Imprint London Concern form

Information record relating to concerns of abuse, maltreatment or concerns about somebody's well-being.

Parish of ……St Edmunds and St Mary Woolnoth……..

The person about whom the concern has been raised. Please provide as much detail as possible.	**Name** **Gender** **Age** **Ethnicity** **Address** **Contact details** **Parent /carer details if under 18 (name / address / phone number)** **Communication and access needs**
The abuse or neglect that may be taking place	**The concern/disclosure** **How it came to light (Please give exact details surrounding the context of the disclosure including date and location and who was present).** **The setting / occasion(s) where / when the incident took place (if applicable)** **The alleged perpetrator(s), full name, address and date of birth (if known/if applicable)** **Its impact on the person** **Do you have any additional concerns about this person/the situation** **The person's wishes in relation to the abuse / neglect** **Any witness(es)**

Action taken	**What action was taken and why (rationale)?** **Who was contacted? (For support / advice / to report)**
	Name of person making record **Date** **Role** **Signature** This information will be shared with - *This confidential record will be stored securely in accordance with the Data Protection Act 1998*

Please make sure you have shared this information with IMPRINT London's Safeguarding Lead (Beth Allen-Jones - Beth@imprintlondon.co.uk) within 24 hours of a disclosure/ concern.