Safeguarding Records Transfer Form

<Insert Setting Privacy Statement>

|  |  |  |
| --- | --- | --- |
| Child’s Name: | |  |
| Child’s Date of Birth: | |  |
| Child’s Address: | |  |
| Parents/Carers Name: | |  |
| Parents/Carers Address: | |  |
| Date of Transfer/Sent: | |  |
| Method of Transfer -  eg- Electronically – verify the email first, send password protected & send password separately.  Hand delivered  By post - marked confidential with senders’ details & registered, signed for recorded delivery (Attach proof to form) | |  |
| Password (you may need this for future reference) | |  |
| Type of record(s) /Name of record(s) transferred | |  |
| Reason for transfer:  (Include an email/letter with the transfers documents & advise who is your settings Lead for Safeguarding/DSL) | |  |
| Name of Setting including address & phone number sending the records: | |  |
| Name of Setting including address & phone number receiving records: | |  |
| Date records scanned to Social Worker for LAC Child file: | |  |
| **Confirmation of received documents** | | |
| **For Electronic Version** | | |
| Electronic Version – Record date read receipt received -follow up if no response & record all follow ups |  | |
| Date password shared |  | |
| **Hand Delivered Documents** | | |
| Hand Delivered By | Print Name:  Position:  Signature:  Date: | |
| Handed to: | Print Name:  Position:  Signature:  Date: | |
| **Recorded and Tracked Delivery** | | |
| Recorded and Tracked Delivery: Attach proof to form  Check when the delivery has been signed for  Follow up if no response & record all follow ups | Record name of company providing the service:  Place of posting:  Method of delivery:  Tracking reference:  Post by - print Name:  Position:  Signature:  Date:  Date signed for: | |
| **Lead for Safeguarding/Designated Safeguarding Lead (DSL) - Conversation Meeting** | | |
| Date meeting/phone call took place between DSL’s at both settings | Date:  Names of persons in meeting: | |