

## Concern / Complaint Form

Receiving a disclosure and recording the information is an important step in supporting the alleged victim. This form should be used to record a suspicion, allegation or disclosure of abuse or a complaint of inappropriate conduct.

Please do not discuss the concern with anyone other than your parish priest, manager or Safeguarding office. *If there's immediate danger please contact police immediately.* 

	Name:		
	Tel:		
Your Details	Email:		
	Position:		
	Parish/Order:		
	Name:		
	Date of Birth:Age:		
	Tel:		
Details of the Address (if known):			
Alleged Victim			
	Ethic Origin:		
	Language:		
	Parent/Carer details (where applicable):		
	Name:		
	Address (if known):		
	Tel:		
	Is the parent/carer aware of the allegation, suspicion or complaint?   Yes  No		
	Name:		
	Address (if known):		
Details of person	of person		
making complaint	Tel:		
	Email:		
	Relationship to child or alleged victim:		



Details of person who the complaint was made against	Name:	
Nature of the complaint – include time, date, location and what happened (this can include observations of alleged victim's behaviour).		
2. Details of any i	njuries and if the alleged victim received medical attention.	
(In the case of out by Departn	an allegation of abuse, formal investigations and interviews will be carried nent of Communities and Justice (DCJ) and/or NSW Police. You must record shild has said at the point of initial disclosure it is not your role to investigate.)	



4.	Details of any witnesses?
5.	Does this complaint indicate the possibility of abuse, i.e. physical abuse, sexual abuse, neglect?
	☐ Yes ☐ No
	If yes, you must now consider your mandatory reporting obligations.
6.	Does this complaint amount to Reportable Conduct or Conviction? Please indicate which category?
	☐ Sexual abuse
	☐ Physical assault
	☐ Sexual misconduct
	☐ III-treatment
	☐ Neglect
	☐ Psychological harm
	☐ Offence under S43B of NSW Crimes Act (failure to protect)
	☐ Offence under S316A of NSW Crimes Act (failure to report)
	Reportable conviction
7.	Who did you make a report to?
	☐ Parish Priest
	☐ Safeguarding Office (via 66 21 9444 or safeguarding@lismore.catholic.org.au



☐ Police (via 000 or Local Area Comm	and (LAC))			
☐ Office of Children's Guardian				
☐ Department of Communities and Jus	tice (DC&J) (via 132 111)			
Names and details of people spoken to:				
8. What actions were agreed upon and by whom? Please specify.				
9. Form completed:				
Date:	Time:			
Signed:	_			
(A copy must be retained by the recipient of th	e disclosure and filed in a secure location. A copy			

must be sent to the Safeguarding Office and, as required, the police shall receive a copy of this

Concern / Compliant Form V1 17.06.20

record).