



SAFEGUARDING  
ADULTS AT RISK  
POLICY

## Contents

<b>Key principles</b> .....	<b>2</b>
<b>Contact details</b> .....	<b>2</b>
<b>US Adults at Risk Contacts</b> .....	<b>3</b>
<b>Definitions</b> .....	<b>4</b>
Who is an adult at risk?.....	4
United Synagogue’s commitment to making safeguarding personal.....	4
Abuse .....	4
Other safeguarding situations.....	5
County Lines and Gangs .....	5
Radicalisation .....	5
Where and how does abuse happen?.....	6
<b>Section 1: Good practice guidelines for working with Adults at Risk</b> .....	<b>6</b>
Capacity .....	6
Activity which should never be sanctioned.....	7
Responding to adults who have experienced or are experiencing abuse .....	7
If you receive a disclosure of abuse: .....	8
If you witness abuse or abuse has just taken place the priorities will be:.....	8
Record keeping .....	8
<b>Section 2: Recruitment and training of representatives</b> .....	<b>9</b>
Interview and pre-appointment checks .....	9
Induction and training.....	9
<b>Section 3: Allegations or suspicions against a US Representative</b> .....	<b>10</b>
Whistleblowing .....	10
<b>Section 4: Confidentiality and information sharing</b> .....	<b>11</b>
<b>Section 5: The legal framework</b> .....	<b>12</b>
The Care Act 2014.....	12
The Mental Capacity Act 2005 .....	12
<b>Ratification and Review</b> .....	<b>13</b>
<b>Appendix 1 – Abuse action chart</b> .....	<b>14</b>
.....	<b>14</b>
<b>Appendix 2 – Safeguarding Alert Form</b> .....	<b>15</b>
<b>Appendix 3 – Assessing Mental Capacity</b> .....	<b>20</b>

# US Safeguarding Adults at Risk Policy

## Key principles

Everyone has the right to live a life free from harm and abuse. The purpose of this policy is to develop and embed a safeguarding ethos and inform The United Synagogue's commitment to ensure all adults are in an environment that is safe to live and work in.

The United Synagogue believes that all Adults at Risk, have the right to protection from abuse.

The United Synagogue understands its duty of care to safeguard all Adults at Risk involved in any activities undertaken by or on behalf of the organisation. To this end its policies, procedures, and practices as they relate to Representatives (*employees of The United Synagogue and/or volunteers of the organisation including in shuls, welfare groups etc. with Adults at Risk*), will endeavour to protect Adults at Risk. All suspicions and allegations of abuse will be taken seriously and responded to swiftly and appropriately.

When allegations of historical abuse are made the procedures below should also be followed.

The aim of the United Synagogue Adults at Risk Protection Policy is to promote good practice by:

- providing an environment in which Adults at Risk feel safe and valued,
- providing Representatives working on behalf of United Synagogue with clear guidelines and procedures to follow that will not only help avoid inappropriate, misguided, or wrong behaviour, but will also provide information as to what action to take should they be concerned about an Adult at Risk's welfare,
- protecting the United Synagogue's name and reputation from being brought into disrepute,
- promoting an environment where Adults at Risk are safe from abuse,

The United Synagogue will underpin their work, involving adult safeguarding, with the six key principles outlined in the Care Act 2014:

**Empowerment:** People being supported and encouraged to make their own decisions and informed consent.

**Prevention:** It is better to take action before harm occurs.

**Proportionality:** The least intrusive response appropriate to the risk presented.

**Protection:** Support and representation for those in greatest need.

**Partnership:** Local solutions through services working with their communities. Communities have a part to play in preventing, detecting, and reporting neglect and abuse.

**Accountability:** Accountability and transparency in delivering safeguarding.

## Contact details

Designated Named Persons: The Head of Safeguarding, **Claudia Kitsberg** is the Designated Named Person. The Director of Legal Services, **David Frei** is the Deputy Designated Named Person to contact in relation to any Adults at Risk concern or for support and advice on implementing this policy and procedures.

