



Swindon Down's Syndrome Group

Safeguarding children, young people and vulnerable adults: Policy and procedure

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1. Policy Context

In developing this policy, The Swindon Down's Syndrome Group (SDSG) commits to working within legislation and statutory guidance as related to the Safeguarding of Children, Young People and Adults.

The main relevant policies and guidance documents are:

Statutory Guidance:

Working Together 2015: This guidance from the Department for Education describes safeguarding processes and the safeguards that every organisation must have in place, including charity organisations, when safeguarding children. See the guidance at <https://www.gov.uk/government/publications/working-together-to-safe-guard-children--2>

Or online:

www.workingtogetheronline.co.uk

Care and Support Statutory Guidance 2016: This is guidance from the Department of Health which describes safeguarding processes for vulnerable adults and the responsibilities of different organisations: <https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance#safeguarding-1>

2. Policy Statement

It is the responsibility of all Trustees of the SDSG to give paramount importance to the nurture and care of children, young people and vulnerable adults in a safe and secure environment. It is about preventing harm to children and adults wherever possible.

We recognise that:

- The welfare of the child, young person or vulnerable adult is paramount
- Everyone has different levels of vulnerability and each of us may be regarded as vulnerable at some time in our lives
- All children, young people and adults who may be vulnerable (regardless of age, disability, gender, marriage and civil partnership, pregnancy, maternity, race, religion or belief, sex or sexual orientation) have the right to equal protection from all types of harm or abuse which can occur in all families and communities
- Working in partnership with children, young people, vulnerable adults and their parents, carers and other agencies is essential in promoting their welfare

We will develop a culture in our organisation that:

- Enables a safe and caring community to provide a loving environment where there is a culture of 'informed vigilance' as to the dangers of abuse
- Enables and encourages concerns to be raised and responded to openly and consistently and protects children, young people and adults who may be vulnerable from actual or potential harm
- Ensures all people feel welcomed, respected and safe from abuse
- Values, listens to and respects children, young people and adults who may be vulnerable, encouraging them to be active contributors to the SDSG
- Encourages adults who may be vulnerable to lead as independent a life as possible

When concerns are raised, we will:

- Respond without delay to every concern raised that a child, young person or vulnerable adult may have been harmed, or may be at risk of harm, through abuse or neglect
- Work with police, local authorities and other partners in any investigation, including where allegations are made against a Trustee of SDSG
- Challenge any abuse of power, especially by anyone in a position of trust

If abuse has occurred, we will ensure:

- Informed and appropriate care and support is offered to any child, young person or adult who has suffered abuse, including support to make a complaint if so desired

In our publicity we will:

- Share information about good safeguarding practice with children, young people and vulnerable adults, their parents, carers and all those working with them

Principles:

The SDSG acknowledges the six principles of child and vulnerable adult safeguarding and ensures these principles underpin our work:

- **Empowerment** – Presumption of person led decisions and informed consent
- **Protection** – Support and representation for those in greatest need
- **Prevention** – it is better to take action before harm occurs
- **Proportionality** – Proportionate and least intrusive response appropriate to the risk presented
- **Partnership** – Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse
- **Accountability** – Accountability and transparency in delivering safeguarding

SDSG will seek to keep children and vulnerable adults safe by:

- Valuing them, listening to and respecting them
- Sharing concerns with agencies that need to know and involving individuals and their carers appropriately

Implementation of the Policy Statement

- All Trustees/volunteers are issued with the SDSG Safeguarding Policy
- Vulnerable adults and their carers are made aware of this Safeguarding Policy and Procedures and know how to voice their concerns
- SDSG has one appointed Designated Safeguarding Officer (DSO) and one Deputy Designated Safeguarding Office (DDSO). These are:

DSO – Kim West – kkimwest@gmail.com – 07732 064889

DDSO – Allan Brown - allan_1313@hotmail.com – 07896 724491

3. Who is a child, young person, adult who may be vulnerable?

Children and young people: for the purposes of this policy means anyone under the age of 18 years. Children and young people may be abused by an adult or child, male or female. It is far more common for a child or young person to be abused by a person known to them than by a stranger. This could be a parent, family member, friend, teacher or anyone else. Children may be abused in person or via electronic media, they may experience harm as a result of seeing or hearing the abuse of others.

