# Child protection policy wellbeing concern form (Competitions)

It is not unusual for young people to explore challenging themes in creative work. While we recognise that this normal and should not be discouraged, creative writing can be used as a way for young people to express things they feel unable to say in other ways. You should use this form to record any concerns you have when reading writing submitted by a young person.

This form should be completed by whoever is raising the concern.

Once completed, this information must be passed to Scottish Book Trust’s Designated Child Protection Officer or Deputy DCPO for action and filing.

Normally any concern about creative writing will initially be raised with the young person or referred to a teacher or professional who submitted the work. If it is deemed necessary to report this wellbeing concern to the Child’s ‘named person’, Scottish Book Trust will pass the information on as appropriate. As each child grows up, their contact will change, with support usually provided by:

* A health visitor from birth to school age
* A head teacher or deputy head teacher during primary school years
* A head teacher, deputy head teacher or guidance teacher during secondary school years

In case it is necessary, you can use the [Social Work Departments contact information provided by Social Work Scotland](https://socialworkscotland.org/wp-content/uploads/2018/06/ScottishCouncilsSocialWorkContactSheet.pdf).

## Child/Young person’s details

| **Question** | **Answer** |
| --- | --- |
| Name: |  |
| Date of birth: |  |

## Person recording’s details

| **Question** | **Answer** |
| --- | --- |
| Name: |  |
| Organisation: |  |
| Position: |  |

## Area of concern

Please include any content which caused concern, e.g. included references to suicide, extreme violence, abuse, coercion, sexual assault or mental health issues

|  |
| --- |
|  |

| Signature: |  |
| --- | --- |

|  |  |
| --- | --- |
| Date: |  |

**Has the concern been shared with a teacher/other professional/parent or carer?** (**Please delete as appropriate)**

Yes / No

Please also state their relationship to the young person

|  |  |
| --- | --- |
| Relationship to young person |  |

## What did the parent/carer or professional say about the concern?

|  |
| --- |
|  |

## Has the concern been shared with the young person? (Delete as appropriate)

Yes / No

## What did the child/young person say about the concern?

|  |
| --- |

## ONLY COMPLETE THIS SECTION IF RELEVANT TO AGENCY STRUCTURE

### **Has the concern been shared with anyone else? (Delete as appropriate)**

Yes / No

| **Question** | **Answer** |
| --- | --- |
| Please specify who: |  |
| Comments/action: |  |

| Signature of person completing the form: |  |
| --- | --- |

| Signature of Designated Child Protection Officer (on receipt of the information): |  |
| --- | --- |