

Carnegie Community Trust CIO

Statement of Carnegie Community Trust's Children and Vulnerable Adults Safeguarding Policy

PART ONE General Statement of Policy

1. General Policy

Carnegie Community Trust CIO (CCT) is firmly committed to the belief that all children and vulnerable adults have a fundamental right to be protected from harm and fully recognises its responsibility for child and adult protection. The safety and protection of all vulnerable people that the CCT supports is paramount and has priority over all other interests, unless life is at imminent risk. All the CCTs employees, volunteers and contractors are required to comply with the procedures contained within this policy.

There are five main elements to the policy:

- ensuring that CCT practices safe recruitment in checking the suitability of staff and volunteers to work with young people and vulnerable adults;
- raising awareness of child protection and vulnerable adult issues amongst all paid and unpaid staff;
- developing and implementing procedures for identifying and reporting cases or suspected cases of child or adult abuse;
- supporting the child or adult who has been abused;
- establishing a safe environment in which children and adults can develop and grow, where they are able to talk and be listened to.

PART TWO Definitions

2.1 Definitions

The following definitions apply throughout the Safeguarding Policy and associated procedures:

Child or Children

The Children Act 1989 defines a child as a person under eighteen, for most purposes.

The emphasis now is on activities and there are new definitions which scale back the breadth of regulated activities.

Regulated activity relating to children covers:

i) Unsupervised activities: teach, train, instruct, care for or supervise children, or provide advice/guidance on well-being, or drive a vehicle only for children.

(ii) Work for a limited range of establishments ('specified places'), with opportunity for contact: for example, schools, children's homes, childcare premises. Not work by supervised volunteers.

Work under (i) or (ii) is regulated activity only if done regularly.

(iii) Relevant personal care, for example washing or dressing; or health care by or supervised by a professional.

(iv) Registered child-minding; and foster-carers.

The definition of regulated activity relating to adults places the emphasis on the kind of activity carried out for any adult who requires them rather than on any specific groups of people or vulnerabilities.

These activities cover:

- i) Provision of healthcare
- ii) Provision of personal care
- iii) Providing social work
- iv) Assistance with cash, bills, shopping etc.
- v) Assistance with conduct of personal affairs
- vi) Conveying e.g. to receive healthcare

Young Person

The term young person will include those aged between 5 and 24 years. For the purposes of this policy, a young person aged under 18 years is regarded as a child and a vulnerable adult includes all people aged 18 and over subject to the criteria of the Protection of Vulnerable Adults Scheme (PoVA 2004) Scheme.

Vulnerable Adult or Adults

The Protection of Vulnerable Adults Scheme (PoVA 2004) defined a vulnerable adult as a person aged 18 or over who has a condition of the following type:

- A substantial learning or physical disability;
- A physical or mental illness or mental disorder, chronic or otherwise, including addiction to alcohol or drugs;
- A significant reduction in physical or mental capacity.

2.2 Forms of abuse

The Children Act 1989 defines four types of abuse: physical, emotional, sexual and neglect. These categories of abuse apply and will be relevant to vulnerable adults as well as to children who CCT has contact with as part of its activities and social care role with people of all ages.

Physical Abuse

Physical abuse may take many forms e.g. hitting, shaking, throwing, poisoning, burning or scalding, drowning or suffocating.

It may also be caused when a parent or carer feigns the symptoms of, or deliberately causes, ill health to a child or vulnerable adult. This unusual and potentially dangerous form of abuse is now described as fabricated or induced illness.

Emotional Abuse

Emotional abuse is continual emotional ill treatment causing severe and persistent effects on the child or vulnerable adult's emotional development and may involve:

- conveying the message that they are worthless or unloved, inadequate, or valued only in so far as they meet the needs of another person;
- imposing developmentally inappropriate expectations;
- causing the child or vulnerable adult to feel frightened or in danger – e.g. witnessing domestic violence;
- exploitation or corruption of children, young people or vulnerable adults.

Some level of emotional abuse is involved in most types of ill treatment, although emotional abuse may occur alone.

Sexual Abuse

Sexual abuse involves forcing or enticing a child or vulnerable adult to take part in sexual activities, whether or not they are aware of what is happening and includes penetrative and non-penetrative acts.

It may also include non-contact activities such as looking at, or being involved in,

the production of pornographic materials, watching sexual activities or encouraging children or vulnerable adults to behave in sexually inappropriate ways.