They can be contacted as follows:

## 2

Claudia Kitsberg  
T: 0208 343 5652  
E: [ckitsberg@theus.org.uk](mailto:ckitsberg@theus.org.uk)

David Frei  
T: 0208 343 6277  
E: [david.frei@bethdin.org.uk](mailto:david.frei@bethdin.org.uk)

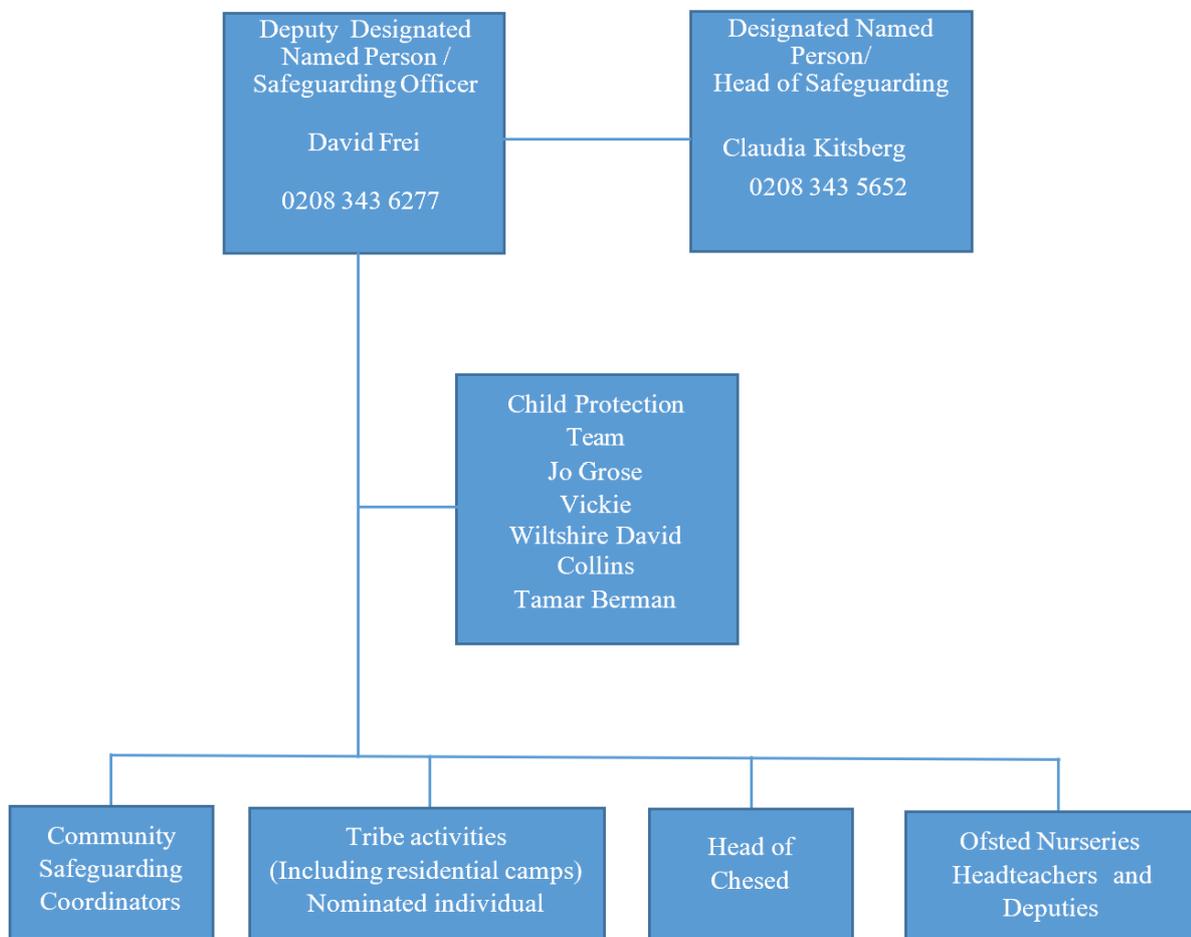
The Central Safeguarding Team: Consists of the two Designated Named Persons plus, the United Synagogue Chief Executive Jo Grose, the Human Resources director, Vickie Wiltshire, Chief Operations Officer David Collins, and Director of Schools Strategy Tamar Berman.

