**Safeguarding Reporting Proforma**

Your Name:

Your Role:

Designated Safeguarding Officer Name and Contact:

Date and Time of Report:

Other Colleagues Involved:

**Statement of Incident**

Please include date, time, location and description of the incident

Is there an immediate risk to the individual or others? Y/N

If yes, please contact 999 immediately, and notify the Principal Safeguarding Officer

**Action Taken**

Please include names and contact of person(s)/ agency/ service(s) the referral has been made. If a referral is not necessary, please state reasons below.

**Context to Incident**

Please include any other relevant detail

Signature …………………………………………………………………………….

Please email this form to the, Safeguarding Officer, safeguarding@salford.ac.uk