



Child Safeguarding Policy 2022

Name of your organisation: [The Jarrett Foundation](#)

Name of designated Safeguarding Officer: [Mrs. Ayshea Kamara](#)

Address: [40 Parkside Avenue, Bromley, Kent, BR1 2EJ](#)

Telephone No: [0208 249 3915](#)

Email: Ayshea@jarrettfoundation.org

Web Address: www.jarrettfoundation.org

All Jarrett Foundation staff and volunteers must sign or digitally acknowledge that they have received a copy of this policy. A register is kept by Ayshea Kamara of who has received a copy of this policy.

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1. Policy Statement:

The Jarrett Foundation recognises the responsibility it has to safeguard and promote the welfare of the children in its care. Our aim is to ensure that all children, regardless of their age, race, nationality, ethnic or national origins, disability, gender, religion or belief or for any other reason, who come into contact with our organisation, can do so in a safe and enjoyable environment.

The guidelines that follow apply to all staff (paid or unpaid but referred to as just staff), Trustees, visitors and members will be made available to the parents and carers of the children who attend our events. Through these guidelines we are committed to ensure that:

- We take all reasonable steps to protect children from harm, discrimination and degrading treatment and to ensure that the children are listened to, valued and respected.
- All staff engaged in direct work with children and young people must hold current, enhanced DBS (Disclosure and Baring Service) checks that we will use to line manage them. All staff are aware of the need to be alert to signs of abuse and know how to deal with such concerns.
- Ensuring that all staff are given appropriate support and training in good practice and child protection procedures.
- All allegations of poor practice or abuse will be taken seriously and acted upon in a swift and appropriate manner.

All staff will be required to familiarise themselves with this Safeguarding Policy in order to ensure an understanding of responsibilities towards children. Staff will also be required to attend updates and training, as necessary.

2. Definitions of Abuse and Neglect:

Someone can abuse a child by actively abusing or neglecting a child directly or by failing to act to prevent harm. It can be carried out by someone known to the child or a complete stranger, by a family member, in an institutional or community setting, by telephone or on the Internet.

Children with learning difficulties or disabilities may be at increased risk of abuse due to factors such as discrimination, stereotyping and being unable to articulate the abuse or to protect themselves.

It can often be difficult to recognise abuse, however the four main types of abuse are physical, sexual, and emotional and neglect. The symptoms listed in these guidelines are only indicators and many can have reasonable explanations. Children may behave strangely or seem unhappy for many reasons as they move through the stages of childhood, or their families experience changes. It is nevertheless important to know what could indicate that abuse is taking place and to be alert to the need to consult further.

If you are worried about a child, it is important that you keep a written record of any physical or behavioural signs and symptoms. In this way you can monitor whether or not a pattern emerges and provide evidence to any investigation if required.

Child Abuse

Child abuse happens when a person harms a child. It can be physical, sexual or emotional, but can also involve neglect. Children may be abused by: • family members • friends • people working or volunteering in organisational or community settings • people they know • strangers.

General Signs of Abuse

Children experiencing abuse often experience more than one type of abuse over a period of time. Children who experience abuse may be afraid to tell anybody about the abuse. They may struggle with feelings of guilt, shame or confusion – particularly if the abuser is a parent, caregiver or other close family member or friend.

Many of the signs that a child is being abused are the same regardless of the type of abuse. Anyone working with children or young people needs to be able to recognise the signs. These include a child:

- being afraid of particular places or making excuses to avoid particular people
- knowing about or being involved in 'adult issues' which are inappropriate for their age or stage of development, for example alcohol, drugs and/or sexual behaviour
- having angry outbursts or behaving aggressively towards others
- becoming withdrawn or appearing anxious, clingy or depressed
- self-harming or having thoughts about suicide
- showing changes in eating habits or developing eating disorders
- regularly experiencing nightmares or sleep problems
- regularly wetting the bed or soiling their clothes
- running away or regularly going missing from home or care
- not receiving adequate medical attention after injuries.

These signs do not necessarily mean that a child is being abused. There may well be other reasons for changes in a child's behaviour such as a bereavement or relationship problems between parents or carers. If you have any concerns about a child's wellbeing, you should report them following your organisation's safeguarding and child protection procedures.

Physical Abuse

Physical abuse can involve actions such as hitting, shaking, throwing, poisoning, burning, scalding, and suffocating. It can also result when a parent or carer deliberately causes the ill health of a child in order to seek attention. Symptoms that indicate physical abuse include bruising, including finger marks and grasp marks on limbs, bites, small round burns that could be caused by a cigarette and a large number of scars of different sizes or ages.