The number to call outside normal office hours is 020 3758 8440.

If you have a query on Shabbat/High Holy Days and you believe an Adult at Risk may be at serious risk, please contact 999.

The United Synagogue is committed to partnership working with the Barnet Safeguarding Adults Board (BSAB), a multi-agency partnership with representation from the organisations that work with and support adults at risk in the Barnet community.

## US Adults at Risk Contacts



## Definitions

Adult safeguarding means:

- protecting an adult's right to live in safety free from abuse or neglect.
- working in partnership to prevent and stop both the risks and experience of abuse and neglect; and
- ensuring the adult's well-being is promoted whilst having due regard for their wishes, views, feelings, and beliefs in deciding any action.

### Who is an adult at risk?

An adult at risk is a person aged 18 years or older who has care and support needs (whether these are met or unmet) due to mental or other disability, age, or illness and who are, or may be, unable to take care of themselves against significant harm or exploitation. As defined by the Care Act 2014, an Adult at Risk is an adult who has care and support needs, is at risk of or may be at risk of abuse and neglect and is unable to protect themselves.

### United Synagogue's commitment to making safeguarding personal.

The United Synagogue's will endeavour to make safeguarding personal so that it is person led and outcome focused. This will be done by engaging with the adult at risk in the decision-making process to improve their quality of life, wellbeing, and safety.

### Abuse

Abuse may be defined as the wrongful application of power by someone in a dominant position. It involves an imbalance of power and exploitation without a full and informed consent. Abuse can take several different forms and may be a single act or repeated acts. The list below is not exhaustive but gives an indication as to the types of behaviours, The United Synagogue representatives should be aware of:

- **Physical abuse** – includes hitting, slapping, kicking, pushing, withholding or misuse of medication, inappropriate restraint (although reasonable restraint may be appropriate in certain situations)
- **Sexual abuse** – includes sexual assault and rape, or sexual acts where the vulnerable person has not (or could not give) given consent or was forced into consenting, inappropriate touching, exposure to pornographic material.
- **Psychological abuse** - includes threats of harm, emotional abuse, humiliation, verbal abuse, intimidation, coercion, harassment, withdrawal of support, isolation, and deprivation (physical and sensory).
- **Material / financial abuse** – includes fraud, theft, exploitation, financial transactions, misappropriation e.g., willed inheritance, property, benefits, and possessions.
- **Neglect & Acts of Omission** - Neglect includes ignoring physical care and medical needs, withholding basic living requirements e.g., adequate nutrition, safe and warm environment, withholding necessary medication and failure to provide access to appropriate health and social care services and / or educational services. This can include self neglect.
- **Discriminatory abuse** - including racist, sexist, that based on a person's disability and other forms of harassment, slurs or similar treatment.
- **Organisational abuse** – including modern slavery.

## Other safeguarding situations

The following situations are not currently considered forms of abuse under the Care Act; however, The United Synagogue's representatives need to be alert to them and aware how to respond if they have concerns:

### County Lines and Gangs

County Lines is the name given to describe drug dealing by criminal gangs from urban areas expanding their activities into smaller towns and rural areas.

It often involves the exploitation of children, as gangs use young people and those with mental health or addiction problems to transport drugs and money. These gangs establish a base in the location they are targeting, often taking over the homes of local vulnerable adults by force or coercion in a practice referred to as 'cuckooing.'

Dealers typically use a single phone line to facilitate the supply of Class A drugs to customers. The phone line is highly valuable and is protected through violence and intimidation.

### *Signs to look out for in your local community.*

- Individuals with multiple mobile phones or 'SIM cards'
- Unknown or suspicious looking characters coming and going from a neighbour's house.
- Young people with more money, expensive clothing, or accessories they can't account for
- Suspicious smells coming from the property.
- Windows covered or curtains closed all of the time.
- Cars pulling up to or near to the house for a short period of time.
- An increase in anti-social behaviour around the property

## Radicalisation

Radicalisation is defined as the act or process of making a person more radical or favouring of extreme or fundamental changes in political, economic, or social conditions, institutions, or habits of the mind.

