**Safeguarding Policy - Reporting Disclosure Concerns & Incidents**

**Private and Confidential**

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| **Section 1 Details of the individual (child or vulnerable adult) and their parent/carer:** | | | |
| Name of individual | | | |
| Sex: Male Female | Age: | | Date of Birth: |
| Parent’s / Carer’s names: | | | |
| Home address/place of residence including postcode: | | | |
| **Section 2 Your details:** | | | |
| Your name: | | | |
| Your position or role: | | | |
| Date and time of incident: | | | |
| Location/event: | | | |
| Your contact details (telephone/email): | | | |
| **Section 3 Your report:** | | | |
| Are you reporting your own concerns or responding to concerns raised by someone else? | | | |
| Responding to my own concerns  Responding to concerns raised  by someone else | | If responding to concerns raised by someone else, please provide their name and position/role | |
| Please provide details of the incident or concerns you have, including times, dates, or other relevant information (description of injuries/whether you are recording fact, opinion or hearsay): | | | |
| The individual’s (child/vulnerable) account, if it can be given, of what has happened and how: | | | |
| Please provide details of the person alleged to have caused the incident/injury – including where possible their name, address and date of birth (approximate age), role/relationship to individual (stranger, or known to the individual). | | | |
| Please provide details of any witnesses to the incident(s) | | | |

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| If working with an external setting, who have you spoken to?  Child Protection coordinator  Head teacher  Class teacher  Other – who? ...................................  ............................................................ | If yes what was said, also give their name and contact details? |
| Have you spoken to the Parents?  Yes  No | If yes what was said? |
| Have you spoken to the person the allegation has been made against?  Yes  No  If no, please **do not** approach them. | If yes what was said? |
| Have you spoken to anyone else?  Yes  No | If yes what was said, also give their name and contact details? |
| Please provide details of further action taken to date: | |
| Have you informed the statutory authorities?  Local Authority Designated Officer |  |

**ENDS.**