Where conflicts of interest arise between the welfare of the child and that of adults, the child's wellbeing must always be of paramount importance and priority.

Adults who may be vulnerable: The Care Act 2014 defines an adult to whom statutory safeguarding duties apply as an adult who:

*Has needs for care and support (whether or not the Local Authority is meeting any of these needs)
Is experiencing, or at risk of abuse or neglect
As a result of those care and support needs is unable to protect themselves from
either the risk of or the experience of abuse or neglect.*
(Care and Support Statutory Guidance, 2016)

The definition may apply to anyone 18 years old and over who may not be able to protect themselves from abuse, harm or exploitation, which may be by reason of illness, physical, sensory or learning disability or impairment, mental illness, use of drugs or alcohol. Increased vulnerability may be temporary or permanent and may be visible or invisible.

An adult may be abused or neglected by family (including spouses, parents and children), friends, carers (paid and unpaid), strangers and professionals and members of the community. Those at risk may live alone or may live with family or in a care setting e.g. residential home.

4. What is abuse and neglect?

Forms of abuse:

1. **Physical** abuse, including hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate physical sanctions
2. **Sexual** abuse, including rape and sexual assault or sexual acts to which the vulnerable adult has not consented, or could not consent or was pressured into consenting
3. **Psychological** abuse, including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks
4. **Exploitation** – either opportunistically or premeditated, unfairly manipulating someone for profit or personal gain
5. **Financial or material** abuse, including theft, fraud, exploitation pressure in connection with wills, property or inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits
6. **Neglect** and acts of omission, including ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating and
7. **Discriminatory** abuse, including racist, sexist, that based on a person's disability and other forms of harassment, slurs or similar treatment
8. **Institutional abuse** – including neglect and poor care practice

5. What to do if you are concerned that abuse or neglect may be happening

You may see or hear something of concern, or someone may tell you something of concern (a disclosure). If a child, young person or vulnerable adult tells you that they have experienced abuse, are experiencing abuse or are concerned that they may be at risk:

Do	Don't
Listen. Try to move to a quiet space if possible	Tell them to speak to someone else
Let the person talk at their own pace and say what they want to say. If you need to clarify points, ask open questions like: Tell me. what happened, Explain ... about the incident Describe ...where it was, what happened	Investigate. Ask leading questions e.g. why they did that, what's their name', did it hurt you?
Take it seriously	Try not to react as though unbelieving or shocked
Reassure. Confirm they are doing the right thing by telling you.	Tell them not to tell stories
Tell them you need to share the concern with the right people e.g. SDSG Safeguarding Officer, police and social care	Promise to keep a secret or tell people who don't need to know.
Record what was said and the facts as accurately as possible as soon as possible	Try to just remember it
	Contact the person the allegation is about

Whether a child, young person or adult has shared a concern with you, or you have seen or heard something of concern...

If the situation is urgent i.e. there is an imminent risk of harm: contact the police on 101 or 999 as appropriate or contact the Local Authority Children or Adults safeguarding Teams:

Swindon Local Children's Safeguarding Board

01793 466903 - Monday to Friday

01793 436699 - Out of hours/Weekends

Swindon Local Adult Safeguarding Board

01793 463555 - Monday to Friday

01793 436699 - Out of hours/Weekends

Once you have sought advice from police or the Local Authority and the situation is made safe, inform the SDSG Designated Safeguarding Officer as soon as possible of the concern and actions taken; provide a written record of this. If the concern is about the SDSG Designated Safeguarding Officer contact the Down's Syndrome Association Safeguarding team on 0333 1212 300.

If the situation is of concern but is not urgent: Contact the SDSG Designated Safeguarding Officer to report the concern and provide a written record (if the concern is about the SDSG Designated Safeguarding Officer contact the Down's Syndrome Association Safeguarding team on 0333 1212 300).

They will decide with you whether to discuss with the child, their parents or carers or the adult and any carers and whether a referral to the Local Authority Children or Adults Safeguarding Team is needed or any other action.

Note: Anyone can report a concern directly to police or the Local Authority at anytime.

