

CONCERN FOR THE WELFARE OF A CHILD OR YOUNG PERSON IDENTIFIED

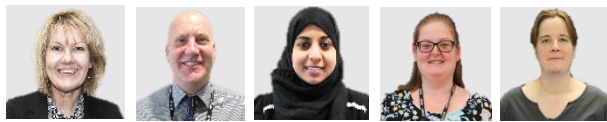
YES

NO

**15 MINUTE RULE
COMPLETE BLUE
REPORT FORM**

**COMPLETE BLUE
REPORT FORM**

**CONSULTATION WITH
DESIGNATED SAFEGUARDING LEAD
(DSL)**



**CONSULTATION WITH
PARENT/CARER
(IF NECESSARY)**

**DESIGNATED SAFEGUARDING LEAD (DSL)
TO TAKE APPROPRIATE ACTION**

Any suspicion that a child is injured, marked or bruised in a way that is not attributable to the normal knocks and scrapes received in play.

Any explanation given that appears inconsistent or suspicious.

Any behaviours that give rise to suspicion that a child may have suffered harm eg worrying drawings or play.

Any concerns that a child may be suffering inadequate care, ill treatment or emotional maltreatment.

Any concerns that a child is presenting signs or symptoms of abuse or neglect.

Any significant changes in a child's presentation, including non-attendance.

Any hint or disclosure of abuse from any person.

Any concerns regarding person(s) who may pose a risk to children eg living in a household with children present.

PARENT/CARER CONTACT

**BLUE REPORT FORM TO
HEAD OF DEPARTMENT**

**BLUE REPORT FORM TO
DESIGNATED SAFEGUARDING LEAD (DSL)**

CPOMS