Extremism is defined as the holding of extreme political or religious views.

There are a number of behaviours which may indicate an individual is at risk of being radicalised or exposed to extreme views. These include.

- Spending increasing time in the company of other suspected extremists.
- Changing their style of dress or personal appearance to accord with the group.
- Day-to-day behaviour becoming increasingly centred on an extremist.
- ideology, group, or cause.
- Loss of interest in other friends and activities not associated with the extremist ideology, group, or cause.
- Possession of materials or symbols associated with an extremist cause.
- Attempts to recruit others to the group/cause.
- Communications with others that suggests identification with a group, cause, or ideology.
- Using insulting to derogatory names for another group.
- Increase in prejudice-related incidents committed by that person including; physical or verbal assault, provocative behaviour, damage to property, derogatory name calling, possession of prejudice-related materials, prejudice related ridicule or name calling,

inappropriate forms of address, refusal to co-operate, attempts to recruit to prejudice-related organisations and condoning or supporting violence towards others.

### Where and how does abuse happen?

Abuse and harm can be experienced in any setting in a person's home (including in supported housing schemes, nursing, and care homes), in hospital, at work or in community areas. Adults can experience abuse by a number of people known to them in varying capacities. Perpetrators of abuse may include family members, friends, neighbours, paid or unpaid professionals, volunteers, other adults at risk and strangers who set out to deliberately exploit people. It is essential that in any case where abuse is suspected, the concern is treated seriously, and action is taken to investigate and prevent abuse from occurring.

## Section 1: Good practice guidelines for working with Adults at Risk

All Representatives should be encouraged to demonstrate exemplary behaviour in order to protect themselves from false allegations. The following are common sense examples of how to create a positive culture and climate.

If one of the following occurs you should report this immediately your Community Care Co-Ordinators and record the incident. You should also ensure the carers/relatives of the Adult at Risk are informed:

- if you accidentally hurt an Adult at Risk,
- if they seem distressed in any manner,
- if an Adult at Risk misunderstands or misinterprets something you have done, including in a sexual manner.

The United Synagogue does not expect any representative to do things which could be construed as being of a personal nature for Adults at Risk. Avoid taking on the responsibility for tasks for which you are not appropriately trained.

The following should also be avoided except in emergencies. If a case arises where the situation is unavoidable such as the Adult at Risk sustains an injury and needs to go to hospital, in cases where the Adult at Risk lacks capacity, it should be with the full knowledge and consent of the Adult at Risk's carer/appointee.

### Capacity

The United Synagogue will also work with adults at risk of abuse and neglect to ensure they are aware of the support options available to them, taking care to consult with them fully before any action is taken.

The only situation where consultation will not take place is where reasonable justification is evidenced to suggest that the adult may not have capacity to make decisions or take actions in their own best interest. Capacity will always be presumed unless proven otherwise and every step will be taken to maximise the opportunity for an adult to demonstrate capacity.

The United Synagogue's will also ensure that any support offered is carried out in partnership with relevant agencies and that a collective approach is taken to provide this.

If an adult with capacity refuses intervention, their wishes will be respected unless there is:

- a public interest concern where not acting will put other adults or children at risk.

- a duty of care to intervene, for example where a crime has been or may be committed.

In these circumstances immediate action must be taken to ensure the safety and wellbeing of those adults at risk.

In all circumstances a carer/appointee should only be involved where an Adult at Risk lacks capacity. This is assessed through a two-stage functional test, asking:

1. Is there an impairment of or disturbance in the functioning of a person's mind or brain? If so,
2. Is the impairment or disturbance sufficient that the person lacks the capacity to make a particular decision?

A person is unable to make their own decision if they cannot do one or more of the following four things:

- understand information given to them,
- retain that information long enough to be able to make the decision,
- weigh up the information available to make the decision,
- communicate their decision – this could be by talking, using sign language or even simple muscle movements such as blinking an eye or squeezing a hand.

