# Cause for concern form / record of safeguarding interventions by NWRL and Club Welfare Officers

| Date:  | May 2022         | V                 | ersion l | No 1  |         |      |  |
|--|------------------|-------------------|----------|-------|---------|------|--|
|  |                  |                   |          |       |         |      |  |
| Section A:                                   |                  |                   |          |       |         |      |  |
| Name   | :                |                   |          |       |         |      |  |
| Addre  | ess:             |                   |          |       |         |      |  |
| Date o                                       | of birth:        |                   |          |       |         |      |  |
| Name   | of club and a    | ge group:         |          |       |         |      |  |
| Name<br>form:                                | of welfare of    | icer completing   | the      |       |         |      |  |
| Date o<br>conce                              |                  | ent that has caus | sed      |       |         |      |  |
| Date f                                       | orm complete     | ed:               |          |       |         |      |  |
| Detail                                       | s of Parent/ c   | arer:             |          |       |         |      |  |
| Conce  | rn in relation t | o (please tick)   | adı      | ult 🗆 | child 🗌 | both |  |
| which links with child protection plans when |                  |                   |          |       |         |      |  |

there are concerns about neglect)

#### Section B: Nature of Concern

(Please tick relevant issue that has led to the cause for concern)

| Risk to self               | F      | Risk to others    |          | Risk from others                                    |  |
|----------------------------|--------|-------------------|----------|---|--|
| Is the concern:            |        |                   |          |   |  |
| Allegation                 |        | Poor Practice     |          | Disclosure  |  |
| Nature of the cond         | cern:  | 1                 |          |   |  |
| Breach of confidentiality/ | /other | data protection b | oreach   | Child exploitation                                  |  |
| Conditions in the home     |        | Cyber/on-line     | bullying | <i>(inc. criminal &amp; sexual)</i><br>Drug dealing |  |
| Grooming                   |        | Hate crime        |          | Knife/other weapon crime                            |  |
| Overdose                   |        | Self-harm         |          | Self neglect  |  |
| Substance misuse           |        | Low Mood          |          | Trafficking   |  |
| Other (please specify)     |        |                   |          |   |  |

NOTE: Please refer to the NWRL Safeguarding Policy to ensure any concerns which must be reported to the NWRL Safeguarding Manager are done so promptly.



#### Any witnesses to incident:



## Section D: Details of action taken/planned

#### Referral made/to be made:

| Refer to<br>Safeguarding manager | Date<br>referred | Safeguarding case no |  |
|----------------------------------|------------------|----------------------|--|
|                                  |                  | (if known)           |  |

### Section E: Making safeguarding personal

What would the individual/ family like to see as the outcome as a result of the safeguarding alert being made? (i.e. difference wanted/desired)

What does the person (adult/child at risk/that you are raising the concern about) want to happen or the outcome to be (if known), please give details of <u>their</u> wishes. Please remember, this is not about your views, but the young persons or parent/ carers own.

#### What else needs to be done to keep the child / young person/ vulnerable adult safe?

What is the child / young person/ vulnerable adult saying to you about their experience / the situation & the impact that it is having on them? What do they want to see change?

This aspect helps you to capture the voice of the child / young person/ vulnerable adult & things from their perspective.

### Section F: Comments and Follow up

Comments by NWRL Welfare Officer including additional action required

NWRL Welfare Officer Name

Date:

Comments by Safeguarding Manager including additional action that may be required

Safeguarding Manager Name:

Date:

# Section G: Outcome of interventions, including any meetings relating to the concern

Please send updated form to the Safeguarding Manager ...... at.....



