## Initial investigation into hurtful incident or allegation of bullying Completed by name and role: Date: Name and role of individual/s making the allegation e.g. pupil, parent/carer, midday supervisory assistant: Form of referral e.g. verbal report, letter, e-mail, phone call: Details gathered to date: Action taken to date: Signed: Date:

## Factors to help determine if incident constitutes bullying

	Incident was bullying (all 3 amber warnings confirmed)		
	<ul> <li>Hurt has been deliberately/knowingly caused (physically or emotionally)</li> <li>It is a repeated incident or experience e.g. multiple incidents, cyberbullying or the involvement of a group</li> <li>Involves an imbalance of power:         <ul> <li>target feels s/he cannot defend her/himself, or</li> <li>perpetrator/s exploiting their power (size, age, popularity, coolness, abus language, labelling/namecalling, etc.)</li> </ul> </li> </ul>		
	Incident was not bullying on this occasion because it was		
	<ul> <li>□ the first hurtful incident between teasing/banter between friends</li> <li>□ falling out between friends after</li> <li>□ conflict that got out of hand (show activities that all parties have compared out of hand</li> <li>■ got out of hand</li> <li>■ parental concern</li> <li>□ Other</li> </ul>	without intention to cause a quarrel, disagreemen ould not happen again)	t or misunderstanding
Re	solution process agreed:		
Su	pport and/or sanction for those causinport needed for the hurt party:  cus of Bullying/Hurtful Behaviour		
Pie	ease tick all elements which apply in your un	Definitely applies	Possibly applies
	Age/ Maturity	Венимону арриес	T occiony applied
	Appearance		
	Size/weight		
	Class/Socio-economic		
	Family circumstance (e.g. caring role)		
	Ethnicity/Race		
	Religion/Belief		
	Gender		
	Transphobia/Gender identity		
	Homophobia/sexuality		
	Sexualised		
	SEN and Disability		

Ability/application