

Louie's Helping Hands

LOGGING A CONCERN

CHAIRPERSON: SARA LLEWELLYN

DATE AGREED: 22 FEBRUARY 2017

DATE OF NEXT REVIEW: 22 FEBRUARY 2018

ALL, STAFF HAVE ACCESS TO THIS POLICY AND SIGN TO THE EFFECT THAT THEY HAVE READ AND UNDERSTOOD ITS CONTENT

Louie's Helping Hands

Logging a concern about a child's safety and welfare

Name and address of Louie's Helping Hands:	
Child's name:	Date of birth:
Date of log:	Time of log:
Name of person logging concern (print):	Signature:
Job title:	
Date of concern/incident/disclosure:	Time of concern/incident/disclosure:
<i>Describe the incident/concern/disclosure as factually as possible. Include who was involved, where it happened, exactly what happened, etc. Describe clearly any behavioural or physical signs you have observed.</i>	

Read through and make sure your report is clear now – will it also be clear to a stranger reading it next year?

Action taken:

.....
.....

To be passed to Sara Llewellyn:(Designated Person for child protection)

Date:.....

Time:

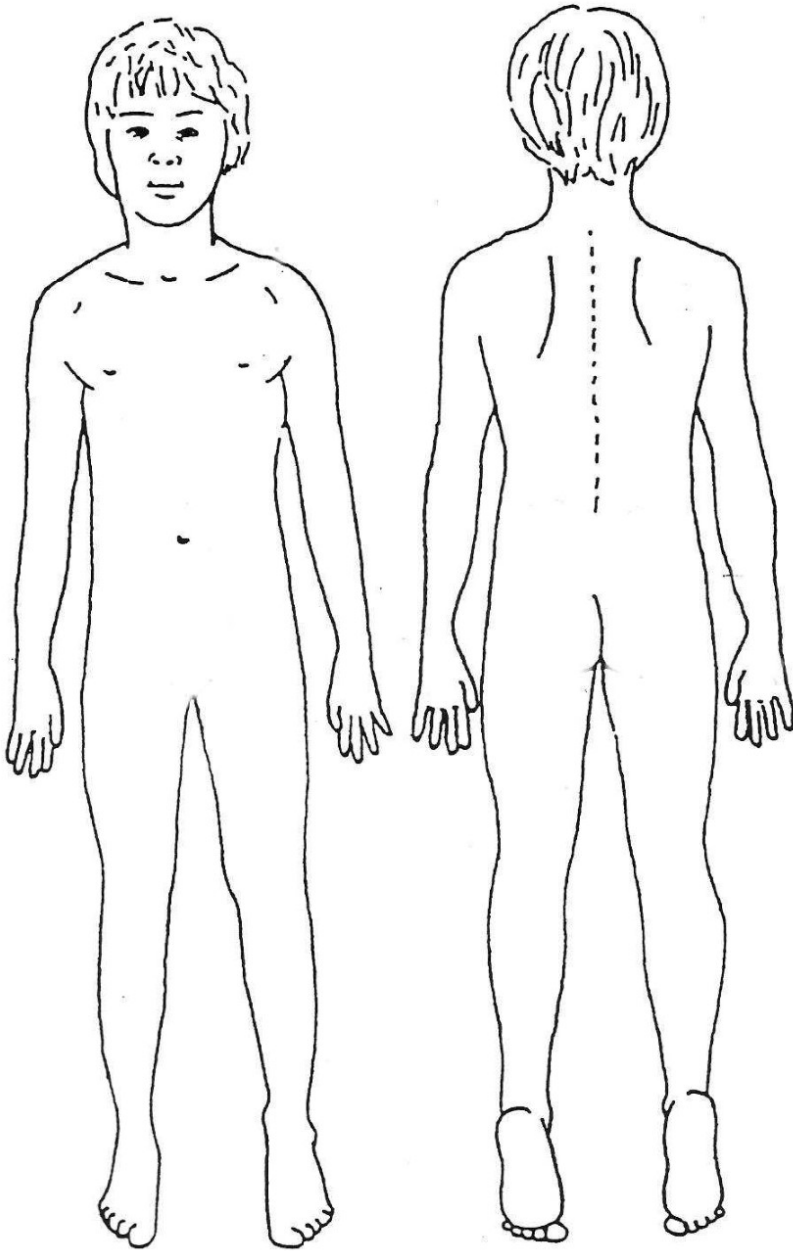
Proposed action by the Designated Person

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(Continue on a separate sheet if necessary)

CONFIDENTIAL

Child Protection Body Map



Child Name

Date Recorded

Person completing

Manager Informed

Description of marks

Employee Signature

Manager Signature

