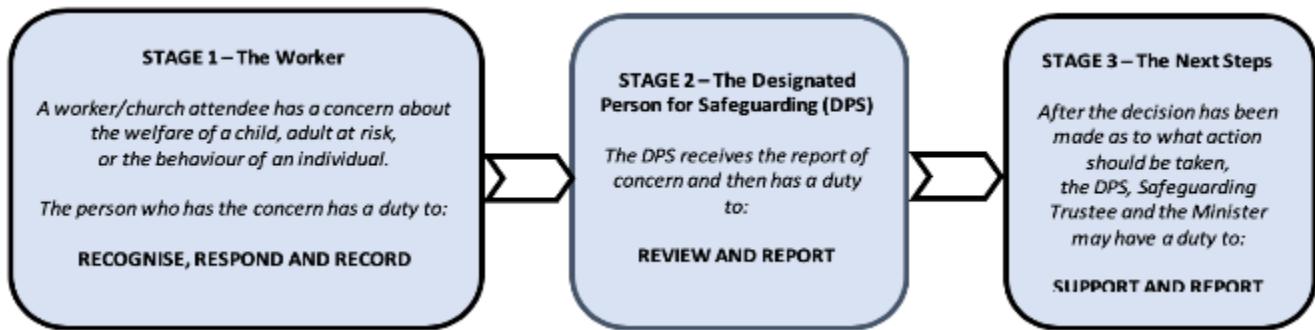


Cornerstone Baptist Church - Cause for Concern Form (Confidential)



Note: Please do not interpret what is seen or heard; simply record the facts. After completing the form, pass it immediately to the *Designated Person for Safeguarding*

Name of individual : _____ Gathering/Group Event: _____

Name and role of person completing form: _____

Day: _____ Date: _____ Time: _____ Place: _____
(Of observed behaviour/discussion/disclosure)

Nature of incident/concern including relevant background (Record individual's words verbatim)

Where?

What has been observed/discussed/disclosed?

Who is involved?

Other relevant details/notes:

Signed: _____

Action/passed to: _____

Hand this document directly to the Designated Person for Safeguarding, if they are unavailable, then hand directly to the Deputy Designated Person for Safeguarding and if they are unavailable hand directly to the Designated Trustee for Safeguarding.

Contact details for all the Designated Safeguarding Officers can be found at the end of this document.

For Designated Child Protection Officer use

Action Taken	By Whom	Outcome
Contact Carers – please tick		
Telephone Call _____ Meeting _____		
Safeguarding Incident Form		
Check Safeguarding Incident Record		
Refer to Social Care		
Other (Please specify)		

Designated Person for Safeguarding: MARK TWINE		mark.twine@cbcl.org.uk Mobile – 07783759020 CBC Office – 0113 2754989
Designated Deputy Person for Safeguarding: LIZ CHENNELS		Mobile – 07985504694
Designated Trustee for Safeguarding: AMY SHIPLEY		safeguarding.trustee@cbcl.org.uk Mobile – 07968078716