

Children Protection/Safeguarding Cause for Concern Form

Name of Pupil:		Class:	
Date:		Time:	

Details of the cause for concern:

PLEASE USE BULLET POINTS AND BE FACTUAL. USE DIRECT QUOTES WHEREVER POSSIBLE, INCLUDE AS MUCH DETAIL AS YOU CAN ABOUT WHAT HAPPENED, WHERE, WHO WAS INVOLVED AND HOW LONG AGO IT HAPPENED.

Name of Designated member of staff to whom reported:	Date: Time:
---	----------------------------------

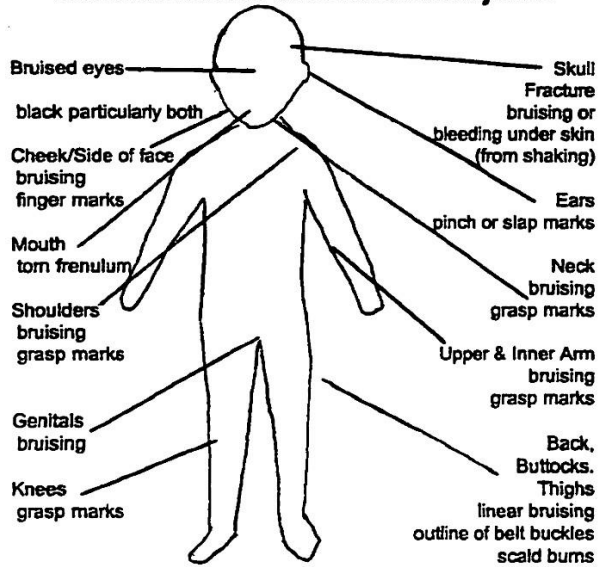
Name of person reporting and job title:	Time and date of reporting:	Signature:
--	------------------------------------	-------------------

Action taken by you:

Follow up action by designated member of staff:		
Action:	When:	Outcome: advice, meeting dates, etc.
To monitor & inform relevant staff		
Referred to parents (verbal/written)		
Referred to Duty SW		
Referred to other agency		

NB: Please also refer to the 'Possible signs to look out for regarding safeguarding' in the 'Safeguarding Information Booklet' in the Class Record File. **PLEASE READ SAFEGUARDING POLICY**

Common site for non-accidental injuries



Non-accidental Injuries

Bruises likely to be:

- frequent
- patterned eg finger and thumb marks
- old and new in the same place (note colour)
- in unusual position (see chart)

Consider:

- developmental level of child and their activities
- may be more difficult to see on darker skins

Burns and scalds likely to be :

- clear outline
- splash marks around the bum area
- unusual position eg back of hand
- indicative shapes eg cigarette burns, bar of electric fire

Injuries suspicious if:

- bite marks
- fingernail marks
- large and deep scratches
- incisions eg from blade

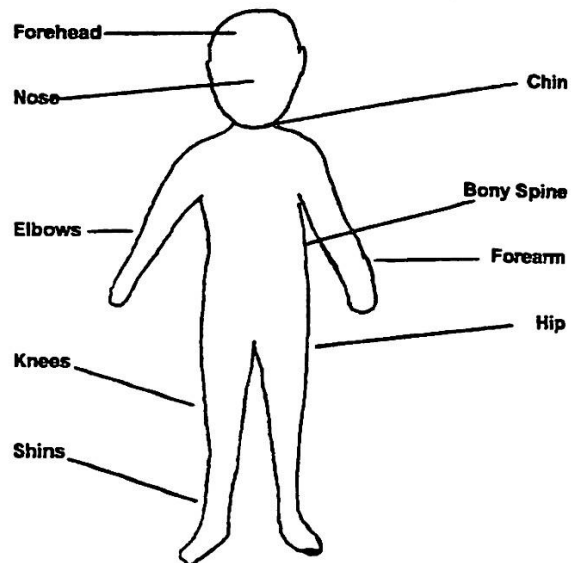
Fractures likely to be:

- multiple - healed at different time
- consider:
- age of child always suspicious in babies under two years old
- delay in seeking treatment

Sexual abuse may result in:

- unexplained soreness, bleeding or injury to genital or anal area
- sexually transmitted diseases eg warts, gonorrhoea

Common Sites for accidental injuries



Accidental Injuries

Bruises likely to be:

- few but scattered
- no pattern
- same colour and age

Consider:

- age and activity of child eg learning to walk
- may be confused with birthmarks or other skin conditions (eg Mongolian blue spot)

Burns and scalds likely to be:

- treated
- easily explained
- may be confused with other conditions eg impetigo, nappy rash

Injuries likely to be:

- minor and superficial
- treated
- easily explained

Fractures likely to be:

- of arms and legs
- seldom of ribs except for road traffic accidents
- rare in very young children
- may rarely be due to 'brittle bone syndrome'

Genital area:

- injury may be accidental (seek expert opinion)
- soreness may be nappy rash or irritation eg from bubble bath
- anal soreness may be due to constipation or threadworm infestation

Parental attitude is important in assessing all of the above - when a child is suffering severe and painful injury most would seek medical help