Spotting the signs of physical abuse All children have trips, falls and accidents which may cause cuts, bumps and bruises. These injuries tend to affect bony areas of their body such as elbows, knees and shins and are not usually a cause for concern. Injuries that are more likely to indicate physical abuse include:

Bruising

- bruises on babies who are not yet crawling or walking
- bruises on the cheeks, ears, palms, arms and feet
- bruises on the back, buttocks, tummy, hips and backs of legs
- multiple bruises in clusters, usually on the upper arms or outer thighs
- bruising which looks like it has been caused by fingers, a hand or an object, like a belt or shoe
- large oval-shaped bite marks.

Burns or Scalds

- any burns which have a clear shape of an object, for example cigarette burns
- burns to the backs of hands, feet, legs, genitals or buttocks.

Other signs of physical abuse include multiple injuries (such as bruising, fractures) inflicted at different times.

If a child is frequently injured, and if the bruises or injuries are unexplained or the explanation does not match the injury, this should be investigated. It is also concerning if there is a delay in seeking medical help for a child who has been injured.

Emotional Abuse

Emotional abuse happens when a child's need for love, security, praise and recognition is not met and is likely to cause severe and lasting adverse effects on a child's emotional wellbeing. Emotionally abusive behaviour occurs if a parent, carer or authority figure is consistently hostile, rejecting, threatening or undermining. It can also result when children are prevented from social contact with others or if developmentally inappropriate expectations are imposed upon them. It may involve seeing or hearing the ill-treatment of someone else. Symptoms that indicate emotional abuse may include attention-seeking behaviour, low self-esteem, excessively withdrawn behaviour or fearfulness, despondency and being too eager to please.

Neglect

Neglect is the persistent failure of the adult to meet a child's basic physical and/or psychological needs, causing damage to their health and development. It may involve a parent or carer failing to provide adequate food, shelter or clothing, failing to protect a child from harm or danger, or failing to access appropriate medical care and treatment when necessary.

Neglect may involve a parent or carer not:

- providing adequate food, clothing or shelter
- supervising a child or keeping them safe from harm or danger (including leaving them with unsuitable carers)
- making sure the child receives appropriate health and/or dental care
- making sure the child receives a suitable education
- meeting the child's basic emotional needs – this is known as emotional neglect.

Neglect is the most common type of child abuse. It often happens at the same time as other types of abuse.

Neglect can be difficult to identify. Isolated signs may not mean that a child is suffering neglect, but multiple and persistent signs over time could indicate a serious problem.

Some of these signs include:

- children who appear hungry - they may not have lunch money or even try to steal food
- children who appear dirty or smelly
- children whose clothes are inadequate for the weather conditions
- children who are left alone or unsupervised for long periods or at a young age
- children who have untreated injuries, health or dental problems
- children with poor language, communication or social skills for their stage of development
- children who live in an unsuitable home environment

Sexual Abuse

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of what is happening. This may include physical contact, both penetrative and non-penetrative, or involve no contact, such as watching sexual activities or looking at pornographic material. Encouraging children to act in sexually inappropriate ways is also abusive. Under the Sexual Offences Act 2003, any sexual activity – contact or non-contact – with a child under the age of 13 is a crime. Symptoms of sexual abuse may include allegations or disclosure and excessive and inappropriate preoccupation with sexual matters.

Contact abuse happens when the abuser makes physical contact with the child.

It includes:

- sexual touching of any part of the body whether the child is wearing clothes or not
- rape or penetration by putting an object or body part inside a child's mouth, vagina or anus
- forcing or encouraging a child to take part in sexual activity
- making a child take their clothes off or touch someone else's genitals. Non-contact abuse involves non-touching activities.

It can happen online or in person and includes:

- encouraging or forcing a child to watch or hear sexual acts
- making a child masturbate while others watch
- not taking proper measures to prevent a child being exposed to sexual activities by others
- showing pornography to a child
- making, viewing or distributing child abuse images
- allowing someone else to make, view or distribute child abuse images.
- meeting a child following online sexual grooming with the intent of abusing them.

Online sexual abuse includes:

- persuading or forcing a child to send or post sexually explicit images of themselves, this is sometimes referred to as sexting
- persuading or forcing a child to take part in sexual activities via a webcam or smartphone
- having sexual conversations with a child by text or online.