Neglect

Neglect involves the persistent failure to meet basic physical and/or psychological needs, which is likely to result in serious impairment of the neglected person's health and development. It may involve failure to provide adequate food, shelter or clothing, failure to protect from physical harm or danger or failure to ensure access to appropriate medical care or treatment. It may also include neglect of basic emotional needs.

Staff should also be aware of other factors which influence these forms of abuse such as racial or homophobic abuse.

2.3 Status of Policy

This policy applies to all employees, trustees and volunteers. Its purpose is to protect the personal safety of all children, young people and vulnerable adults using the facilities, resources and activities provided by CCT and actively promoting awareness, good practice and sound procedures. The Trustees will review this policy regularly and as informed by risk assessments relating to all activities of CCT.

PART THREE Procedures

3.1 Personnel/Recruitment

All employees, trustees and volunteers are required to provide references that CCT deems appropriate, which are always verified.

All paid and unpaid staff involved in regulated or intensive contact with vulnerable people as part of their work for CCT will be subject to the Disclosure and Barring procedures of the Disclosure and Barring Service (DBS).

If the job or role is eligible then a DBS 'Enhanced check with list checks', will be carried out.

No new employees, trustees or volunteers should start employment/volunteer work until references have been verified and where one is required DBS checks received. If this is not possible then new employees, trustees and volunteers must not be involved with regulated activities as set out in section 2 until references and DBS checks are completed. Details of the checks to be carried out are set out in Part 5.

All employees, trustees and volunteers will receive, and will be required to read and sign, the Safeguarding Disclosure and Barring Policy. All employees, trustees and volunteers will receive regular support in their work with children and vulnerable adults.

3.2 Responsibilities

All employees, trustees and volunteers working on behalf of CCT have a responsibility for the welfare of the children and vulnerable adults that they work with, in relation to their employment.

All employees, trustees and volunteers have a duty to ensure that any suspected incident, allegation or other manifestation relating to child and vulnerable adult protection is reported using the reporting procedures detailed in this policy.

CCT has a Designated Safeguarding Officer. The Chair of the Trust Board (or delegated trustee) must also be informed of issues which arise under this policy. The Designated Safeguarding Officer and the Chair of the Trust Board are responsible for child and vulnerable adults protection and the implementation of this policy. It is the responsibility of the Designated Safeguarding Officer to take appropriate action following any expression of concern and make referrals to the appropriate agencies.

3.2.1 Designated Safeguarding Officers

The Designated Safeguarding Officers will attend training as appropriate and make referrals to external agencies. Other aspects of their role include:

- obtaining information from staff, volunteers, children, parents or carers who have concerns relating to the protection of children or vulnerable adults and to record this information;
- assessing information quickly and carefully and asking for further information where appropriate;
- consulting with statutory child and vulnerable protection agencies e.g. the local social services department and police, to clarify doubts or worries;
- making referrals to Social Services, the Disclosure and Barring Service or the police, without delay.

All employees will be made aware of the named Designated Safeguarding Officers and how to contact them. Contact details also appear in Part 12 of this policy. The Designated Safeguarding Officers have contact telephone numbers for the local Area Safeguarding Boards and other statutory agencies.

3.3 Reporting Procedures: What to do if you suspect someone is being abused

All staff, volunteers and others working in direct or indirect contact with children and vulnerable adults as part of the organisation's activities or as part of the environment where the activities take place, must be alert to the signs of abuse. Anyone who suspects that abuse is taking place in this environment or to whom a child or vulnerable adult discloses issues relating to safeguarding should contact the Designated Safeguarding Officer immediately.

Any suspicion or allegation must be reported as soon as possible on the day of the occurrence to the Designated Safeguarding Officer. Disclosure or evidence for concern may occur in a number of ways including a comment made by a child or adult, physical evidence such as bruising, a change in behaviour, or inappropriate behaviour or knowledge.

It is the responsibility of the Designated Safeguarding Officer to liaise with other relevant agencies where necessary and seek clarification from the Safeguarding and Protection Unit of the local Constabulary if there is any concern about the validity of any allegation.

Any suspicion or allegation of abuse must be recorded by the observer/s on the appropriate incident reporting form. This form must be kept strictly confidential and stored securely following the Data Protection Procedures. All employees and volunteers are instructed to report the disclosure or discovery of abuse or alleged abuse directly to their Line Manager who will inform the Designated Safeguarding Officer.

All trustees will report such incidents directly to the Designated Safeguarding Officer.

