

Appendix 7 Record of concern: Stillness Junior School

<p>Child's details</p> <p>Full name:</p> <p>Address:</p> <p>Telephone:</p> <p>Date of birth:</p>	<p>Details of those with parental responsibility</p> <p>Full name:</p> <p>Address:</p> <p>Telephone:</p>
	Relationship to child
<p>Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female</p>	Ethnicity, culture and religion of those with parental responsibility if known.
<p>Is the pupil looked-after by the local authority or are there any other legal family arrangements? (for example, a residence order)</p>	Preferred language of those with parental responsibility
When was the child first admitted to this school?	Is any type of language support required?
Ethnicity and culture	Do those with parental responsibility have any disability or special needs?
Religion	How does this disability or special need affect the child?
Does the child have any disability or special educational needs?	Details of any siblings?
Please specify	
Preferred language of child	Does the pupil regularly spend time with other carers, for example, afterschool, or holiday carers, or at a short break service?
Is any type of language support required to converse with the pupil? Yes/No	
Please specify	Has a Common Assessment Framework (CAF) been completed for this pupil?
Does the child know that this form has been completed? Yes/No	Please give date and reason for the CAF
If No, why not?	
If Yes, what did the child say?	

<p>Why are you concerned about this child?</p> <p>Please provide a description of any incidents/conversations and the dates they occurred. You must make clear what is fact and what is opinion or hearsay.</p> <p>You must not ask the child leading questions or try to investigate the concern yourself</p>	<p>Do those with parental responsibility know this form has been completed?</p> <p>Yes/<input type="checkbox"/> No</p>
	<p>If not, why not?</p> <p>If yes, what did they say?</p> <p>NOTE: Those with parental responsibility should not be contacted by anyone in the school if this could place the pupil at risk. Speak to the designated person first</p>
<p>What have you observed and when? (This relates to anything you have personally witnessed)</p>	<p>Does the pupil have any visible injury, or have they told you they have been injured? <input type="checkbox"/><input type="checkbox"/> Yes <input type="checkbox"/><input type="checkbox"/> No</p>
<p>What have you been told and when? (Write here anything you have been told by the pupil or any other person. Be clear about who has said what)</p>	<p>If yes, has medical advice been sought?</p>
<p>What have you heard and when? (This may be third-party information that is relevant but as yet unsubstantiated)</p>	<p>Has any action already been taken in relation to this concern? (for example, pupil taken out of class, first aid)</p>
<p>If an allegation has been made, give any details you have about the alleged abuser</p>	<p>Name and position of the person this record was handed to:</p>
<p>Date and time of this record</p>	<p>Date and time the above person received this record</p>
<p>Your details Full name Position</p> <p>If you are not a member of the school staff please provide details of your school, agency or service together with a contact telephone number.</p>	<p>If this record has been handed to anyone other than the designated person please explain why</p> <p>If you have used additional sheets to complete this record of concern please staple them to this form and write the number of additional sheets here _____</p> <p>If the pupil has a visible injury, please indicate the location on the body map and staple the body map to this form.</p> <p>Hand this form to the designated person before you go home. If the designated person is unavailable, hand it to their deputy, the headteacher or your line manager.</p> <p>If you do not have certain information, such as the child or family's ethnicity, do not delay handing in the form. Ask the designated person to complete the information</p>

Body map