Abusers may threaten to send sexually explicit images, video or copies of sexual conversations to the young person's friends and family unless they take part in other sexual activity. Images or videos may continue to be shared long after the abuse has stopped. Abusers will often try to build an emotional connection with a child in order to gain their trust for the purposes of sexual abuse. This is known as grooming.

Spotting the signs of sexual abuse There may be physical signs that a child has suffered sexual abuse.

These include:

- anal or vaginal soreness or itching
- bruising or bleeding near the genital area
- discomfort when walking or sitting down
- an unusual discharge
- sexually transmitted infections (STI)
- pregnancy.

Changes in the child's mood or behaviour may also cause concern. They may want to avoid spending time with specific people. In particular, the child may show sexual behaviour that is inappropriate for their age.

For example:

- they could use sexual language or know things about sex that you would not expect them to
- they might become sexually active or pregnant at a young age.

Child Sexual Exploitation

What is child sexual exploitation? Child sexual exploitation (CSE) is a type of sexual abuse. Young people may be coerced or groomed into exploitative situations and relationships. They may be given things such as gifts, money, drugs, alcohol, status or affection in exchange for taking part in sexual activities.

Young people may be tricked into believing they are in a loving, consensual relationship. They often trust their abuser and do not understand that they are being abused. They may depend on their abuser or be too scared to tell anyone what is happening. They might be invited to parties and given drugs and alcohol before being sexually exploited. They can also be groomed and exploited online.

Some children and young people are trafficked into or within the UK for the purpose of sexual exploitation. Sexual exploitation can also happen to young people in gangs (Berelowitz et al, 2013).

Spotting the signs of child sexual exploitation Sexual exploitation can be exceedingly difficult to identify.

Young people who are being sexually exploited may:

- go missing from home, care or education
- be involved in abusive relationships
- hang out with groups of older people
- be involved in gangs or anti-social groups
- have older boyfriends or girlfriends
- spend time at places of concern, such as hotels or known brothels
- be involved in petty crime such as shoplifting
- have access to drugs and alcohol
- have new things such as clothes and mobile phones, which they are not able to easily explain
- have unexplained physical injuries.

Bullying and Cyberbullying

What are bullying and cyberbullying?

Bullying is when individuals or groups seek to harm, intimidate or coerce someone who is perceived to be vulnerable.

Bullying includes:

- verbal abuse, such as name calling
- non-verbal abuse, such as hand signs or glaring
- emotional abuse, such as threatening, intimidating or humiliating someone
- exclusion, such as ignoring or isolating someone
- undermining, by constant criticism or spreading rumours
- controlling or manipulating someone
- racial, sexual or homophobic bullying
- physical assaults, such as hitting and pushing
- making silent, hoax or abusive calls.

Bullying can happen anywhere – at school, at home or online. When bullying happens online it can involve social networks, games and mobile devices. Online bullying can also be known as cyberbullying.

Cyberbullying includes:

- sending threatening or abusive text messages
- creating and sharing embarrassing images or videos
- 'trolling' - sending menacing or upsetting messages on social networks, chat rooms or online games
- excluding children from online games, activities or friendship groups
- setting up hate sites or groups about a particular child
- encouraging young people to self-harm
- voting for or against someone in an abusive poll
- creating fake accounts, hijacking or stealing online identities to embarrass a young person or cause trouble using their name.

Spotting the signs of bullying and cyberbullying.

It can be hard to know whether or not a child is being bullied. They might not tell anyone because they are scared the bullying will get worse. They might also think that the bullying is their fault.

No one sign indicates for certain that a child's being bullied, but you should look out for:

- belongings getting 'lost' or damaged
- physical injuries such as unexplained bruises
- being afraid to go to school, being mysteriously 'ill' each morning, or skipping school
- not doing as well at school
- asking for, or stealing, money (to give to a bully)
- being nervous, losing confidence or becoming distressed and withdrawn
- problems with eating or sleeping
- bullying others.

Child Trafficking

What is child trafficking?

Child trafficking is child abuse. It involves recruiting and moving children who are then exploited. Many children are trafficked into the UK from overseas, but children can also be trafficked from one part of the UK to another.

Children may be trafficked for:

- child sexual exploitation
- benefit fraud
- forced marriage
- domestic servitude such as cleaning, childcare, cooking
- forced labour in factories or agriculture
- criminal exploitation such as cannabis cultivation, pickpocketing, begging, transporting, drugs, selling pirated DVDs and bag theft.

