

SAFEGUARDING ADULT ALERT

This form must remain open to a named worker throughout the process. Reassign to the Responsible manager for completion once the Safeguarding process has been concluded.
Please complete all appropriate boxes and sign your initials at the end of each section you complete as others may contribute to the form.

Identification of Whole Service Investigation (click one):

Whole Service Referral Individual Client Referral

Part 1: Vulnerable Adult's Details

Alert Date:

Name:

CareFirst No.:

Date of Birth:

Age: Gender:

Usual Address:

Postcode:

Telephone No.:

GP's or Surgery Name:

Ethnic Origin:

Client Group:

Responsible Organisation:

Has a referral been made for this person in the last year as a victim of abuse? No

Is the person known to any other agencies (including statutory, non statutory and voluntary sector? No

Current place of residence (select one from list):

Is the person from another Local Authority area? No

Part 2: Source of Alert

Name of Alerter:

Telephone Number:

Please select one from drop-down list:

If other, please give details:

Part 3: Information about Alleged Perpetrator

Name of the alleged perpetrator:

Is the alleged perpetrator a current or previous Social Care client? No

If Yes, please give CareFirst No.:

Alleged Perpetrator's Gender:

Alleged Perpetrator's Age:

Alleged Perpetrator's Ethnic Origin:

Has a referral been made for this person in the last year as an alleged perpetrator? No

Does the Alleged Perpetrator live with the Vulnerable Adult? No

Is the Alleged Perpetrator the main family carer? No

Relationship of Alleged Perpetrator to Vulnerable Adult (select one from drop-down list):

Details of Alert

Be as detailed as possible as this information may be required by Police as evidence at a later date.

Details of Alert – Cont'd

Part 4: Consent to share Information

For Safeguarding Team use only.

Has the person consented to sharing their information with Devon County Council? No

If YES, the person should understand the reason their information is being shared and the purpose.

Is this the case? No (such as: there are concerns about their safety and well being which needs to be investigated)

If NO, the person's consent has not been obtained, add reason why (select from list):

Person does not have mental capacity (see part 4)	No
Person (the individual, family member, staff or third party) would be put at increased risk of serious harm	No
Prejudice the prevention, detection or prosecution of a serious crime	No
Lead to an unjustified delay in making enquires about allegations of serious harm to an adult	No
To prevent abuse or serious harm to another individual	No

Part 5: Issues relating to the Person's Mental Capacity:

Remember assessment of Mental Capacity must be decision and time specific:

What is the nature of the decision? Who assessed a lack of capacity? Where is this documented?

PART 6 RISK Assessment

Initial Assessment of Risk

What are the immediate identified risks? What are the longer term risks?

Hint Text: Bear in mind the definition of "a vulnerable adult", is this person dependent on others for their basic needs? Have they the capacity to assess risk or decide on courses of action to take to protect themselves? Are they able to act on these in the situation they are in? Are they under duress? Duress increases vulnerability in all cases, particularly so if those exerting duress are in control of the persons life, either by controlling access to services, delivering care, living at the same address. Does the person have family or friends who will speak up on their behalf? Vulnerability in the above circumstances can also be increased by other factors, has the person experienced previous abuse (domestic/institutional or other) which has diminished their ability to protect themselves, is the person or the alleged abuser addicted to substances or inappropriate activities ie gambling.

PART 7: Safeguarding Adult Threshold criteria

'No Secrets' Definition:

Is this a person 'who is or may be in need of community care services by reason of mental or other disability, age or illness'

AND

who is, or may be, unable to take care of him or herself,

or

is unable to protect him or herself against 'significant harm' or exploitation.

Hint Text; Significant Harm is harm' should be taken to include not only ill treatment (including sexual abuse and forms of ill treatment which are not physical), but also the impairment of, or an avoidable deterioration in, physical or mental health; and the impairment of physical, intellectual, emotional, social or behavioural development'. (Law Commission)

Is this person dependent on others for their basic needs including protection from abuse (ie is or may be unable to take care of him/herself)

OR

because of circumstances they are unable to protect themselves against significant harm or exploitation. (eg living in a care setting, does not have capacity to decide on risk, is under duress from others)

Fair Access to Care Services criteria

Critical:

Serious abuse or neglect has occurred or will occur

Substantial:

Abuse or neglect has occurred or will occur

Further Eligibility Assessment required

Safeguarding Risk Rating Assessment

Please tick the most appropriate box.

When considering the impact on the individual please think about the following; Physical, Emotional, Psychological issues, Carer issues, Accommodation issues, Access to community, loss of independence and so forth.