All stages of the reporting procedure must be documented, marked CONFIDENTIAL and stored securely following the procedures laid out in the Data Protection Policy.

3.4 Allegations against employees, trustees or volunteers

When any form of complaint is made against an employee or volunteer, it must be taken seriously and the complaint should initially be dealt with by the Manager or the most senior staff member on site at the time the complaint is made. The senior staff member must report the complaint to the Designated Safeguarding Officer immediately, giving details of the circumstances. If the Designated Safeguarding Officer is unavailable (or is the person against whom a complaint has been made) the Chair of the Trustees or Designated Trustee must be informed immediately and they will deal with the complaint and ensure that the Designated Safeguarding Officer is informed

If any of the above (Chair, Designated Trustee or the Designated Safeguarding Officer) is the person against whom a complaint has been made they will be excluded from the processing of the complaint.

The Chair or Designated Trustee will attend the site of the allegation to gain an initial account of what has occurred from all relevant parties, including the person against whom the allegation has been made. If this is not possible, contact will be made by telephone.

The Chair or Designated Trustee will have the right to suspend from duty and/or the premises, any person who is a party to the allegation until a full investigation has been made in line with CCT's Disciplinary Procedures or the Code of Conduct.

This action does not prejudice the outcome of the investigation of the complaint or imply in any way that the person suspended is responsible for, or is to blame for, any action leading up to the complaint. The purpose of any such suspension is to enable a full and proper investigation to be carried out in a totally professional and objective manner.

The Safeguarding Officer will decide on a course of action as laid down by the appropriate Lambeth Safeguarding Children Board or the Lambeth Safeguarding Adults Partnership Board. They may also need to follow their legal duty to report/provide relevant information to the DBS. (See 7 below).

CCT will co-operate fully with the Police, Social Services, the NHS and all other parties involved.

The Designated Safeguarding Officer or Designated Trustee will ensure that the Chair of the Trustees or in his/her absence the Vice-Chair, Secretary or Treasurer, is fully briefed. An

agreed statement will be prepared for the purpose of accurate communication with external sources and for the protection of the legal position of all parties involved.

Designated Safeguarding Officer or Designated Trustee will make a full written report of the incident and the actions taken. This report will be stored securely following the procedures detailed in the Data Protection Policy.

3.4.1 Resignation

If, during the course of an investigation relating to safeguarding, an employee tenders his or her resignation, or ceases to provide their services, CCT will not be prevented from following up an allegation in accordance with these procedures. Every effort will be made to reach a conclusion, including in cases where the person concerned refuses to co-operate with the process.

PART FOUR Confidentiality

4. Confidentiality

All employees and volunteers must work under the principle that confidentiality is extremely important and plays a large part in much of the work carried out with children and vulnerable adults. However, under no circumstances will any individual in the employment of CCT or acting as a volunteer, keep confidential any information that raises concerns about the safety and welfare of a child or vulnerable adult. This statement relating to confidentiality is made known to all who access any provision of CCT

PART FIVE Recruitment

5. Safe recruitment of staff

CCT undertakes to ensure that paid and unpaid staff are suitable to work in an environment where they will encounter children and vulnerable adults as part of the Organisation's work. It also reserves the right to refuse to employ staff or volunteers whom it has a reasonable belief may pose a risk to children and vulnerable adults.

CCT has systems in place to prevent unsuitable people from working with children or vulnerable adults and to promote safe practice. These systems apply to all new staff and volunteers and require the following checks to be made on appointment:

- A minimum of two references, satisfactory to CCT, one of which should be from a previous employer;
- Documentary evidence checks of identity, nationality, residency and "right to work" status;
- DBS Check at the level relevant for the job/role;
- Documentary evidence of qualifications;
- Satisfactory completion of the probationary period.

PART SIX The Disclosure and Barring Scheme

6. Vetting and Barring

The Protection of Freedoms Act 2012 places a duty on the CCT to undertake an Enhanced check with list checks with the Disclosure and Barring Service for all staff and volunteers supervising or carrying out regulated activity with children or vulnerable adults. CCT carries out appropriate DBS checks on all staff whose jobs or roles are eligible for one.

PART SEVEN Disclosure and Barring Service (DBS)

7. Reporting cases to the Disclosure and Barring Service

CCT has a statutory duty to make reports and provide relevant information to the DBS where there are grounds for believing, following an investigation, that an individual is unsuitable to work with children or adults in certain regulated activities, or may have committed misconduct. The responsibility for reporting cases to the DBS lies with the Designated Safeguarding Officer.