Children who are trafficked experience many forms of abuse and neglect. Physical, sexual and emotional abuse is often used to control them, and they are also likely to suffer physical and emotional neglect.

Child trafficking can require a network of organised criminals who recruit, transport and exploit children and young people. Some people in the network might not be directly involved in trafficking a child but play a part in other ways, such as falsifying documents, bribery, owning or renting premises or money laundering (Europol, 2011). Child trafficking can also be organised by individuals and the children's own families.

Traffickers trick, force or persuade children to leave their homes. They use grooming techniques to gain the trust of a child, family or community. Although these are methods used by traffickers, coercion, violence or threats do not need to be proven in cases of child trafficking - a child cannot legally consent to their exploitation, so child trafficking only requires evidence of movement and exploitation.

Modern slavery is another term which may be used in relation to child trafficking. Modern slavery encompasses slavery, servitude, forced and compulsory labour and human trafficking (HM Government, 2014). The Modern Slavery Act passed in 2015 in England and Wales categorises offences of slavery, servitude, forced or compulsory labour and human trafficking.

Spotting the signs of child trafficking Signs that a child has been trafficked may not be obvious, but you might notice unusual behaviour or events.

Children who have been trafficked may:

- have to do excessive housework chores
- rarely leave the house and have limited freedom of movement
- not have any documents (or have falsified documents)
- give a prepared story which is remarkably similar to stories given by other children
- be unable or reluctant to give details of accommodation or personal details
- not be registered with a school or a GP practice
- have a history with missing links and unexplained moves
- be cared for by adults who are not their parents or carers
- not have a good quality relationship with their adult carers
- be one among a number of unrelated children found at one address

- receive unexplained or unidentified phone calls whilst in a care placement or temporary accommodation.

There are also signs that an adult is involved in child trafficking, such as:

- making multiple visa applications for different children
- acting as a guarantor for multiple visa applications for children
- having previously acted as the guarantor on visa applications for visitors who have not left the UK when the visa expired.

Female Genital Mutilation

What is female genital mutilation?

Female genital mutilation (FGM) is the partial or total removal of external female genitalia for non-medical reasons. It is also known as female circumcision or cutting. The age at which FGM is carried out varies. It may be carried out when a child is new-born, during childhood or adolescence, just before marriage or during pregnancy (Home Office et al, 2016).

FGM is child abuse. There are no medical reasons to carry out FGM. It is dangerous and a criminal offence.

Spotting the signs of female genital mutilation

A child at risk of FGM may not know what is going to happen. But they might talk about, or you may become aware of:

- a long holiday abroad or going 'home' to visit family
- relative or cutter visiting from abroad
- a special occasion or ceremony to 'become a woman' or get ready for marriage
- a female relative being cut – a sister, cousin or an older female relative such as a mother or aunt
- missing school repeatedly or running away from home.

A child who has had FGM may:

- have difficulty walking, standing or sitting
- spend longer in the bathroom or toilet
- appear withdrawn, anxious or depressed
- have unusual behaviour after an absence from school or college
- be particularly reluctant to undergo normal medical examinations
- ask for help but may not be explicit about the problem due to embarrassment or fear.

Reporting requirements Regulated health and social care professionals and teachers in England and Wales must report 'known' cases of FGM in under-18s to the police (Home Office, 2016).

3. Good Practice:

All staff should adhere to the following principles and action:

- Always work in an open environment – avoid being left alone with a child where you cannot be observed by others.
- Where possible, there should always be a minimum of two adults present with a group of children.
- Ensure that visitors are not left to wander around the premises unaccompanied when children are present.
- Be mindful of strangers frequently waiting outside with no apparent purpose.
- Treat all children equally and with respect and dignity.
- Maintain a safe and appropriate distance from children (e.g., it is not appropriate for staff or volunteers to have an intimate relationship with a child).
- Avoid unnecessary physical contact with children.
- Always give enthusiastic and constructive feedback rather than negative criticism.
- Keep a written record of any injury that occurs, along with details of any treatment given.

