

Safeguarding Incident Reporting Form

When completing this form, record the facts; do not interpret what you have observed.

After completing the form, pass it on to Diane Pedder, Membership Services Manager, on the next working day. If you are emailing an electronic copy to her, you must also hand in the signed, original copy of this form, as soon as possible. If you have any problems, please contact her on 0113 380 1292 or d.m.pedder@leeds.ac.uk. If Diane Pedder is not available, hand this form to a staff member in the Volunteering and Community Department. If your project has a partner organisation and you know their designated safeguarding officer, also pass this form on to them. If you are unsure about this, hand it to Diane Pedder and she will ensure that they receive the necessary information.

SECTION A: Information about the person making the referral			
Name			
Email address:		Contact number	
Who raised the concern	Myself <input type="checkbox"/>	Individual at risk <input type="checkbox"/>	A Third Party <input type="checkbox"/>
Details of the informant if not you or individual at risk	Name:		
	Contact number:		

SECTION B: Information on the individual you are concerned about			
Name		Gender	Age
If a child, name of their school (if known)			
Name and address of individual's GP			
Details of individual's parent/guardian/carer/next of kin			
Name		Relationship to individual	
Telephone		Address	
Are there any special factors relating to the individual such as disability, ethnicity or language. If 'yes' please describe			
Who referred the individual to your project/event?			
Name		Organisation	
Email address		Telephone	

SECTION B: Information on the cause for concern**Details of incident that brought about the concern****Name of society/project/event****Day:****Date:****Time:****Location:****What prompted the concern? Please describe the incident and include any relevant background or contextual information.**

(If possible, record any speech verbatim, including clarifying questions asked by the volunteer/student) Expand this box or use extra sheets if required.

Is there any other information you feel is relevant to this incident? (For example, knowledge of previous Social Care involvement)

Signature of person completing the form:Date:.....

Name(s) of designated person(s) you passed the form to:

THIS FORM SHOULD NOW BE PASSED ONTO DIANE PEDDER, MEMBERSHIP SERVICES MANAGER, AS SOON AS POSSIBLE AND NO LATER THAN 48 HRS AFTER THE CONCERN WAS RAISED

SECTION C: For use by designated person only			
Name			
Signature		Date form received	

Partner Organisation	
Is there a partner organisation	Yes/No <i>If no, move to 'Action's Taken'</i>
Designated person at partner organisation	Name: Contact Details: Date form was sent to them:

Action(s) taken	Date	Outcome
Conversation with individual/people who filled in safeguarding report form		
Conversation with Designated Officer at partner organisation (if applicable)		
If applicable, copy of form sent to designated officer at child's school and a conversation had with them		
Discussion had with parent/guardian/carer/next of kin		
If incident involves a member of LUU, referral made to the HR department		
Advice sought from Leeds Social Care		
Additional Actions		
If a referral was made, have you informed the individual concerned?		Yes/No