**Annual Safeguarding Report to BYM - 2022**

| **Area Meeting name** |  |
| --- | --- |
| **Safeguarding co-ordinator** |  |
| Name |  |
| Telephone |  |
| Email |  |
| **Deputy Safeguarding co-ordinator/s**  *(add more lines if needed)* |  |
| Name |  |
| Telephone |  |
| Email |  |
| **Expert advice and support** |  |
| Is the AM registered with an expert agency such as 31:8? | Yes/No |
| Name of agency |  |
| **Training** |  |
| Has all necessary role-holder safeguarding training been undertaken or scheduled? If not, please set out measures to be taken to correct this. |  |
| **AM safeguarding policy** |  |
| When was the AM’s safeguarding policy last reviewed? |  |
| **Safeguarding concerns** |  |
| Does the AM have any contracts in place with individuals, to ensure the safety of all? *If ‘yes’, please list on a separate page – the BYM Safeguarding Co-ordinator may need to discuss these with you* | Yes/No |
| Have there been any safeguarding issues or concerns within the AM over the last 12 months? *If ‘yes, please add notes separately – the BYM Safeguarding Co-ordinator may need to discuss these with you* | Yes/No |
| **Date of report** |  |

Please send this completed report to the BYM Safeguarding Officer, by email to: [safe@quaker.org.uk](mailto:safe@quaker.org.uk)