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 deliveredBy 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 formCheck 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: |