



Safeguarding: A record of concern

Part 1 (Please complete in as much detail as possible)

If you have heard these concerns from a third party, please complete Part 2 instead

Name of child, young person or adult at risk you are concerned about:	
Any other details you know (age, DOB, contact details, etc)	
Date and Time of Incident:	Date and Time (of writing):
<p>Your Name:</p> <p>..... Print</p> <p>Signature</p> <p>Job Title/Position:</p> <p>Line manager :</p> <p>Trustees/Associates – please provide contact details:</p>	
<p>Record the following factually: What are you worried about? Who? What (if recording a verbal disclosure try to recall their words)? Where (physical location or online)? When (date and time of incident)? Any witnesses?</p>	
<p>What is the person’s account/perspective?</p>	
<p>Professional opinion where relevant.</p>	

Any other relevant information (distinguish between fact and opinion). Previous concerns etc.
What did you do at the time ?
What needs to happen? Note actions, including names of anyone to whom your information was passed and when.

Check to make sure your report is clear to someone else reading it.

Please send this form to the Children in Wales Designated Safeguarding Lead and call to notify. CIW staff should also inform their line manager.

Claire Sharp

e: safeguarding@childreninwales.org.uk

Work mobile: 07494 208637

Part 2

Logging concerns/information shared by a third party

Name of child, young person or adult at risk you are concerned about:	
Any other details you know (age, DOB, contact details, etc)	
Date and Time of Incident:	Date and Time of receipt of information: Via letter / telephone etc.
Recipient (and role) of information:	
Name of caller/provider of information:	
Organisation/agency/role:	
Contact details (telephone number/address/e-mail)	
Relationship to the child/family:	
Information received:	
Any actions that have occurred (please provide as much detail as possible):	
Outcome:	
Name:	
Position or role:	

Signature:	
Date and time completed:	
Date and time:	

Check to make sure your report is clear to someone else reading it.
Please send this form to the Children in Wales Designated Safeguarding Lead and call to notify. CIW staff should also inform their line manager.

Claire Sharp
e: safeguarding@childreninwales.org.uk
Work mobile: 07494 208637

CONFIDENTIAL

Part 3 (for use by DSL)

<p>Time and date information received, and from whom.</p>	
<p>Any advice sought – if required (date, time, name, role, organisation and advice given).</p>	
<p><u>Action taken</u> (referral to children's/ adult social care/monitoring or advice given to appropriate staff etc.) with reasons for decision.</p> <p>Note time, date, names, who information shared with and when etc.</p>	
<p><u>Parent's informed?</u> Y/N and reasons.</p>	
<p><u>Outcome</u></p> <p>Record names of individuals/agencies who have given information regarding outcome of any referral (if made).</p>	
<p>Where can additional information regarding child/incident be found)?</p>	

Should a concern/ confidential file be commenced if there is not already one? Why?	
Signed	
Printed Name	

CONFIDENTIAL