**Safeguarding Record Log** Teignmouth Community School, Exeter Road / Mill Lane

|  |  |
| --- | --- |
| To be completed by member of staff | |
| Pupil Name |  |
| Date of Birth |  |
| Address |  |
| Form/Class |  |
| Nature of Concern |  |
| Recorded by |  |
| Date recorded |  |
| Signature of person  recording |  |
| To be completed by Senior Designated Person | |
| Shared with others? | Yes/No |
| If yes, with whom |  |
| Action Taken |  |
| Concern logged with  Social Care? | Yes/No |

**Child Concern Body Map Form**

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| --- | --- | --- |
| **Child’s Name:**  **Male/Female:**  **Date of Birth:**  **Class:** | **Your Name:**  **School:**  **Date:**  **Time:** | |
| **My Concern/s (please indicate as many as are appropriate)**   * **Is because an adult has reported concerns to me** * **Is because a child has disclosed information to me** * **Is a result of something I have seen, heard or believe** * **Is because I suspect child abuse** | | |
| **Indicate any injury on the appropriate section of the diagrams below – DO NOT PHOTOGRAPH IT**  image001 | | **Description of injury:** |
| **If the child has given an account of this injury give details:** | | |

|  |
| --- |
| **Please indicate the attitude of the child regarding the injury:** |
| **If the parent has volunteered an account of this injury give details:** |
| **Please indicate the attitude of the parent regarding this injury:** |
| **Any additional information:** |
| **Action taken by Senior Designated Officer for safeguarding:**  **Signed: Date: Time:** |
| **Notes of any further action (please include dates and persons involved in actions):** |