The SDSG hopes that all will follow this policy but where there is any concern that an issue has not been reported and should be or any reluctance to inform the Group of an incident the SDSG wishes to make clear that the most important point is that those concerns are reported to the appropriate authority so that they can be acted upon where needed.

If there is an allegation that a person in a position of trust (trustee or volunteer) has abused or neglected a child or adult or that such a person may present a risk to a child or adult:

The SDSG has a duty of care towards its members/ volunteers, who should be treated fairly, honestly and without discrimination. The SDSG will offer support in these circumstances, but social services will be assisted in their investigation.

If an allegation is made about you:

- keep calm, do not get involved in an argument which is likely to make the situation worse
- immediately, or soon as possible inform the SDSG DSO
- make a written record of the facts of the incident as you understand them
- ensure no-one is placed in a position which could cause further compromise
- do not contact another agency concerned with the vulnerable adult

Observe confidentiality; only discuss the allegation with those identified in the above procedure.

6. Confidentiality and consent

Confidentiality: The SDSG accepts the principle that only those with a need to know should be made aware of safeguarding concerns or other confidential information. All Trustees and volunteers are expected to share confidential information appropriately and to ensure that written records and verbal information is shared responsibly and stored securely.

Consent: The SDSG accepts that all people have a right to make their own views and wishes known and that these wishes should be followed wherever possible.

Children: Where there is a concern that a child is experiencing or at risk of abuse or neglect, they may ask those that know not to tell anyone. The SDSG accepts that we cannot do this; these concerns must be reported to the appropriate authorities to enable the child or young person to receive appropriate help and support. The SDSG asks all Trustees, members and volunteers to explain this to children in their care when appropriate. Where there is concern that a child is experiencing or is at risk of abuse or neglect the SDSG expects that parents and carers will be communicated with and will have their consent sought for information to be shared with the Local Authority or other agencies. This should happen except where there is concern that to do so would place a child at increased risk or where a parent or carer may be involved in the sexual abuse of the child. In those circumstances' advice of the Local Authority or police should be sought before informing the parents or carers of the concern. Where the allegation is against an individual who may have access to other children or vulnerable adults the referral should be made without seeking consent from parents or carers - how they are made aware of the concerns will be decided alongside statutory agencies.

Vulnerable Adults: The capacity of the vulnerable adult to give their informed consent to a referral being made and information being shared is significant, but not the only factor, in deciding what action to take. If the vulnerable adult is assessed as not having the mental capacity to make decisions about giving consent to a referral being made, (using the 5 Principles of the Mental Capacity Act 2005) the referer must make a decision in their best interests, in accordance with the provisions set out in the Mental Capacity Act.

Article 8 of the Human Rights Act 1998 relates to an individual's rights to autonomy. However, the requirement to respect the rights of individuals to make decisions for them is not an excuse for inaction where a vulnerable adult is at risk of significant harm, abuse or neglect.

Therefore, whilst consent should always be sought, if there is an overriding public interest, or if gaining consent would put the vulnerable adult at further risk, a referral to the relevant local authority must be made. This would include situations where:

- other people, including vulnerable adults and or children, could be at risk from the person causing harm or
- it is necessary to prevent crime

The vulnerable adult should be informed of the decision for the referral and the reasons, unless telling them would jeopardise their safety or the safety of others.

7. Record Keeping

Records of all safeguarding concerns will be kept by the SDSG Designated Safeguarding Officers. They will keep a record of the initial concern and all actions taken. The records will be securely held by the SDSG Designated Safeguarding Officer.

Access to these records will be restricted to the Designated Safeguarding Officer or their deputy. All those involved with any safeguarding concern must ensure that they provide to the Designated Safeguarding Officer any records related to that case for secure storage.

The SDSG does not have access to secure email systems. Therefore, great care should be taken where email is used to ensure that confidential information is not open to being accessed by unauthorised individuals. Individual's confidential information should not be communicated via email (e.g. any information should not make the individual identifiable by name, address etc.).

Records must be maintained of Trustee and volunteer training and DBS checks. These will be maintained by the SDSG Designated Safeguarding Officer.

8. Additional Related Policies

Photographs and videos

It is the policy of the SDSG that no one should take photographs of children or young people without the written consent of that child's parent or carer and the consent of that child where they are old enough to give consent.

