



Carleton Endowed CE (VA) Primary School
Cause for Concern sheet for visitors

Name of Child:		Class:
Time of concern:	Date of concern:	Place of concern:
Concern:		
Detailed Account: (Please do not interpret what is seen or heard; simply record the facts. After completing the form, pass it immediately to the Designated Safeguarding Lead)		
Person completing form		Role



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Date	Actions	Person full name

Designated officer Signed: _____

Date: _____

Please provide a copy to the DSL



DSL Checklist

Possible Action	By Whom	Outcome
Discuss with child		
Contact parents		
Check records in school		
Discuss with relevant professionals		
Check with sibling schools		
Seek advice from LA		
Monitor and review		
Consider Early Help		
Consult with Social Care		
If a child is at immediate risk contact police: Emergency: 999 Non-emergency : 101		
Other (please specify)		



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Ongoing Monitoring Form

Name of Child:	DOB:	Class/Year:

Day and Date	Observation/Incident	Staff Initials	Action Taken