*See Appendix 3 for further guidance.*

### Activity which should never be sanctioned.

You should never:

- Engage in rough physical or sexually provocative games.
- Share a room with an Adult at Risk.
- Allow or engage in any form of inappropriate touching.
- Make sexually suggestive comments to an Adult at Risk.
- Allow allegations made by an Adult at Risk to go unchallenged, unrecorded, or not acted upon.
- Do things of a personal nature for Adults at Risk.
- Invite or allow Adults at Risk to stay with you at your home unsupervised.
- Give out your personal details, without seeking further guidance from your Community Care Coordinator or one of the Designated Named Persons.

In case of uncertainty always check with your Community Care Coordinator or one of the Designated Named Persons.

### Responding to adults who have experienced or are experiencing abuse.

- If a Representative suspects that an Adult at Risk may be a victim of abuse, they must immediately inform their Community Care Coordinator or one of the Designated Named Persons about their concerns.
- The Designated Named Persons will work closely with the Central Safeguarding Team when investigating any allegations of abuse. All parties involved will handle such investigations in a sensitive manner, but the interests of the Adult at Risk will be of paramount importance.
- The Designated Named Persons are responsible for any referrals which are made either to the police or to the relevant Safeguarding Adults Board/adult social care. In the Barnet area they can be contacted on 020 8359 5000 (9am- 5pm, Mon to Fri), or 020 8359 2000 (out of hours)

If you receive a disclosure of abuse:

- Remain calm and do not show shock or disbelief,
- Allow the Adult at Risk to say what has happened, without interruption,
- Show the Adult at Risk through body language that you are listening,
- Reassure the Adult at Risk but not make promises which it might not be possible to keep,
- It is essential that Adults at Risk know what they have said will not get them in trouble, and that they were right to talk about it,
- Do not promise confidentiality- it might be necessary to refer to the police and/or adult social care,
- Reassure them what has happened is not their fault,
- Listen rather than asking direct questions. Avoid asking detailed or probing questions or challenging,
- Report the disclosure immediately to your Community Care Coordinator or a Designated Named Person. If you suspect an immediate danger to oneself or others or an imminent crime, you should call 999 directly without delay,
- In order to ascertain whether a Representative should consult with an Adult at Risk's carer/appointee or whether a referral to the police and/or adult social care can be made, a basic capacity assessment should be undertaken for the Adult at Risk. Please see page 4 above,

If you witness abuse or abuse has just taken place the priorities will be:

- To call an ambulance if required
- To call the police if you suspect that a crime has been committed.
- To keep yourself, staff, volunteers, and service users safe
- To inform your Community Care Coordinator or a Designated Named Person
- To record what happened in the Safeguarding Alert Form. (Appendix 2) as soon as reasonably practicable, with assistance from the Community Care Coordinator or a Designated Named Person where required.

If it is appropriate and there is consent from the individual (or their carer/appointee if they lack capacity), or there is a good reason to override consent, such as risk to others, the Designated or Deputy Named Person will make a referral to the police and/or adult social care.

If the individual experiencing abuse does not have capacity to consent a referral will be made without that person's consent, in their best interests.

### Record keeping

- Make notes as soon as possible after the conversation, preferably within an hour. Please note that this summary is legally admissible as evidence provided it has been recorded within twenty-four hours.
- Use the 'Safeguarding Alert' form (Appendix 2) and on completion hand over immediately to the Designated Named Person.
- Do not destroy notes in case they are needed later, in line with the General Data Protection Regulations and Data Protection Act 2018.
- Record the date, time, place and any noticeable non-verbal behaviour and the words used by the Adult at Risk.
- Draw a diagram to indicate the position of any bruising or other injury or use a body map as included in the appendix.

- Record statements and observations rather than interpretations or assumptions Note clearly:
  - what has been said and by whom,
  - your comments to the Adult at Risk,
  - what action you took
  - what was happening before the disclosure took place
  - the names of any other witnesses
  - whether in your assessment the Adult at Risk lacked capacity.

For provisions about confidentiality and information sharing please see Section 4 below.

