

Prept. Foundation – Inclusion Concern Reporting Process

1. Purpose

Prept. Foundation encourages anyone who experiences or witnesses' discrimination, exclusion, harassment, or any behaviour that undermines our Inclusion Policy to report their concern. We are committed to handling reports promptly, fairly, and with care.

2. Reporting Process

1. Raise the Concern

- Complete the Inclusion Concern Form (paper or online).
- Or speak directly to the **Inclusion Lead – Camilla Bowers (Designated Safeguarding Lead, DSL)**, a staff member, or a volunteer.
- If you are **not comfortable raising the concern with the Inclusion/DSL**, you may contact the **Deputy Designated Safeguarding Lead (DDSL) – Jessica Aggarwal** instead.

2. Acknowledgement

- The DSL or DDSL will acknowledge receipt within **5 working days**.
- If urgent or safeguarding-related, action will be taken immediately.

3. Review and Action

- The DSL or DDSL will assess the concern, speak with relevant parties, and recommend appropriate action.
- Where needed, concerns may be escalated to senior leadership or trustees.

4. Outcome and Feedback

- The person raising the concern will be informed of the outcome, while maintaining confidentiality of all parties involved.

5. Support

- Support will be offered to anyone affected by the concern, including children, young adults, and staff.
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3. Key Safeguarding Contacts

- **Designated Safeguarding Lead (DSL) / Inclusion Lead**

Name: Camilla Bowers

Email: safeguarding@preptfoundation.org

- **Deputy Designated Safeguarding Lead (DDSL)**

Name: Jessica Aggarwal

Email: safeguarding@preptfoundation.org

(Both DSL and DDSL can be reached via the safeguarding email. Reports sent here will be routed securely to the safeguarding team.)

4. Inclusion Concern Form

Confidential – This form will be handled with care and only shared with the DSL, DDSL, and relevant staff to resolve the issue.

Section A – About You

- Name: _____
- Role (child/young adult/staff/volunteer/other): _____
- Contact details (if you wish to be contacted): _____

(You may report anonymously, but this may limit our ability to respond fully.)

Section B – The Concern

- Date of incident/concern: _____
- Location (if relevant): _____
- Who was involved? (if known): _____
- Describe what happened:

Section C – Impact

- How did this affect you or others?

Section D – Action Taken

- Have you spoken to anyone about this already?
 - Yes – Who? _____
 - No

Section E – What would you like to happen?

Section F – Signature (if comfortable)

Signed: _____

Date: _____