

**Form for Reporting Safeguarding Concerns (SC01)**

Concerns could be raised with you in a variety of ways:

* A child could come forward themselves, or they may come forward with concerns about another child
* An adult at risk could come forward themselves
* Someone acting on behalf of a child or adult at risk may come forward to report that they have concerns, or that concerns have been raised with them.  This may include people with parental/caring responsibilities, employees/workers/ students, or a member of the public
* A child or adult at risk’s behaviours may indicate harm/abuse/breach of policies and/or procedures
* An employee/worker/student may have concerns about the behaviour of colleagues that makes them feel uncomfortable

Firstly, ensure that the child/adult at risk is in no immediate danger.

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| **Do’s**  | **Don’ts**  |
| Remain calm  | panic  |
| **Listen**and **accept** what the person has to say  | put words into the person’s mouth  |
| **Reassure** them they have done the right thing to try and alleviate any fear they have about coming forward  | take a written record until after the conversation has ended  |
| Discuss with them that you will keep their information confidential, but you cannot keep it a secret and will need to pass the information to the Designated Safeguarding Officer  | rush them  |
| **Explain** what will happen next  | investigate or ask for more details than are given  |
| Complete the report form**immediately** after the conversation has ended | make promises about outcomes and further actions  |
| **Report** the concerns immediately to the DSO and send them the Form for Reporting Safeguarding Concerns (SC01)  | ask leading questions  |
| Remember it is not your responsibility to determine whether the abuse occurred.  | Express any opinions  |
| Make them repeat anything  |
| Discuss disclosure with anyone other than the DSO and other relevant staff  |
| Delay in reporting  |

Please complete as many sections as possible as fully as possible, but please bear in mind you are obtaining information, not completing an investigation.

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| **DETAILS OF INDIVIDUAL WHO HAS ALLEGEDLY BEEN SUBJECTED TO INAPPROPRIATE CONDUCT, HARM OR ABUSE** |
| 1 | Name |  |
| 2 | Date of Birth |  |
| 3 | Address |  |
| 5 | Telephone Number (including code) |  |
| 4 | Gender |  |
| 6 | Parent’s/guardian’s name and contact details (if different) |  |
| 5 | Is the alleged victim a University student?  | YES / NO\*If no, provide details of which organisation they belong to e.g. school, Health and Social Care Trust |
| 6 | Has the alleged victim raised the allegation themselves | YES / NO\*\*If no, provide name address and contact details of the individual who has raised the allegation on their behalf.Name:Contact Number:Address: |
| **DETAILS OF THE DISCLOSURE** |
| 7 | When was the disclosure made, include date and time |  |
| 8 | Who was the disclosure made to |  |
| **DETAILS OF THE ALLEGATION** |
| 9 | When did the alleged misconduct take place? |  |
| 10 | Where did the alleged misconduct take place |  |
| 11 | Who is the alleged perpetrator? | Name:Are they an employee, student, worker?What School/Directorate/Department do they belong to? |
| 12 | Details of how the alleged perpetrator came into contact with the individual? E.g. was it through a work placement, research activity, an event? |  |
| **DETAILS OF ALLEGED INAPPROPRIATE CONDUCT/HARM/ABUSE** |
| 13 | Please record the allegation exactly as it was raised. Do not amend the language used in any way and try to record as much information as possible. Do not use leading language. Continue on a separate page if required. |
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| **DETAILS OF ANY KNOWN WITNESSES** |
| 14 | Name, position, contact details of any known witnesses | Name:Position:Contact number:Name:Position:Contact number: |
| **DETAILS OF ANY EMERGENCY ACTIONS TAKEN TO REMOVE THE ALLEGED VICTIM FROM FURTHER INAPPROPRIATE CONDUCT, HARM, ABUSE** |
| 15 | Details of actions taken including the administration of first aid |  |
| **Signatures** |
| *To be signed by person reporting the concern* |
| Name |  |
| Job Title |  |
| School/Directorate |  |
| Signed |  |
| Date |  |
| *Date received by Designated Safeguarding Officer* |
| Name |  |
| Signed  |  |
| Date |  |
| *Date reported to Director of Academic and Student Affairs or Director of People and Culture* |
| Name |  |
| Signed |  |
| Date |  |

**The information provided in this report is highly confidential and must not be shared with any other individual unless as required as part of an internal or statutory investigation.**