The DBS make barring decisions for Section 142 of the Education Act (formally known as List 99), The Protection of Children Act List (PoCA) and the Protection of Vulnerable Adults List (PoVA) and the Protection of Freedoms Act 2012. This has now been combined as part of the Vetting and Barring Procedures of the DBS.

PART EIGHT Supporting Staff

8.1 Support for Staff

All staff and workers who come into direct contact with children and vulnerable adults must undertake training on the subject of safeguarding. This Policy will be issued to all new staff as part of their induction.

The CCT is aware that safeguarding cases can be distressing and that both paid and unpaid staff who have been involved may find it helpful to talk about their experiences, in confidence, with the Designated Safeguarding Officer or with a trained counsellor. Staff wishing to be referred for counselling should contact their line manager or the Designated Safeguarding Officer.

8.2 Whistleblowing

Any member of staff who raises an issue where they believe the employer, a fellow employee or any volunteer is acting in a way which is unlawful or falls below proper standards or contrary to this policy are protected by the Public Disclosure Act 1998,

provided they comply with statutory procedures.

Any employee looking at whistleblowing can do so by using the grievance procedure and in the first instance should discuss it with their Line Manager, the Chair of Trustees or the Safeguarding Officer.

Any volunteer with such concerns must raise it with the person responsible for their management, the Chair of Trustees or the Safeguarding Officer.

Anyone involved in whistleblowing will be supported and CCT will ensure that proper procedures are followed.

PART NINE Equal Opportunities

9. Equality of Opportunities

As part of the community served by CCT all children and vulnerable adults have the right to be safeguarded from harm and exploitation whatever their race, religion, gender, sexuality, age or disability. This policy relates to the Organisation's legal obligation to protect children and vulnerable adults who are suffering forms of abuse as defined in the Children Act 1989 and Safeguarding Vulnerable Groups Act 2006 and is therefore in line with CCT's equality and diversity policies.

See also CCT's Equal Opportunities Policy

PART TEN Operational Practices Policy

10.1 The use of cameras, videos, or camera mobile phones

CCT may take photographs of children and young people participating in activities and events. At all times written permission from parents/guardians/carers will be obtained **before** photographs are taken.

CCT reserves the right to prohibit the use of cameras, video cameras and mobile telephones with picture taking capacity on its land and within any of its properties or at events it promotes.

Used security videos will be kept in a secure place and when no longer needed shall be destroyed.

10.2 Employee Ratios

The ratio of employees/volunteers to children will be one to eight for those aged 8 years and under and one to ten for those aged 9 years or over as laid down by guidance issued under the Children Act (1989).

Where a Governing Body or Government guidelines require a higher ratio of employees/volunteers to the number of children and vulnerable adults then that ratio will override the minimum ratios set above.

Outdoor adventure activities will always have a minimum of 2 appropriately trained adults, one of which must be an employee of who will hold a First Aid at Work qualification.

In all but exceptional circumstances there will be two employees present when transporting children and vulnerable adults in a minibus or other forms of public and private transport. The ratio of employees/volunteers working with children and vulnerable adults with special needs will be as laid down under the Special Needs section.

10.3 Signing in and out

All children aged 18 and under and vulnerable adults attending an activity organised by the CCT with a duration of less than one hour will be checked against a register. All children and vulnerable adults attending an activity organised by CCT that lasts longer than one hour must be signed in and out by a parent, guardian or carer. This applies to all CCT organised activities, regardless of their location.

10.4 Outside Organisations

Any club, society, organisation or individual undertaking activities on the CCT's behalf involving children aged under 18 and vulnerable adults will be required to either adopt CCT's Safeguarding Policy or show proof that they have their own robust policies.

Any club, society, organisation or individual undertaking any activity that has been sanctioned by CCT which involves children aged under 18 on CCT's premises will be required to adopt CCT's signing in and signing out procedures.

Any club, society, organisation or individual working with children and vulnerable adults who refuse to adopt CCT's policies, signing in and signing out procedures or adopt their own policies and procedures will not be permitted to use CCT facilities.

Any club, society, organisation or individual working with children and vulnerable adults will be subject to random spot checks periodically by CCT employees to ensure policies and procedures are in place and being implemented.

