**Cause for concern form / record of safeguarding interventions by League and Club Welfare Officers**

**Date: October 2020 Version No 1**

**Section A:**

|  |  |
| --- | --- |
| **Name:** |  |
|  |  |
| **Address:** |  |
|  |  |
| **Date of birth:** |  |
|  |  |
| **Name of club and age group:** |  |
|  |  |
| **Name of welfare officer completing the form:** |  |
|  |  |
| **Date of issue/incident that has caused concern:** |  |
|  |  |
| **Date form completed:** |  |

|  |  |
| --- | --- |
| **Details of Parent/ carer:** |  |

**Concern in relation to** (*please tick)* **adult  child  both**

*which links with child protection plans when*

*there are concerns about neglect)*

**Section B: Nature of Concern**

*(Please tick relevant issue that has led to the cause for concern)*

Risk to self  Risk to others  Risk from others

**Is the concern:**

Allegation  Poor Practice  Disclosure ☐

**Nature of the concern:**

Breach of confidentiality/other data protection breach  Child exploitation

*(inc. criminal & sexual)*

Conditions in the home  Cyber/on-line bullying  Drug dealing

Grooming  Hate crime  Knife/other weapon crime  Overdose  Self-harm  Self neglect  Substance misuse  Low Mood  Trafficking

|  |  |
| --- | --- |
| Other*(please specify)* |  |

**NOTE: Please refer to the RFL Safeguarding Policy to ensure any concerns which must be reported to the RFL Safeguarding Manager are done so promptly.**

**Section C: Brief details about the incident/concern/allegation**

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| *Please use the body diagram to indicate any area(s) of injury or mark(s) seen.*  *(To indicate on the body diagram where any areas of injury or marks have been seen; please use ‘insert text box’ on the diagram and then use this to indicate the injury or mark. The inserted text box can be shaded in using ‘Format tab’ and selecting ‘Shape fill’ whilst the computer cursor is on the text box).*  Image result for body map template nhs |

|  |  |
| --- | --- |
| **Any witnesses to incident:** |  |

**Section D: Details of action taken/planned**

**Referral made/to be made:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Refer to  Safeguarding manager | Date referred |  | Safeguarding case no  *(if known)* |  |

**Section E: Making safeguarding personal**

**What would the individual/ family like to see as the outcome as a result of the safeguarding alert being made?** (i.e. difference wanted/desired)

*What does the person (adult/child at risk/that you are raising the concern about) want to happen or the outcome to be (if known), please give details of their wishes. Please remember, this is not about your views, but the young persons or parent/ carers own.*

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**What else needs to be done to keep the child / young person/ vulnerable adult safe?**

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| --- |
|  |

**What is the child / young person/ vulnerable adult saying to you about their experience / the situation & the impact that it is having on them? What do they want to see change?**

*This aspect helps you to capture the voice of the child / young person/ vulnerable adult & things from their perspective.*

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**Section F: Comments and Follow up**

**Comments by League Welfare Officer including additional action required**

**League Welfare Officer Name Date:**

**Comments by Safeguarding Manager including additional action that may be required**

**Safeguarding Manager Name: Date:**

**Section G: Outcome of interventions, including any meetings relating to the concern**

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| --- |
|  |

*Please send updated form to the Safeguarding Manager Kerry Simmons at* [*kerry.simmons@rfl.co.uk*](mailto:kerry.simmons@rfl.co.uk)

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