



SAFEGUARDING CONCERNS DISCLOSURE FORM

2024



Our Mission Statement

Our Lady of Grace RC Primary School recognises that each member of our community is unique and made in the image and likeness of God. Our School will encourage each member:

Through **WORK**, to develop his or her potential

Through **WORSHIP**, to learn to know and love God and His world

Through **WITNESS**, to proclaim to all the peace, joy and glory of God

As Catholics we live our faith through all aspects of our lives. Our Mission Statement underpins our thinking when implementing this procedure



SAFEGUARDING CONCERNS DISCLOSURE FORM POLICY & PROCEDURES

2024

The School Designated Safeguarding Lead:
The Safeguarding Governor:
Safeguarding Concerns can also be reported to
the Chair of Governors:
The Local Authority Designated Officer (LADO)

Mr T Collins
Mr M O'Doherty.

Mrs M Cunningham.

Mr M Gay
Tel 0161-253-6168
email childwellbeing@bury.gov.uk.

Staff, volunteers and visitors are required to complete this form and pass to Mr T Collins or (Mrs Casey in his absence) if they have a safeguarding concern about a child in school.

Full Name of Child	Date of Birth	Class	Your Full Name and Position
Nature of concern/disclosure			
<p>Please include if possible:</p> <ul style="list-style-type: none">• Where you were when the child made a disclosure or you became concerned• What you saw.• Who else was there• What was said or done <u>exactly</u>			
<p style="text-align: right;"><i>(attach additional sheets if necessary)</i></p>			
Time & date of incident:		Who are you passing this information to?	
		Name: Position:	
Your signature:		Ensure that if there is an injury this is recorded (size and shape) and a body map is completed – these can be found in 'Staff Share' 'Safeguarding'	
Date form completed:		Have you raised a concern about a similar issue previously? YES/NO	



To be completed by the senior member of staff (usually the Designated Safeguarding Lead)

Time and date form received Senior Member of Staff/DSL/ASDL

Any Immediate Action Taken

Details of any referral made or advice received/sought

Have parents been informed? Please detail why this was decided.

Details of any further action agreed

Full Name: _____

Signature: _____

Date: _____