		Likelihood				
		Unlikely to re-occur	Low chance of re-occurrence	Even chance of re-occurrence	High chance of re-occurrence	Expected to re-occur
		1	2	3	4	5
Impact One off incident with: Impact of minimal significance to vulnerable adult with no change in presentation. No injuries and no need for medical treatment by G.P. or hospital. No evidence of any loss of material possessions or finances. Vulnerable adult not being targeted - in wrong place at wrong time. Impact of incident slight. Some injuries but of a minimal nature and not requiring medical treatment by G.P. or hospital. Minimal loss of material possessions or finances. Vulnerable adult not being targeted - in wrong place at wrong time. Vulnerable adult not distressed over any significant period of time. Vulnerable adult sustained injuries which necessitated medical treatment from GP or hospital and traumatised by the incident for a significant period of time. Loss of material possessions or finances increasing in value Significant injuries sustained by the vulnerable adult. Urgent medical treatment essential. Loss of material possessions or finances substantial impacting on living conditions/standards or emotional capability Impact on vulnerable adult is great and lasts over a significant period Vulnerable adult receives injuries of severe nature or life threatening. Urgent medical attention vital. Impact of this is far reaching maybe even life changing. Loss of material possessions or finances high in value and/or impact on living conditions severe.	1	Green	Green	Green	Green	Green
	2	Green	Green	Green	Yellow	Yellow
	3	Yellow	Yellow	Yellow	Red	Red
	4	Yellow	Yellow	Red	Red	Red
	5	Red	Red	Red	Red	Red

Type of alleged abuse (tick all that apply):

Neglect

Domestic

Psychological

Institutional

Financial

Discriminatory

Physical

Sexual

**Domestic abuse is the misuse of power and control in a close or intimate relationship (including financial and emotional abuse and social isolation.)*

HIGH	Red – The vulnerable adult remains at high risk of a reoccurrence of this incident happening which might impact severely on their physical, emotional or financial well being. Adult Protection Plan needs to be in place and Safeguarding procedures initiated. Measures need to be in place to reduce risk as far as is possible by all involved.
MEDIUM	Amber – Could affect the safety and emotional wellbeing of the vulnerable adult. A substantial risk of the vulnerable adult being further abused may remain. Consider if care management process able to resolve. If not, escalation to red may be necessary and safeguarding procedures required and initiated.
LOW	Green – Issues are being addressed but they are of less significant concern and should be dealt with via care management or provider support.

Risk Assessment Outcome: **High / Medium / Low**

Risk Management Plan

Date

Hint Text: What is the vulnerable adults preferred course of action? This needs to be considered in the light of possible impact on other vulnerable adults or on children. Where the vulnerable adult has been assessed as not having the capacity to make this decision what course of action is currently in their best interest? What course of action would be in the public interest?

Sources of information

Comments

Free text space to add detail that can not be accommodated elsewhere in this document

Part 8: Incidents Details

Location of Abuse (select one from drop-down list):

If other, please specify:

If Sheltered or Supported, is the property regulated by Supporting People? No

Team Responsible for Alert (use Team Code):

Responsible Manager:

Part 9: Does this person appear to be a Vulnerable Adult requiring the Safeguarding procedure? No, Criteria for Safeguarding Referral not met

If Yes, proceed to Part 11

If No, please complete Part 10.

Part 10: Decision / Outcome

If a decision has been made not to refer an alleged incident for an investigation (including any planning action/strategy meeting or Safeguarding Adults assessment), please provide the following:

A brief reason for not referring for a planning/strategy meeting and investigation:

Has the referrer been informed of the decision not to investigate? No

If No, please give brief reason:

If a decision has been made not to refer an alleged incident for an investigation, please complete all mandatory fields in the remainder of the form with 'Criteria for Safeguarding Referral not met' (parts 15, 16, 17 and 18) and proceed to finish (part 21) and save

Part 11: Recommended Safeguarding Adult Plan of Action:

Have you Referred to Central Referral Unit (POLICE)? No
If No, please give a brief reason:

Part 12: Strategy Discussion

Are you proceeding to a Strategy Meeting? No

Yes - Open Safeguarding Meeting minute's template.

No - Responsible Manager believes the information gathered already evidences a Telephone strategy discussion/teleconference has occurred. Yes/No

IF Yes (Hint Text) Document evidence that a strategy discussion has occurred. It is necessary to document this strategy discussion as this will act as the minutes and will be a legal document.

