

Appendix 4

Mothers' Union

Safeguarding Concern/Incident Referral Form (SCIR)

PLEASE COMPLETE THIS FORM WITHIN 24 HOURS PROVIDING AS MUCH INFORMATION AS POSSIBLE.

Email to Deena Patel, Safeguarding & Procedures Lead for Britain & Ireland:

safeguarding@mothersunion.org

Name:	Position: staff/volunteer
	Project/Programme:
Contact details:	Mobile:
	Email:
Nature of Safeguarding Concern: <ul style="list-style-type: none">• Sexual• Physical• Neglect• Emotional/Spiritual• Domestic Abuse• Non-recent Abuse• Other Please indicate (there may be more than one category of concern):	Date and time concern was disclosed or witnessed:

Details of the safeguarding concern/incident: please provide as much information as possible, including where known:

- Details of the victim/person disclosing the concern, including name, age, contact details
- Details of the concern: Listen to what the victim says and write this down. Do not ask leading questions
- The name of the alleged abuser
- Any other children/adults who may be at risk, or who may have experienced abuse

Action taken:

Reported to Designated Safeguarding Lead and the Safeguarding & Procedures Lead for Britain & Ireland on:

Print Name:

Designation:

Signed:

Date and time:

For Use Only by the Designated Safeguarding Lead/the Safeguarding & Procedures Lead for Britain & Ireland

Action Taken on receipt of referral:

Outcome:

Print Name:

Designation:

Signed:

Date and time:

Email address:

Mobile: