

Safeguarding Log of Concern



Name of Setting/childminder:	Setting/childminder address:
Child's full name:	Child's date of birth:
Child's ethnicity:	Gender:
Child's first language:	
Today's date dd/mm/yy	Time:
Name and role of person completing the log:	
Date and time of the incident/concern:	
Description of the incident/concern:(if describing an injury, describe the size, shape, colour and location and also complete a body map):	
Signature of person completing log:	
Body map completed? YES / NO (If YES, please attach securely)	
Please pass this form immediately to the Designated Safeguarding Lead, who should complete the section below (in the case of childminders you must complete the form in full yourself as you are the designated lead.	

To be completed by the Designated Person for Child Protection:

Name of Designated Safeguarding Lead (DSL):
Initial action taken by the DSL:

Has the parent/carer been informed of the concern? YES / NO (please circle, as appropriate)
If YES, state name of parent/carer:
If YES, please state who informed the parent/carer, action taken and the outcome:
If NO, please provide the reason why not:
Date: Time: Signature of Designated person
Details of any further action taken or relevant information (this may include follow-up calls, feedback from other professionals, etc. and should include details.) A separate sheet can be used, if required:
Designated person - please ensure a record of this log is added to the child's chronology if applicable. If advice is required or you need to make an urgent referral, call the MASH on 01733 864170