4. Poor Practice:

The following are regarded as poor practice and should be avoided by all staff:

- Spending unnecessarily excessive amounts of time alone with a child away from others.
- Allowing allegations made by a child to go unchallenged, unrecorded or not acted upon.
- Taking a child alone in a car on journeys, however short.
- Taking a child to your home where they will be alone with you.
- Engaging in rough, physical or sexually provocative games, including horseplay.
- Allowing or engaging in inappropriate touching of any form.
- Allowing a child to use inappropriate language unchallenged.
- Making sexually suggestive comments to a child, even in fun.
- Reducing a child to tears as a form of control.
- Doing things of a personal nature that the child can do for themselves.

If during your care you accidentally hurt a child, the child seems distressed in any manner, appears to be sexually aroused by your actions and/or if the child misunderstands or misinterprets something you have done, report any such incidents as soon as possible to another colleague and make a written note of it. Parents should also be informed of the incident.

5. What do you do if you have a concern?

It is not the responsibility of the staff or Trustees working at The Jarrett Foundation to decide whether or not abuse has taken place, but to act on any concerns through contact with the appropriate authorities so that they can make relevant enquiries and take necessary action to protect the child concerned.

If a child tells you that they are being abused, you should:

- Listen and let them know you are taking them seriously.
- Reassure them that they were right to say something.
- Let them know they are not to blame.
- Record date, time and location.

Keep questioning to a minimum and only use them to clarify so that there is a clear understanding of what has been said. Do not attempt to interview them yourself.

Let the child know that you will have to inform the designated Safeguarding Officer about what they have told you to help stop the abuse from happening. Do not promise to keep it a secret.

The staff / volunteers and parents should report all concerns or allegations of abuse as a matter of urgency to the designated Safeguarding Officer for The Jarrett Foundation in this instance Pearl Jarrett.

It is the Safeguarding Officer's responsibility to inform the Trustees and the parents that a referral is being made to Social Services at the time this occurs. The referral must be made regardless of any objection from other parties including the parents.

In the absence of the Safeguarding Officer (S/O) the incident must be reported to Mr Lincoln Beckford – Chair immediately who will then refer any allegations or suspicions of neglect or abuse to the statutory authorities. If the S/O is unavailable advice can be sought from the.

**NSPCC Helpline on 0808 800 5000.
OR CONTACT THE BROMLEY CHILDREN SERVICES, QUALITY ASSURANCE
ON 0208 313 4325.**

In the event that any immediate / urgent action is required to assist the child, e.g., emergency medical treatment, dial 999.

Make a written record of the conversation/incident. This should provide details of:

- The child's name, date of birth and contact details.
- The nature of the allegation and who this is against.
- Descriptions of any signs of abuse.
- Details of any witnesses.
- The child's account of what happened.
- Whether or not the parents have been contacted.
- Whether anyone else has been consulted.

6. Allegations of Abuse against staff / volunteers:

There is a possibility that allegations of abuse may be made against staff or volunteers. This may happen because:

- The abuse has actually taken place.
- An event occurs that reminds the child of something that happened in the past.
- Some children know how powerful an allegation can be and may use this in anger.
- It is a way of seeking attention.

All allegations should be reported to the designated Safeguarding Officer immediately. In cases where the complaint is against this individual the complainant should ensure the child is safe from the alleged abuser and contact Children's Services in the area where the child lives and contact the parents/carers of the child.

It is normal for the alleged abuser to be suspended from work, with pay, pending the outcome of an investigation.

Making a Referral

Who to contact?

In the first instance you must speak to the Designated Safeguarding lead of that organisation e.g., if working in a school, the DSL of the school, of mentoring for The Jarrett foundation, Ayesha Kamara. You must give them your written incident report. They will then contact the Multi-Agency Safeguarding Hub (MASH) of that local authority.

For example, if the incident referred is in regard to a child who is a Bromley resident, here are the details for Bromley MASH:

Outside of office hours and at weekends and public holidays contact the 'out of hours contact' service on **030 0303 8671**.

Telephone: 020 8461 7373 / 7379 / 7026

Address: Civic Centre, Stockwell Close, Bromley, BR1 3UH

mash@bromley.gov.uk

All referrals should be sent in writing using The Jarrett Foundation **Safeguarding Incident Reporting Form**. The exception is in the case of urgent child protection, where the referral will be taken over the phone and followed up in writing by the next working day (24 – 72 hours).

CONFIDENTIALITY

Every effort should be made to ensure that confidentiality is maintained for the parties concerned. Information should be shared on a need-to-know basis only, and data kept in a secure place with limited access to designated people.

Disclosure and Barring Service (DBS).