PART ELEVEN

Special Needs Policy

11.1 Special Needs

All CCT's employees, volunteers and contractors are required to comply with the procedures contained within this policy.

This Special Needs Policy works in support of CCT 's established Children and Vulnerable Adults Safeguarding Policy which requires all employees, trustees and volunteers to be checked through the Disclosure and Barring Service before coming into contact with any child or vulnerable adults taking part in CCT organised activities.

11.2 Medication

11.2.1 Screening

Screening must take place prior to the commencement of activities and will complement CCT's booking procedures. Screening will include illnesses, medication, health, emergency numbers and, in certain cases, special reference to asthma sufferers and inhalers, epilepsy and allergies and whether the child is able to administer their own medicines. Screening must include a medication sheet for children and vulnerable adults with individual medical requirements e.g. dosage, symptoms, times to be administered, doctor's surgery number, etc.

CCT is within its rights to turn away a child or vulnerable adult with a medical condition which a parent has neglected to inform CCT about during the screening process.

11.2.2 Contagious illness

The screening form will indicate that CCT will not accept any child or adult suffering from a contagious illness and they will be turned away.

11.2.3 Three to Five Years old

For activities where 3 – 5 year olds are left in the sole care of CCT and where medication needs to be administered, parents will be required to return to administer the medication at the appropriate time. Where a child needs help to administer an inhaler, employees must first be given written consent from parents.

11.2.4 Six Plus

Parents will be asked to leave written consent in order for any medicines to be given or overseen. It is the parent's responsibility to inform employees or volunteers whether their child has an inhaler and where it is kept. It should be clearly labelled with the child's name and, where the child may need assistance in taking an inhaler, written consent must be given first.

11.2.5 A child six years and older requiring injections

It is not CCT's responsibility to assist a child in the administering of injections. A child must either be able to administer and control their condition or be supervised by a parent or guardian. If a child needs to, or may need to, inject themselves during an activity, employees must be advised during the screening process.

11.2.6 Dietary requirements

Parents or carers must inform employees or volunteers if a child or vulnerable adult has specific dietary requirements that need to be adhered to.

11.2.7 Medicines

Employees and volunteers will be responsible for the safekeeping of any medicines. Children and vulnerable adults will be given the option of leaving inhalers in safekeeping or in their bags. All medicines must be clearly marked with the child or vulnerable adult's name.

11.2.8 Illness

Should a child or vulnerable adult become ill during an activity CCT employees will request the parent or carer to collect the child at the earliest opportunity.

11.2.9 Nut Allergies

Where nut allergies have been made known to CCT , the organisation will be responsible for writing to all parents/carers with children and vulnerable adults attending the same activity to request that parents/carers refrain from giving their children and vulnerable adults nut products in their lunch boxes.

11.2.10 Dangers of the Sun

It will be CCT's responsibility to inform parents/carers about the dangers of sunburn and to request that parents/carers provide children and vulnerable adults with suntan cream and appropriate headwear.

11.3 Other Special Needs

11.3.1 Clinically Diagnosed Behavioural Problems

CCT will require parents/carers to inform CCT employees or volunteers during the screening process prior to the activity if their child or vulnerable adult has any known behavioural problems.

11.3.2 Additional Conditions

CCT will take all reasonable steps to accommodate children and vulnerable adults with conditions that have been made known to employees.

11.3.3 Disabled Children and Vulnerable Adults

Children and vulnerable adults who are wheelchair users will be actively encouraged to participate in activities. However, where the safety of other children and vulnerable adults may be compromised, such as contact sports, certain disabled children and vulnerable adults may be turned away and encouraged to seek out more suitable activities for their disability.

11.4 Unacceptable Behaviour

CCT expects a reasonable standard of behaviour from the children and vulnerable adults in its care and reserves the right to remove a vulnerable person from the activity. Where other children and vulnerable adults' safety and enjoyment are compromised by bad behaviour CCT will have total discretion whether to remove the child or vulnerable adult from the activity. Where this has to be done then a full incident report will be required to be completed and kept on file.

PART TWELVE
Contacting the Designated Safeguarding Officer

12. The Designated Safeguarding Officer

Name: Helen Schofield

Tel: 07729806881

Designated Trustee

Name: Helen Schofield

Tel: 07729806881

All paid and unpaid staff who are not the Designated Safeguarding Officer, but who are approached with concerns about a child or vulnerable adult, must bring the concerns raised to the attention of the Designated Safeguarding Officer or the Designated Trustee

All staff to whom a vulnerable person discloses issues that may be related to safeguarding must keep written notes of concerns. The staff member must also complete an Incident Form immediately after the issues have been noted by them or reported to them.

