**Safeguarding Report Form**

Most recent update: 08 September 2025

**PART 1**

**Details of learner or programme participant that this report applies to**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name |  | | | |
| Address |  | | | |
| Date of birth |  | Contact telephone no. |  | |
| Is the person disclosing/of concern below 18? | | | YES | NO |

**Details of staff member completing this form**

*NB Some safeguarding reports are based on disclosure but there are some where there is no disclosure but there are staff concerns. Please complete the following fields as appropriate*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Organisation |  | | | | |
| Service User Disclosure | YES | NO | Staff concern | YES | NO |
| Member of staff to whom disclosure was made |  | | Job role |  | |
| Organisational Designated Safeguarding lead (if different from above) |  | | Date of disclosure |  | |
| Nature of disclosure/concern: | | | | | |
| [row will resize when text added] | | | | | |
| Date of submission to the CW&C Designated Safeguarding Lead | | | |  | |

**Details of any support actions agreed with the learner or programme participant (if any)**

|  |
| --- |
| Actions taken: |
| * [row will resize when text added] |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **PREVENT Duty** | | | | | |
| We also have a duty to protect our learners and programme participants from any form of extremism and/or intent to cause harm or capability to cause harm. This includes:   * Right wing extremism * Religious extremism * Animal rights extremism * Other forms of extremism   In your opinion, do you think the information submitted in this report comes under our Prevent Duty? *This is just your opinion to help our Designated Safeguarding Lead access appropriate support/advice.* | | | | | |
| Yes |  | No |  | Not sure |  |

Once you have completed the information above, submit the report to:

**Matthew Smith** Designated Safeguarding Lead for Skills and Employment provision

Email SETSafeguarding@cheshirewestandchester.gov.uk

Telephone 07990 532840

**Ben Watts** Deputy Safeguarding Lead for Skills and Employment provision

Email SETSafeguarding@cheshirewestandchester.gov.uk

Telephone 07881 500226

**Jodie Ronan** Deputy Safeguarding Lead for Skills and Employment provision

Email SETSafeguarding@cheshirewestandchester.gov.uk

Telephone 07768 558858

**PART 2**

Safeguarding report

**To be completed by the Council’s Designated Safeguarding Lead (DSL)**

|  |  |
| --- | --- |
| Name of DSL: |  |
| Date Received by DSL: |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Agreement with first response actions taken: | YES | | NO | |
| Further actions to be taken: | | | | |
| Action | | By Whom | | Complete |
| [row will resize when text added] | |  | |  |
| [row will resize when text added] | |  | |  |
| [row will resize when text added] | |  | |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Review date |  | Diarised 🗸 |  |
| Review notes: | | | |
| [row will resize when text added] | | | |

(*copy and paste additional review dates and notes if required*)

**I confirm that following review(s), there are no further actions to be taken on this case:**

|  |  |  |  |
| --- | --- | --- | --- |
| Signed |  | Date case closed |  |

|  |  |  |  |
| --- | --- | --- | --- |
| *Report quality sampled by Disclosure QA Officer* | |  | |
| *Approved* |  | *Date* |  |