Model Safeguarding Report Form by the Bikeability Trust. Version 2, March 2023.

All **red type** should be replaced by the relevant information specific to your organisation. Yellow highlights indicate where the model Safeguarding Report Form fulfils the Bikeability Trust’s requirements as set out in the ‘Bikeability Trust training provider application guide’ of November 2022.

This template can be used as the basis for Training providers’ Safeguarding Report Form. It needs to be adapted, based on individual requirements and information added, before it will be fit for purpose. The Training provider should ensure that it covers all environments where Bikeability training is delivered including, but not restricted to, after school clubs, holiday schemes and Bikeability Plus Family and Adult training.

The form must be available to all instructors and staff.

This form complies with the requirements on Bikeability Training providers as set out by the Bikeability Trust in the ‘Bikeability Trust training provider application guide’.

**Designated Safeguarding Lead**: Insert Name

**Contact Details** : Insert email and phone number

This form must be completed in the event of any of the following cases:

* Whenever a child or vulnerable adult makes a disclosure
* To report on significant harm done towards a child or vulnerable adult by an instructor/staff.

The form must be completed within 24 hours of the disclosure or observation made. Instructor to fill in this part:

|  |
| --- |
| Details of child or vulnerable adult (Mandatory) |
| Name | |
| Age/DOB (if known) | |
| Address/contact details (if known) | |

|  |
| --- |
| Details of person reporting (Mandatory) |
| Full Name | |
| Role | |
| Address/contact details | |

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| --- |
| Section A (Mandatory) |
| Date and time of disclosure/observation |
| Location of disclosure/observation |
| Other persons present |

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| --- |
| Section B (Mandatory) |
| Details of disclosure/observation  (What was said, observed, reported) |
| How did you respond? |
| Any other relevant information |
| Whom did you notify, by what means and when? |

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| Report to School Safeguarding Lead (for school-based training) (Mandatory) |
| Name of School | |
| Name of School of Safeguarding Lead | |
| Means, time and date of information passed on to School Safeguarding Lead | |
| Contact details used | |
| Report to ORG Safeguarding Lead |
| Name of ORG Safeguarding Lead | |
| Means, time and date of information passed on to ORG Safeguarding Lead | |
| Contact details used | |

Training Provider/Grant Recipient Safeguarding Lead to fill in this part:

|  |
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| Report to Local Safeguarding Board (if applicable) |
| Name of Local Safeguarding Board | |
| Means, time and date of information passed on to Local Safeguarding Board | |
| Contact details used | |

|  |  |  |
| --- | --- | --- |
| Signature of Person reporting | | |
|  | | |
| Print name | Date: | |
| **Safeguarding Lead actions** | |
| **Disclosure of abuse**  Does this disclosure need to be reported to the school?  Does this disclosure need to be reported to the local safeguarding board?  Write down the reasons for your decision. | |
| **Allegations of significant harm done towards a child or vulnerable adult by an instructor/staff**  Is this allegation a significant harm as defined here [RSI guidance what to do if something goes wrong](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/752170/RSI_guidance_what_to_do_if_something_goes_wrong_Examples_table_deciding_what_to_report.pdf)?  If yes, please detail any further actions taken by you and ORG. | |
| **In case of Disclosure of abuse and Allegations of significant harm**  Date of review of Safeguarding policy and procedures  How do Safeguarding policy and procedures need to be changed? | |
| **In case of Disclosure of abuse and Allegations of significant harm**  What learning from incident needs to be fed into Quality Improvement Plan? | |
| Any other actions taken by Safeguarding Lead | |

|  |  |
| --- | --- |
| Signature of Training provider Safeguarding Lead | |
| Signature Safeguarding Lead | |
| Full name of Safeguarding Lead | Date: |

Please ensure all safeguarding concerns are reported to the correct safeguarding lead/local authority safeguarding team. Please ensure that relevant safeguarding concerns/disclosures are passed to the Bikeability Trust within 72 hours.