****Reference No: To be completed by Boclair House****The data recorded centrally by the Education Service is shown by the shaded areas.**

| |
|--------------------------------|
| Name of School: |
| Date incident reported: |

| | | | | | |
|--|--|--|--|-----------------------------|--|
| The alleged victim(s) | | Pupil(s) not directly involved in the alleged incident | | Visitor to the school | |
| Parents/Carers of the alleged victim(s) | | Pupil witnesses to the alleged incident | | Other – please give details | |
| Member of school staff | | Member of local school community | | | |
| Name of person who reported incident (where known) | | | | | |

| |
|--|
| Date(s) and timing(s) of alleged incident(s) (where known) |
|--|

Details of pupils involved in alleged incident

| NB/Data protection: the names of pupils entered in this field will not be divulged in any public records. See Section 3.7 for relevant guidance on Data Protection issues and confidentiality. | | | | |
|---|----------------|---------------|--|----------------------------------|
| Name(s) of alleged perpetrators of the bullying | Year/ stage | Gender M/F | Ethnicity (see table for code) | Religion (see table for code) |
| | | | This section to be completed by designated person | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Name(s) of pupils who are experiencing bullying | | | | |
| | | | | |
| | | | | |
| | | | | |

When did the alleged incident occur?

Please tick relevant box(es)

| | | | | | | | |
|-----------------|--------------------------|--------------------------|--------------------------|---------------|--------------------------|------------------------|--------------------------|
| During class | <input type="checkbox"/> | During mid-morning break | <input type="checkbox"/> | At lunch time | <input type="checkbox"/> | After school | <input type="checkbox"/> |
| Between classes | <input type="checkbox"/> | During afternoon break | <input type="checkbox"/> | Before school | <input type="checkbox"/> | Other – please specify | <input type="checkbox"/> |

Where did the alleged incident occur?

Please tick relevant box(es)

| | | | | | |
|--|--------------------------|--|--------------------------|----------------------------|--------------------------|
| In playground | <input type="checkbox"/> | On the transport | <input type="checkbox"/> | Outside of school premises | <input type="checkbox"/> |
| On transport provided by the Local Authority | <input type="checkbox"/> | Both on and outside of school premises | <input type="checkbox"/> | On school premises | <input type="checkbox"/> |
| In class | <input type="checkbox"/> | Other (please specify) | | | |

Type/nature of alleged incident

Please tick relevant box(es)

| | | | | | |
|---|---|--|---|--|--|
| 1 | Written (e.g. graffiti, notes, letters, writing on jotters, written threats, ridicule through drawings etc.) | | 5 | Isolation (shunned by peers, rejected, left out of activities, groups etc.) | |
| 2 | Verbal (e.g. name calling, slagging, threatening, sarcasm, discriminatory comments during classes etc.) | | 6 | Incitement (e.g. encouraging others to bully, repeatedly behaving in a discriminatory manner; repeatedly wearing discriminatory insignia such as racist badges, etc.) | |
| 3 | Physical (e.g. pushing, shoving, fighting, tripping-up etc.) | | 7 | Using technology (e.g. anonymous 'phone calls; offensive/threatening texting/e-mails) | |
| 4 | Damage to property (e.g. theft of bags, clothes, money; tearing clothes; ripping books, etc.) | | 8 | Other – please specify | |

Please indicate if there is any suspicion that the alleged incident may also have other discriminatory components (tick more than one box if required).

| | | | | | |
|------------------------|--|----------------------|--|---|--|
| Disability | | Socio-economic class | | Gender | |
| Religion | | Sexual orientation | | * Race (i.e. colour, nationality, ethnic background. | |
| Other – please specify | | | | | |

* **Alleged/actual incidents which may be/have been triggered by ‘race’ must be recorded on Form R1(1) – see document: *Tackling Racist Incidents Within the Education Service (2003).***

Please indicate the procedures which were used to investigate the alleged incident.

| | | | |
|---|--|--|--|
| Interviewed all pupils who were allegedly involved | | Interviewed parents of those who were allegedly bullying | |
| Interviewed parents of those who were allegedly being bullied | | Interviewed witnesses | |
| Other (please specify) | | | |

After investigation was the allegation of bullying substantiated?

Yes

No

If Yes, please continue on to Part B. If No, please go to the end of the Form.

Part B

Please indicate which of the following interventions were used to support those who were bullied

Please tick relevant box(es)

| | | | |
|------------------------------------|--|---|--|
| Counselling | | Mediation | |
| Peer support | | Person centred approaches e.g. No Blame, Method of Shared Concern | |
| Referral to the Authority Reporter | | Other (please specify) | |

Please indicate which of the following interventions were used to support/challenge pupils who were bullying

Please tick relevant box(es)

| | | | | | | | | | |
|---|--|------------------------|--|------------------|--|------------|--|-----------------|--|
| Person centred approaches e.g. No Blame, Method of Shared Concern | | Mediation | | Verbal reprimand | | Suspension | | Police involved | |
| Peer support | | Counselling | | Written warning | | Exclusion | | Detention | |
| Referral to the Authority Reporter | | Other (please specify) | | | | | | | |

Please indicate the level of parental involvement

Please tick relevant box(es)

| | | | |
|--------------------------------------|--|---|--|
| Parents not informed of the incident | | Parents involved actively in discussions etc. | |
| Parents informed by letter | | Other – please specify | |

Please indicate if any follow-up preventative work was done as a result of the incident occurring:

| | | | |
|---------------------------------|--|------------------------|--|
| Whole school | | Group work | |
| Whole class | | Individual work | |
| Review of policy and procedures | | Other (please specify) | |

Please indicate at what stages, if any, the incident was monitored/reviewed after action was instigated

| | | | | | |
|----------|--|-----------|--|-----------|--|
| One week | | One month | | Six month | |
|----------|--|-----------|--|-----------|--|

Please tick if you feel that the incident is now closed

| |
|--------------------|
| Any other comments |
|--------------------|

Date

Signed by Designated Person

Signed by Head Teacher

On completion, forms should be sent to the Head of Education at Boclair House.

Codes for Form B1

Details of a pupil's ethnic origin and religion are held in the personal details record section of SEEMIS 'click & go'.

Codes for ethnic monitoring

| | |
|------------------------|----|
| White - UK | WU |
| White – other | WO |
| Asian – other | AO |
| Bangladeshi | BA |
| Black – Caribbean | BC |
| Black – African | BL |
| Black – other | BO |
| Asian – Chinese | CH |
| Asian – Indian | IN |
| Asian – Pakistani | PA |
| Mixed | MI |
| Other Ethnic | OE |
| Gypsy Traveller | GT |
| Occupational Traveller | OT |
| Other Traveller | TO |
| Not disclosed | XX |

Codes for monitoring religion

| | |
|----------------|----|
| Buddhist | BU |
| Christian | CH |
| Hindu | HI |
| Jewish | JE |
| Muslim | MU |
| No religion | NR |
| Other religion | OR |
| Sikh | SI |
| Not disclosed | XX |
| Not known | ZZ |