

Policy – Logging a Concern

Before logging a concern

If you have a concern regarding a child or young person and would like to discuss it further, you should consult the designated safeguarding officer.

Designated Child Protection Staff

Name	Elizabeth Tillett
Job Title	Student Wellbeing & Engagement Co- Ordinator
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Name	Nicola Turner
Job Title	Learning Facilitator
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Please complete clearly

This form will be stored for confidentiality.

Personal Details			
Name			
Job Title			
Clock Number			
Date Completed			
Department			
Young Person's Details	5		
Name			
Age		Date of Birth	
Clock Number			
Gender			
Address			
Disability/Medical Cond	dition		
Ethnic Origin			
Mobile Number		Telephone Number	
Mentor	,		'
Any other names the y	oung person or family		
members may be know			
THE THEIR HIST NE KNOW	/II IIV	1	



Young Person's Details			
Family Structure including significant people in the young person's life (siblings)			
Record any history of contact	you have had previously	with the voung person's f	amily (if any)
Record any mistory of contact	you have had previously	with the young person's i	allilly (II ally)
Do you know if the young pers members working at Marshall			
Do you know if any other agencies are involved with			
the family? (social care, young offending)		YES / NO	
If yes, please give detail			
Details of the Concern / Disclo	osure (to be written as soo	n as possible after meetir	na)
			-9)
Date		Time	
Location			
Context (e.g during tutorial, re	view meeting or work place	ce assessment)	



Describe why you are concern young person where possible)		ord actual works spoken I	oy the
To your knowledge, have there behaviour or presentation?	e been any significant cha	inges in the young person	's
Describe any action you took at the time (e.g. what did you say to the young person? Did you inform a Designated Safeguarding Officer?			
Any other relevant information	1		
Is there anything else you feel concerns)	you should record (e.g. p	revious concerns/bullying	/welfare
Date		Signed	
Action taken by Designated Of	ficer		



Was any other organisation / agency informed?			
Date		Name	
Signed			