Where photographs are to be taken consent will be gained from parents and carers in advance, using the agreed form. This will stipulate: who will take photos, for what purpose they may be used, how they will be stored and after what period they will be destroyed.

All photos and videos taken for SDSG should be stored securely on devices belonging to SDSG. No photo or video should be left stored on personal photography or videography equipment.

No photo will be taken, shared or used for any purpose which shows a child in any state of undress.

Children will not be named in publicity related to photographs or video.

Where an event may be photographed and is open to the public; signs will be displayed noting that photographs and or video may be taken and inviting anyone not wishing to be in any photos or video used to make this known to a named person. The photographer/ videographer will be named on these signs and will wear ID.

Only those delegated with that responsibility by SDSG may ask for parental consent and arrange the taking of any photo or video.

Communications and Social Media

It is the policy of SDSG that no one employed on a paid or voluntary basis, serving as a trustee, member or as a volunteer will contact children or young people directly via social media, email, phone or text without the knowledge and consent of that child or young person's parent or carer.

Where such contact needs to be made (for example a text to advise of a change of time for an activity) the child's parent or carer will be asked for consent in advance and the parent or carer will be copied into that communication.

Very rarely contact may be made with a child or young person without the knowledge of the child's parents or carers (for example where there are serious safeguarding concerns for a child, and it would increase the risk to the child to contact the parent). In this case the person making contact with the child must agree in advance with the SDSG Designated Safeguarding Officer that this is appropriate, a second adult should be copied into all communications e.g. Deputy Designated Safeguarding Officer and must keep a record of all communications and provide these to the SDSG Designated Safeguarding Officer for the case record.

9. Policy implementation and Review

This policy was agreed by the SDSG in January 2019.

All Trustees and volunteers are required to abide by this policy and associated good practice guidance.

This policy will be made available on the SDSG website; a paper copy will be available on request.

This policy is to be reviewed annually.

Next Review Due: January 2020

Appendix 1: Categories of Abuse and additional information

Type of Harm	Definition	Examples	Indicators
Physical Adults and Children	Non-accidental harm to the body. From careless rough handling to direct physical violence. Unlawful or inappropriate use of restraint or physical interventions.	Hitting, slapping, pinching, shaking, pushing, scalding, burning, dragging, kicking, physical restraint, locking an individual in a room or a car.	History of unexplained falls or minor injuries, bruising which is characteristic or non-accidental injury – hand slap marks, pinch marks, grip marks, bite marks, scalds, flinching, reluctant to undress.
Sexual Adults and Children	Direct or indirect involvement in sexual activity without capacity and/or consent. Individual did not fully understand or was pressured into consenting. Note: A child under 16 years old can never consent to any sexual act.	Coercion to be involved in the making or watching of pornographic material. Coercion to touch e.g. of breasts, genitals, anus, mouth, masturbation of either self or others, penetration or attempted penetration of vagina, anus, mouth with or by penis, fingers and or other objects.	Pregnancy in a woman unable to give consent, difficulty in walking or sitting with no apparent explanation, torn, stained or bloody underclothes or bedding, Bleeding, bruising to the rectal and/or vaginal area, bruising. Behavioural changes, sexually explicit behaviour, explicit language, self-harm, obsession with washing, fear of pregnancy may be exaggerated
Emotional Adults and Children	Behaviour which has a harmful effect on an individual's emotional well-being or development, causing mental distress undermining their self-esteem and affecting individual's quality of life. Wilful infliction of mental suffering by a person in a position of trust and power.	Shouting, coercion, bullying, blaming, insulting, ignoring, threats of harm or abandonment, intimidation, harassment, humiliation, depriving an individual of the right to choose and their privacy, dignity, self-expression, deprivation of contact, undermining self-esteem, isolation and over-dependence. Failure to provide a loving environment for a child.	Loss of interest, withdrawn, anxious or depressed, frightened, avoiding eye contact, irritable, aggressive or challenging behaviour, unexplained sleep disturbance, self-harm, refusing to eat, deliberate soiling, unusual weight gain or loss.
Neglect	Failure of any person who has responsibility for the charge, care or custody of an adult at risk or child to provide	Fail to meet basic needs including food, environment, access to health care and	Unwashed/ dirty appearance, clothes too small/big,