A Formal Strategy meeting must be called when; One or more Service Users are involved in the allegations. When complex actions are indicated. If any form of enforcement action has commenced or is under consideration in relation to the service involved.

What action will happen?

Who is responsible?

By When?

Date of Safeguarding Adults Strategy Meeting/Telephone Discussion (dd/mm/yyyy):

Target: Strategy Meeting/Telephone discussion held within five working days of the alert/referral

No (calculated by Care First)

How are you involving the person in the Safeguarding process?

Hint Text: Is the person attending meetings? Is an IMCA involved? How is the person being communicated with etc.

Is this being passed to Devon Partnership Trust for completion? No

Hint Text: Reassign open alert to CF6 SGA Team

Part 13: Information about Investigation

Date Safeguarding Investigation commenced (dd/mm/yyyy):

Complete Safeguarding Adult Investigation report available via CF6

Target: Starting the Safeguarding Investigation within four weeks of the referral

No (calculated by Care First)

Organisations involved in the investigation (click all that apply):

- | | | | |
|----------------------------|--------------------------|-------------------------|--------------------------|
| Adult & Community Services | <input type="checkbox"/> | Residential Home | <input type="checkbox"/> |
| Other Local Authority | <input type="checkbox"/> | Nursing Home | <input type="checkbox"/> |
| Care Quality Commission | <input type="checkbox"/> | Mental Health Services | <input type="checkbox"/> |
| Housing | <input type="checkbox"/> | Domiciliary Care Agency | <input type="checkbox"/> |
| NHS Trust | <input type="checkbox"/> | Healthcare Commission | <input type="checkbox"/> |
| Police | <input type="checkbox"/> | Provider Agency | <input type="checkbox"/> |
| Court of Protection | <input type="checkbox"/> | Other | <input type="checkbox"/> |

If "Other", please give brief details:

Part 14: Consent

Has the client been deemed to have the capacity to consent to the investigation? Yes

If Yes, did the client

Agree to the investigation proceeding? No

Agree to participate in the investigation? No

If No,

Has the client refused to proceed with investigations before this referral? No

Date Safeguarding Investigation completed (dd/mm/yyyy):

Part 15: Case Conclusion (select from drop-down list):

Part 16: Outcome for Client/Protection Plan (click all that apply):

- Increased Monitoring
- Advocacy
- Removed from Property/Service
- Counselling/Support
- Community Care Assessment and Services
- Moved to increased/different care
- Civil Action
- Management of Access to Finances
- Restriction/Management of Access to Guardianship/Use of Mental Health Act
- Alleged Perpetrator
- Referral to MARAC
- Court of Protection
- Review of Self-Directed Support (IB)
- Application to change appointee-ship
- No Further Action
- Other

If "Other", please give brief details:

Criteria for Safeguarding Referral not met

Part 17: Was Protection Plan accepted by the vulnerable adult? Yes

Date of Protection Plan (dd/mm/yyyy):

Target: Protection Plan completed within four weeks of the strategy meeting No
(calculated by Care First)

Part 18: Outcomes for the Alleged Perpetrator/Organisation/Service (click all that apply):

- Criminal Prosecution
- Continued Monitoring of Alleged
- Police Action
- Perpetrator
- Community Care Assessment and Services
- Counselling/Training/Treatment
- Referral to Court Mandated Treatment
- Removed from Property/Service
- Referral to MAPP A
- Management of Access to
- Action under Mental Health Act
- Vulnerable Adult
- Action by Contract Compliance
- Referred to POVA List
- Exoneration
- Referral to Registration Body
- No Further Action
- Disciplinary Action
- Action by Care Quality Commission
- Not Known
- Criteria for Safeguarding Referral not met

Part 19: Case Conferences

Date of first Safeguarding Adults Case Conference (dd/mm/yyyy):

Target: Holding a Safeguarding Conference within four weeks of Safeguarding Investigation being completed No (calculated by Care First)

Date of subsequent Safeguarding Adults Case Conferences:
(Could be multiple dates)

Date of first Case Conference Review of the case (dd/mm/yyyy):

Target: First Case Conference Review of the case within six months No (calculated by Care First)

Number of Safeguarding Adults Case Conference Reviews:

Part 20: Date of Final Safeguarding Adults Case Conference Review
(dd/mm/yyyy):

Part 21: Date Safeguarding Adult Case Closed (dd/mm/yyyy):

Part 22: Is a Serious Case Review Required No

Name of Responsible Manager:

Telephone No:

Date Referral Closed:

Outcome Authorised by:

Finish Date (dd/mm/yyyy):