## Section 2: Recruitment and training of representatives

The United Synagogue recognises that anyone may have the potential to abuse Adults at Risk in some way and therefore all reasonable steps are taken to ensure unsuitable people are prevented from working with Adult at Risk. Please refer to the United Synagogue's Safer Recruitment Policy. The notes below are for guidance and further information.

### **Pre-selection checks must include the following:**

- All staff and volunteers should complete a United Synagogue application form. The application form will elicit information about an applicant's past and a self-disclosure about any criminal record.
- Consent should be obtained from an applicant to seek information from the Disclosure & Barring Service.
- Two confidential references should be taken up, including one regarding previous work with Adults at Risk. These references must be taken up and confirmed in writing not just by telephone contact.
- Evidence of identity should be provided (e.g., passport or driving licence with photo).

### Interview and pre-appointment checks

All Representatives will be required to undergo a selection interview carried out in accordance with the United Synagogue's Safer Recruitment Policy.

All Representatives will receive formal or informal induction, during which:

- A check should be made that the application form has been completed in full (including sections on criminal records and self-disclosures).
- Their qualifications should be substantiated.
- The job requirements and responsibilities should be clarified.
- References will be verified prior to engagement.

### Induction and training

In addition to pre-selection checks, the safeguarding process includes training and induction to help Representatives to:

- Understand Adult at Risk protection procedures and training needs are identified,
- Analyse their own practice against established good practice, and to ensure their practice is likely to protect them from false allegations,
- Recognise their responsibilities and report any concerns about suspected poor practice or possible abuse as soon as reasonably practicable,

- Recognise and respond to concerns expressed by an Adult at Risk or about the behaviour of another person towards an Adult at Risk,
- Work safely and effectively with Adults at Risk,
- Understand how to conduct a Mental Capacity Assessment.

***Volunteers should also refer to the Code of Conduct in the Volunteers Handbook.***

## Section 3: Allegations or suspicions against a US Representative

### Whistleblowing

The United Synagogue's whistleblowing policy can be used to support safeguarding when:

- A staff member believes a Community Care Coordinator or one of the Designated Named Persons has not responded appropriately to a safeguarding concern e.g., not supported a referral.
- A representative is suspected to be the perpetrator of abuse.

The United Synagogue's Whistleblowing policy can be found on the US website.

It is not the responsibility of any Representative or Community Care Coordinator to decide whether abuse has taken place. However, there is a responsibility to act on any concerns through contact with the appropriate authorities.

The United Synagogue will assure all Representatives that it will fully support and use best endeavours to protect anyone who in good faith reports his/her concern that a colleague is, or may be, abusing an Adult at Risk.

Any suspicion that a Representative has abused an Adult at Risk should be reported to a Designated Named Person, who will take such steps as considered necessary to ensure the safety of the Adult at Risk in question and any other Adult at Risk who may be at risk. The Designated Named Person will seek advice regarding the allegation from the local authority PiPOT, police and/or adult social care.

Where the Adult at Risk lacks capacity, their carer/appointee will be contacted by the Designated or Deputy Designated Named Person as soon as possible following advice from the local authority PiPOT, police and/or adult social care.

The United Synagogue will also notify the relevant department who will deal with any media enquiries.

Please refer to our Complaints Policy for more procedural information.

Any Representative who has reason to suspect that an Adult at Risk may have been abused by another Representative, must immediately inform Designated Named person, either:

David Frei                      Claudia Kitsberg  
T: 0208 343 6277              T: 0208 343 5652

The number to call outside normal office hours is **020 3758 8440**.

If you have a query on Shabbat/High Holy Days and you believe an Adult at Risk may be at serious risk, please contact 999.

The United Synagogue understands that it has a duty towards its representatives to always treat them in a fair and reasonable manner, including if an allegation has been made against them.

Consideration will be given to the kind of support those representatives against whom an allegation of abuse has been made.

Where there is a complaint against a representative there may be three types of investigation:

- a criminal investigation
- an Adult at Risk protection investigation
- a disciplinary or misconduct investigation.

