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**Reporting of Safeguarding Concerns to MTE**

All providers are required to inform MTE of any concerns that occur on a Mountain Training course that invoke their safeguarding procedures.

Once complete please email to MTE’s Designated Safeguarding Lead; cath@mountain-training.org

|  |  |
| --- | --- |
| **SECTION 1 - Essential details** | Completed by Provider |
| Provider Name |  |
| Provider Mountain Training Number |  |
| Mountain Training Course  |  |
| Was it training or assessment? |  |
| Course Director Name |  |
| Course Director Mountain Training ID Number |  |
| Names and MT IDs of other training/assessing staff involved |  |
| Date & Time the concern was reported to you; |  |

|  |  |
| --- | --- |
| **SECTION 2 – Description of concern** | Completed by Provider |
| What happened – brief details of the concern;  |  |
| Actions taken in response to the concern; |  |
| Outcome at the time of reporting to MTE; |  |
|  |
| Signature |  | Date |  |

|  |  |
| --- | --- |
| **SECTION 3 – To be completed by Mountain Training Designated Safeguarding Lead** |  |
| Date / Time concern reported to MT |  |
| Date this report received |  |
| MT DSL Signature |  | Date |  |