

**F1**

The United Reformed Church **Safeguarding Concern Form**

If someone is in immediate danger - call 999

Or contact:

Hertfordshire Children Social Care Services on 0300 123 4043.

Hertfordshire Adult Social Care Services on 0300 123 4042.

* Please fill in this form with the information available within 24 hours after becoming aware of a safeguarding concern and email it to your Church Safeguarding Coordinator [safenlvg@gmail.com](mailto:safenlvg@gmail.com) and the Synod Safeguarding Officer [safeguarding@urcsouthern.org.uk](mailto:safeguarding@urcsouthern.org.uk)
* Please provide as much detail as you can but don’t worry if you can’t complete all sections.

It is more important to send the form promptly to the SSO who will then follow it up and obtain

more information.

*Church name: Synod:* URC Thames North

# What the concern is about

Does the concern relate to: (tick any that apply)

 Child(ren)  Adult(s)  Adult(s) and children

 Current event  Past event

# Type of concern

If you feel able, please indicate which of these you think apply:

|  |  |  |
| --- | --- | --- |
| Not sure | Physical abuse | Online abuse |
| Spiritual abuse | Sexual abuse | Self-neglect |
| Child sexual exploitation | Emotional abuse | Financial abuse |
| Adult sexual exploitation | Neglect | Modern slavery |
| Radicalisation | Domestic abuse | Institutional abuse |
| Mental Capacity Act | Self-harm | Discriminatory abuse |
| Other |  |  |

# Good Practice 6 – Resource F1

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1. **Who is involved**

Details of person suspected of causing harm/presenting a risk/causing concern:

*Name:*

*Contact details (if available):*

*Other relevant information about them:*

*If there are specific individuals who have been harmed / are at risk of harm, give details: Name, age, where they live:*

*Details of other significant people involved (e.g. family members, carers)*

# What has happened

Please tell us what you are worried about, what happened, when and where it happened:

How did the information come to light?

*For example, something you saw or heard, victim disclosure, information from other organisation:*

If the events happened in the past, do you think there is an ongoing risk to anyone now?

 Y  N

*If, yes, please give details:*

# Who else knows about the concern

Have any statutory services or other organisations been informed of these concerns?

*If yes, please give names and contact details if possible:*

Are there other people in the church/family/wider community who know about it?

# Consent for information to be reported

For children:

Have parents/carers/guardians given consent for this information to be reported?

Y N

*If not, reason for no consent:*

For adults:

Has the individual given consent for this information to be reported?

Y N

*If not, reason for no consent:*

# Any other relevant information

*Anything else you think it would be helpful to explain about this situation:*

# Your details

*Name: Church role:*

*Signature: Date:*

*Email address: Phone number:*

Safeguarding Office, The United Reformed Church, 86 Tavistock Place, London WC1H 9RT