Adults and Children	the amount and type of care or treatment that a responsible person could be expected to provide.	education, failure to provide for social needs.	untreated sores or infections, isolation.
Financial Adults	The unauthorised taking (theft), deprivation or misuse of any money, income, assets, funds, personal belongings or property or any resources of an adult at risk without their informed consent or authorisation.	Misuse of power of attorney or appointeeship. Money and possessions stolen, misuse or misappropriating money, valuables or property, possessions or benefits, undue pressure in connection with wills, property, inheritance or financial transactions, denying the adult at risk the right to access funds, unauthorised disposal of property or possessions, being asked to part with money on false pretences.	Unexplained or sudden inability to pay bills, Power of Attorney obtained and misused when a person lacks or does not lack mental capacity to understand, unexplained withdrawal of money with no benefits, person lacking goods or services that they can afford, extortionate demands for payments for services.
Organisational Adults	Involves the collective failure of an organisation to provide safe, appropriate and acceptable standards of service to adults at risk. Mainly relates to health and social care provision but aspects may be relevant to SDSG settings.	Lack of individualised care, inappropriate confinement or restriction, sensory deprivation, inappropriate use of rules, custom and practice.	Whistle blowing policy not in place and accessible, insufficient employees training and development. Organisational standards not meeting those laid down by regulatory bodies, service users not treated with dignity and respect, diverse needs not recognized and valued in terms of age, gender, disability, ethnic origin, race or sexual orientation, services not flexible.
Discriminatory Adults	Exists when values, beliefs or culture result in a misuse of power that denies opportunity to some groups or individuals.	Verbal abuse, harassment or similar treatment, unequal treatment, deliberate exclusion from services such as education, health, justice and access to services and protection, harmful or derisive attitudes, inappropriate use of language.	Repeated exclusion from rights afforded to citizens such as health, education, employment and criminal justice.

Modern Slavery	Encompasses slavery, human trafficking, forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.	Adult or Child trafficked into UK or between places in UK for purpose of sexual abuse or labour. Adult or Child forced to work as domestic servant. Adult or child forced to work as sex worker, farm labourer, car cleaner.	Individual may not have their passport or Identity documents. They may not have access to or contact with friends and family. May never be left alone, live in poor conditions, not be able to leave of own free will. May have no access to funds. May not know where they are or who they are with.
Self-Neglect	A wide range of behaviour involving neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding.	May not react to or appropriately fulfil needs for health care, food, warmth. May live in an environment that is an environmental or fire risk and not take any measure to reduce risk or inadequate measures.	Environment which is poorly maintained, dirty, animal infested, cramped to the degree that it places the individual's wellbeing at risk. May have untreated or inadequately treated physical health issues.
Domestic Violence	Incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse by someone who is or has been an intimate partner or family member regardless of gender or sexuality. Age range 16+.	Includes: psychological, physical, sexual, financial, emotional abuse; so, called 'honour' based violence; Female Genital Mutilation; forced marriage.	Appears to be afraid of partner / of making own choices, behaves as though she/he deserves to be hurt or mistreated, low self-esteem or appear to be withdrawn, appears unable or unwilling to leave perpetrator, makes excuses for or condones the behaviour of the person alleged to have caused harm, blames abuse on themselves.

Categories, Definitions and Indicators of Harm

Some Additional Information:

Child Sexual Exploitation: All children and young people can be at risk of sexual exploitation. This includes boys and girls of any age. This is a form of sexual abuse. Whilst young people can give consent to sexual acts from the age of 16 (so long as they have the capacity to do so) they continue to be at risk of sexual exploitation beyond their 16th birthday. **Any concern that a child, young person or vulnerable adult may be at risk of or experiencing sexual exploitation must be reported**

immediately to Children's Social Care or the police. Sexual exploitation of children and young people under 18 involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or another or others performing on them, sexual activities. Child sexual exploitation can occur through the use of technology without the child's immediate recognition; for example, being persuaded to post sexual images on the Internet/mobile phones without immediate payment or gain. In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the child or young person's limited availability of choice resulting from their social/economic and/or emotional vulnerability.

