**Reporting form for safeguarding allegations and concerns**

Arise is committed to protecting every person supported or assisted by the work we do, fund and advocate for, as well as our team, and frontline groups we work with. This form should be used to report any safeguarding incident or concern relating to Arise staff, volunteers, contractors, and trustees, or relating to any programme supported by Arise.

Arise has a duty of care to all who work for the organisation. It takes a survivor centred approach to complainants. Throughout, it is guided in its response by its policy base and agreed procedures and by its accountability to its board of trustees and obligations to the Charity Commission.

We understand that talking and writing about incidents can be a difficult and emotional process. We appreciate the time and energy you invest into this report.

This form will not be shared beyond Arise. We will always aim to seek consent before acting unless it describes a situation in which you or others are at risk of harm. In such circumstances, we may be obligated to notify others, including relevant authorities. We will always inform you of actions taken.

We understand that you may wish to submit this report anonymously. However, in some cases, anonymised reports can limit Arise’s ability to investigate further. If you wish to disclose your name on a confidential basis, we will make every effort to maintain this confidence.

Please return this form to our confidential email: [Safeguarding@arise.foundation](mailto:Safeguarding@arise.foundation)

**Reporters’ details**

|  |  |
| --- | --- |
| Date and time |  |
| Your name. \* |  |
| Your location. |  |
| Your contact details.  Email and phone number. |  |

\* If you would prefer to stay anonymous, you can leave this box empty.

**Type of incident**

|  |  |
| --- | --- |
| Child Safeguarding |  |
| Adult Safeguarding |  |
| Sexual Exploitation |  |
| Safety/Security |  |

**Details of allegations/concerns**

|  |  |
| --- | --- |
| Name of individual(s) involved. |  |
| Date / time of incident. |  |
| Location of incident. |  |
| Summary of incident. Please state in few words what the incident/concern comprises of. |  |
| Details of the incident. (Please include facts, not opinions) |  |
| Were / are there any [other] witnesses? \*  If yes, and where the witness is happy to be contacted by Arise, please give their contact details. |  |
| Are there any other factors you would like us to consider? |  |

\*We ask this question because witness testimony can help further investigation, however it is not required.

**Immediate action**

|  |  |
| --- | --- |
| Please provide details of action taken to date. |  |
| Has the incident been reported to any external agency? Please provide details of name of agency, contact person, email, phone number. |  |

**Preferred next steps**

|  |  |
| --- | --- |
| What would you like to happen next in relation to this report? |  |
| How would you like the Designated Safeguarding Lead to contact you about this report?  Please share your email and telephone number. |  |

Thank you very much for the time you have taken to complete this report. Please send it [safeguarding@arise.foundation](mailto:safeguarding@arise.foundation)

A close up of a text

Description automatically generated