# Safeguarding Incident Report Form

This report form is for the purpose of keeping a record of reports made to the Designated Safeguarding Person.

As well as this report, you should make a full written record of your observations and any conversations, which should be signed and dated (you can do this on the reverse of this form or on a separate piece of paper) and submitted with this report of the incident.

This report to the Designated Person (Fiona Monger) and the accompanying full factual, written record should be made 24 hours of the concern being raised. Reports can be emailed to fiona@monger.me.uk

Name of worker …………………………………………………………………………………………… Name of organisation …………………………………………………………………………………………… Name of child …………………………………………………………………………………………… Date & time of incident …………………………………………………………………………………………… Brief overview of the Nature of concern:

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Have you made a full written record of the incident/concern (this full written account can be made over the page or on a separate piece of paper)? Yes / No (Please circle)

Who have you spoken to about your concerns?

Child Yes No

Carer Yes No

Team Leader Yes No If yes please add name ………………………..…..

Pastor Yes No If yes please add name ………………………….....

Social Services Yes No If yes please add name ………………………….....

Other Yes No If yes please add name ………………………….....

What feedback have you received?

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How have your concerns been followed up? ……………………………………………………………………

………………………………………………………………………………………………………………………… Signature of Worker: …………………………………… Date and time ……………………………………..

Signature of Children’s Advocate/

Responsible Person …………………………………… Date and time ……………………………………..

# Full Written Record of Safeguarding Incident

Report submitted by:………………………………………………………………………………… (name)

Signed………………………………………………………………………….. Date………………………..