Female Genital Mutilation: Female genital mutilation (sometimes referred to as female circumcision) refers to procedures that intentionally alter or cause injury to the female genital organs for non-medical reasons. The practice is illegal in the UK. It has been estimated that over 20,000 girls under the age of 15 are at risk of female genital mutilation (FGM) in the UK each year, and that 66,000 women in the UK are living with the consequences of FGM. However, the true extent is unknown, due to the "hidden" nature of the crime. The girls may be taken to their countries of origin so that FGM can be carried out during the summer holidays, allowing them time to "heal" before they return to school. There are also worries that some girls may have FGM performed in the UK. Any concern that a child or adult who may be vulnerable may be at risk of FGM must be reported immediately to the relevant Local Authority or directly to police.

Terrorism and Extremism: Any person may become drawn into extremism or sympathy with such views and into terrorism. This will often happen through contacts made via the internet but a culture that supports this can develop in any community, group, school or faith organisation. The Counter-Terrorism and Security Act 2015 places duties on certain bodies, not including Faith Organisations (excepting where such an organisation runs a school or other relevant premises) to have due regard to the need to prevent people from being drawn into terrorism. Everybody should be alert to any indication that a person or group may be developing or has developed an interest or ideology that may include harm to others. **Any concern related to this whether for a child or adult must be reported to the police without delay.**

Appendix 2: Safeguarding Concern Recording Log/Form

Please ensure that you complete this form as much as you can, but do not delay making a referral if some information is incomplete.

Section 1: Details of the child/Vulnerable Adult and their parent/carer		
Name of Child/Young Person:		
Gender:	Age:	Date of Birth:
Religion:	Ethnicity:	Any specific communication needs or methods:
Parent's/Carer's name(s):		
Home address (including contact details) of child/young person:		
Is the child subject to a child protection plan/child in need plan/fostered? If this is known please supply details:		
Any other information which may be relevant:		
Section 2: Details of an allegation of a safeguarding concern against a member of staff/volunteer or other (e.g. sports coach)		
Name and role of person within SDSG or externally:		
Age of person (if known)		
Home address (including contact details)		
Section 3: Your details:		
Your name:	Your position:	Your contact details and date and time of the incident:
Section 4: Your report:		
Are you reporting your own concerns or responding to concerns raised by someone else?		
<input type="checkbox"/> Responding to my own concerns <input type="checkbox"/> Responding to concerns raised by someone else	If responding to concerns raised by someone else, please provide their name and position within the organisation	

Please provide details of the incident or concerns you have including times, dates, or other relevant information (such as a description of any injuries). Ensure that you are clear when recording a fact, expressing your opinion or it is hearsay from someone else. Also add any other relevant information about the family or the particular child/young person. If this report concerns an allegation about a staff member/volunteer or someone providing services to the SDSG include as much information as you in this section:

The child/young person's account of what has happened and how (if this can be given, using the person's preferred method of communication to describe the incident or injury):

Please provide details of the person alleged to have caused the incident/injury including where possible their name, address and date of birth or approximate age. Also include if this person is known to the child/young person personally (this could be the same as in Section 2 or different):

Please provide details of any witnesses to the concern/incident (name, role contact details if known):

Section 5: Actions Taken	
Is the child/young person at immediate risk or danger? (provide details)	
Provide details of any action that has already taken place e.g. contact with line manager, police, children's social care services etc.	
Has the child/young person or family or the accused person been made aware that a report has been made?	
Is this the first time an allegation or concerns been made regarding this child/young person? Or have there been any previous concerns? Please provide details:	
Any additional information or comments you wish to make:	

Date and time of report being submitted (Please sign and date it)

Signature:	
Date:	

Section 6: Immediate action and decisions by DSO

(Date and time of receiving the information, decisions, discussion with whom e.g. SMT, lead Trustee, actions that followed, matters to be followed up, referred to children's social care etc.)

Appendix 3: Safeguarding Recording log (of Actions Taken)

Date & time	Name	Notes (include details of action taken and by whom, this form can be used to record actions taken internally by SDSG as well as providing information on actions taken by external agencies such as when referred to the Police, Children's social care)