The Jarrett Foundation uses the DBS Check Online Service (<https://dbscheckonline.org.uk/>) to help assess the suitability of staff whose roles brings them into contact with children, young people and/or vulnerable adults. In the context of child protection, children and young people refers to anyone less than 18 years of age.

Adults working with children, young people and/or vulnerable adults will be recruited subject to an enhanced DBS check.

A Disclosure will only be requested after an assessment has indicated that it is both proportionate and relevant to the position concerned. An employee who refuses to undergo a DBS check will not be permitted to work on any project which involves direct contact with children and/or vulnerable adults.

Where a Disclosure forms part of the application process, the Company encourages all applicants to provide details of their criminal record at an early stage in the application process. This should be sent under separate cover to your manager. Failure to reveal information that is directly relevant to the position sought could lead to withdrawal of an offer of employment.

At interview, or in a separate discussion, the Company will ensure that an open and measured discussion takes place on the subject of any offences or other matter that might be relevant to the position. Having a criminal record will not necessarily bar an individual from working with the Organisation; the nature of the disclosed conviction and its relevance to the position will be considered. However, disclosure of previous offences against children will result in withdrawal of an offer of employment.

The Directors will undertake to discuss any matter revealed in a Disclosure with the person seeking a position with The Jarrett Foundation before withdrawing a conditional offer of employment.

Signature:

Date:

Full Name and Title: _____

Position Applied or Volunteered For: _____

Supervisory arrangements for the management of The Jarrett Foundation activities and services:

We will aim to protect children from abuse and our team members from false allegations by adopting the following guidelines:

- We will keep a register of all children attending our activities.
- We will keep a register of all team members (both paid staff members and volunteers)
- Registers will include arrival and departure times and the names of others in the building at the time.
- We will keep a record of all sessions including monitoring and evaluation records.

- Our team members will record any unusual events on the accident/incident form.
- Written consent from a parent or guardian will be obtained for every child attending our activities.
- Where possible our team members should not be alone with a child, although we recognise that there may be times when this may be necessary or helpful
- Team members should escort children of the same sex to the toilet but are not expected to be involved with toileting, unless the child has a special need that has been brought to our attention by the parent/guardian.
- We recognise that physical touch between adults and children can be healthy and acceptable in public places. However, our team members will be discouraged from this in circumstances where an adult or child is left alone.
- All team members should treat all children with dignity and respect in both attitude language and actions.

Support and Training:

We, The Jarrett Foundation, are committed to the provision of child protection training for all our team members.

This policy was adopted on 7th February 2022 This policy will be reviewed on 7th February 2023



Signed:
Dr Pearl Jarrett, CEO, The Jarrett Foundation

USEFUL CONTACTS:

Childline: Call FREE On 0800 1111

We have a full raft of other policies including Recruitment, Training, Discipline etc. These are available upon request.



Safeguarding Incident Reporting Form

Name of report writer:	
Agency & Designation	
Email address & phone number	

FAMILY COMPOSITION & DETAILS OF INCIDENT

1. Child and Family

Name of Child:	
Date of Birth:	
Date when incident occurred:	
Home address:	
Ethnic origin:	
Faith/Religion	
Disability:	
Subject to a CP Plan or previously subject to CP Process + dates if you know	YES/NO
Is the child Looked After?	YES/NO
Is the child/young person open to Children's Social Care or Early Help (if so, who is the lead practitioner)? If you know	

Whereabouts at time of critical incident	
Carer at time of critical incident	
Are there any adult safeguarding concerns and have these been shared with ACS?	

What happened/ what was disclosed

PLEASE NOTE: The information you provide will be used to help establish whether the case meets the criteria for a Child Safeguarding Practice Review or other type of learning review.

Please outline events and circumstances which have triggered the notification/ <u>NB write exactly what happened and/ or what was said. Do not put opinions or ask for further details</u>	
Do the parent/s/ guardian/s know that you are making a referral?	YES/NO

Please use the chronology table below to outline any events around the time of the incident.
PLEASE NOTE: This should only include key events and DOES NOT need to be a detailed chronology at this stage.

Date/Time/location	Event

Please add any additional information you think may be relevant and may assist decision-making

Please give this incident report to The DSL of the organisation where the incident happened. Do not copy it. You have a duty to follow this up with the DSL to check that it has been actioned by them and what further actions were taken, Your duty does not end with passing on the report.
You must keep the strictest of confidentiality. Information is based on who needs to know.

Thank you