Logging a concern about a child's or Adults safety and welfare (Form 1)

Child/adults Name:	Date of Birth:	Group:
Date and Time of Incident:	Date and Time (of writing)	1
Name:		
Print	Signature	
Job Title:		
Record the following factually: What are you worried about? Who? What (if recording a verbal disclosure by a child/adult use their words)? Where? When (date and time of incident)? Any witnesses?		
What is the individual's account/perspective?		
Professional opinion (where relevant and if in attendance)		
Any other relevant information (distinguish between fact and opinion). Previous concerns etc.		
What needs to happen? Note actions, including na passed and when.	ames of anyone to whom yo	our information was

Check to make sure your report is clear to someone else reading it. Please pass this form to Parish Safeguarding Officer.