**PART THIRTEEN
Review of Policy**

13. Review and Maintenance of Policy

CCT shall undertake to review this policy, its implementation and effectiveness annually. The views of all employees and volunteers shall be sought where necessary and reflected in the review process.

Any new legislation or developments in existing legislation will be considered as and when required and the policy will be updated to reflect these developments.

All employees and volunteers will receive training in child and vulnerable adult protection procedures and the training will be reviewed as and when required.

This policy was approved and agreed by the Board of Trustees on the date shown below.

Signed:

Name:

Position:

Date:

Review dates:

Carnegie Community Trust CIO

Charity Number: 1164005

Template for a risk assessment

1. Name of activity/event:

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2. Nature, length and frequency of contact: (Insert text describing the type of activity, length of time involved and the frequency e.g. lunch club, 1.5 hours once a fortnight.)

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3. Safeguarding Risk Rating:

High: Legal Action is being taken and Protection Plan is being implemented

Moderate: Safeguarding Protection Plan is in place

Low: Safeguarding Issue has been addressed

None: No Safeguarding Action is taking place

4. Contact

Contact Name of Employee/Volunteer	Nature of Contact	Length	Type of Contact	Risk

5. Health and Safety Issues

Hazard	Risk	Action	Alternative working practice

6. Any children or vulnerable adults particularly vulnerable:

Hazard	Risk	Action

7. Identified children or vulnerable adults with particular needs (medical, disability, behavioural)

Hazard	Risk	Action

8. Any additional requirements for DBS (CRB) check?

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9. Safe use of ICT

Hazard	Risk	Action

10. Risk assessment carried out by:
(insert name)

Date completed:

Signed off by Safeguarding Officer:
(insert name)

Signature of Safeguarding Officer:

When a Safeguarding issue is raised it is important to record what is said or seen and what action was taken. This record or any other written record should be kept in a locked cabinet. Access should be limited to only:

- the person who has completed the form
- the designated Safeguarding Officer
- The Manager or the Chair of the Management Committee

The child/vulnerable adult can be shown this record but discretion should be used. Their permission should be sought before showing it to the parent/guardian/carer.

It may be shown to the police and/or social services, and could possibly be used in court although this is rare.

Guidelines for Responding to an Allegation of Abuse

General Points

- Keep calm – do not appear shocked or disgusted
- Accept what the child/vulnerable adult says without passing judgement (however unlikely the disclosure may sound)
- Look directly at the child/vulnerable adult
- Be honest
- Let them know you will need to tell someone else, don't promise confidentiality
- Be aware the child/vulnerable adult may have been threatened and fear reprisals for having spoken to you
- Never push for information or question the child/vulnerable adult as this can undermine any subsequent criminal investigation. If at any point a child/vulnerable adult decides not to continue, accept that and let them know that you are ready to listen should they wish to continue at any time.

Helpful things to say or show

- Show acceptance of what the child/vulnerable adult says
- "I take what you are saying very seriously"
- "I am pleased that you have told me. Thank you for telling me"
- If appropriate,
 - "It isn't your fault and you are not to blame at all"
 - "I am sorry that happened to you"
 - "I will help you"

Things not to say

- "Why didn't you say something before?"
- "I really can't believe it"
- "Are you sure this has happened?"
- "Why?" "Where?" "When?" "Who?" "What?" "How?"
- Don't make false promises to the child/vulnerable adult – like confidentiality – be honest now, any lies will be further abuse and betrayal
- Never make statements such as 'I am shocked!' or 'don't tell anyone else'.

Concluding the conversation

- Reassure the child/vulnerable adult that they were right to tell you
- Let the child know what you are going to do next and tell them that you will let them know what is happening at each stage.

Record of Concerns

Name of Child/Vulnerable Adult:	
Address:	
Telephone Nos:	
Parent/Carers details: Name(s):	Telephone No(s):
What is said to have happened or what was seen?	
When and where did it occur?	
Who else, if anyone, was involved and how?	
What was said by those involved?	
Were there any obvious signs e.g., bruising, bleeding changed behaviour?	
Was the child/vulnerable adult able to say what happened, if so, how did they describe it?	

Name of Child/Vulnerable Adult:
Who has been told about it and when?
Do the parents/carers know?

Signed

Date