The results of the police and Adult at Risk protection investigation may well influence the disciplinary investigation.

If following consideration, an allegation may be related to poor practice, the United Synagogue will deal with it as a misconduct issue.

## Section 4: Confidentiality and information sharing

All information about any individual Adult at Risk and any representatives will be treated as confidential and will not be communicated to others, save those who need to be involved for due process to take place.

Adults have a general right to independence, choice and self-determination including control over information about themselves. In the context of adult safeguarding these rights can be overridden in certain circumstances, including where:

- The person lacks the mental capacity to make that decision.
- Other people are, or may be, at risk, including children.
- Sharing the information could prevent a crime.
- The alleged abuser has care and support needs and may also be at risk.
- Staff are implicated.
- The person has the mental capacity to make that decision, but they may be under duress or being coerced.
- The risk is unreasonably high and meets the criteria for a multi-agency risk assessment conference.
- A court order or other legal authority has requested the information.
- Information needs to be shared without consent in response to an emergency or life-threatening situation.

Information can be shared lawfully within the parameters of the Data Protection Act 2018 and the General Data Protection Regulation (GDPR, 2018). There are local agreements in place setting out the principles for sharing information between organisations.

Representatives must never promise confidentiality and always report safeguarding concerns in line with the United Synagogue's procedures.

It is good practice to try to gain the person's consent to share information and as long as it does not increase risk and staff should endeavour to inform the person if they need to share their information without consent. Decisions and discussions concerning consent will always be recorded during the referral process.

Information should be stored in a secure place (a locked filing cabinet or on a password protected computer) with limited access to the Designated Named Persons and senior management, in line with data protection laws (e.g., that information is accurate, regularly updated, relevant and secure).

## Section 5: The legal framework

### The Care Act 2014

The Care Act 2014 sets out a clear legal framework for local authorities and other statutory agencies on how to protect adults with care and support needs at risk of abuse or neglect.

The Care Act 2014 encompasses the need for professionals to prevent care needs becoming serious, inform and advise adults on making good decisions about their care and support and it also outlines the duty for professionals to cooperate with each other to protect adults. The Care Act 2014 is designed to transform adult social care by ensuring greater multi-agency collaboration as directed by the BSAB. This gives Barnet Borough Council (as the local authority) responsibility for:

- promoting individual well-being.
- preventing needs for care and support.
- promoting integration of care and support within health services.
- providing information and advice; and
- promoting diversity and quality in provision of services.

As a partner of Barnet Borough Council, The United Synagogue must cooperate with any enquiries they make into an adult at risk where The United Synagogue's is providing them with a service.

### The Mental Capacity Act 2005

The Mental Capacity Act 2005 provides a framework to empower and protect people who may lack capacity to make some decisions for themselves, or who have capacity and want to prepare for a time when they may lack capacity in the future. Someone who lacks capacity due to an illness or disability (such as a mental health problem, dementia, or a learning disability) may have one or more of the following issues:

- cannot understand information given to them to make a particular decision.
- cannot retain that information long enough to be able to make the decision.
- cannot use or weigh up the information to make the decision.
- have difficulty in communicating their decision.

The Mental Capacity Act 2005 defines who can take decisions, when they can take them and how they should go about this. This is regardless of whether it is a major decision, such as those about personal finance, social care or medical treatment or an everyday decision, such as what an individual has to eat or wear. The underlying philosophy of the Mental Capacity Act 2005 is to ensure that those who lack capacity are empowered to make as many decisions for themselves as possible and that any decision made, or action taken, on their behalf is made in their best interests and protects them from harm. People may go through stages where they have capacity at particular points in time and then may lack capacity at other times depending on their circumstance. Some people may also have the capacity to make particular decisions in some areas of their life but not in others, for example being able to decide what to eat and wear but not being able to decide what medical treatment to take.

Deprivations of Liberty Safeguards (DoLS) will protect people who need to be cared for in a restrictive way and cannot make decisions about their care or treatment. DoLS must be used if

people need to have their liberty taken away in order to receive care and/or treatment that is in their best interests and protects them from harm.

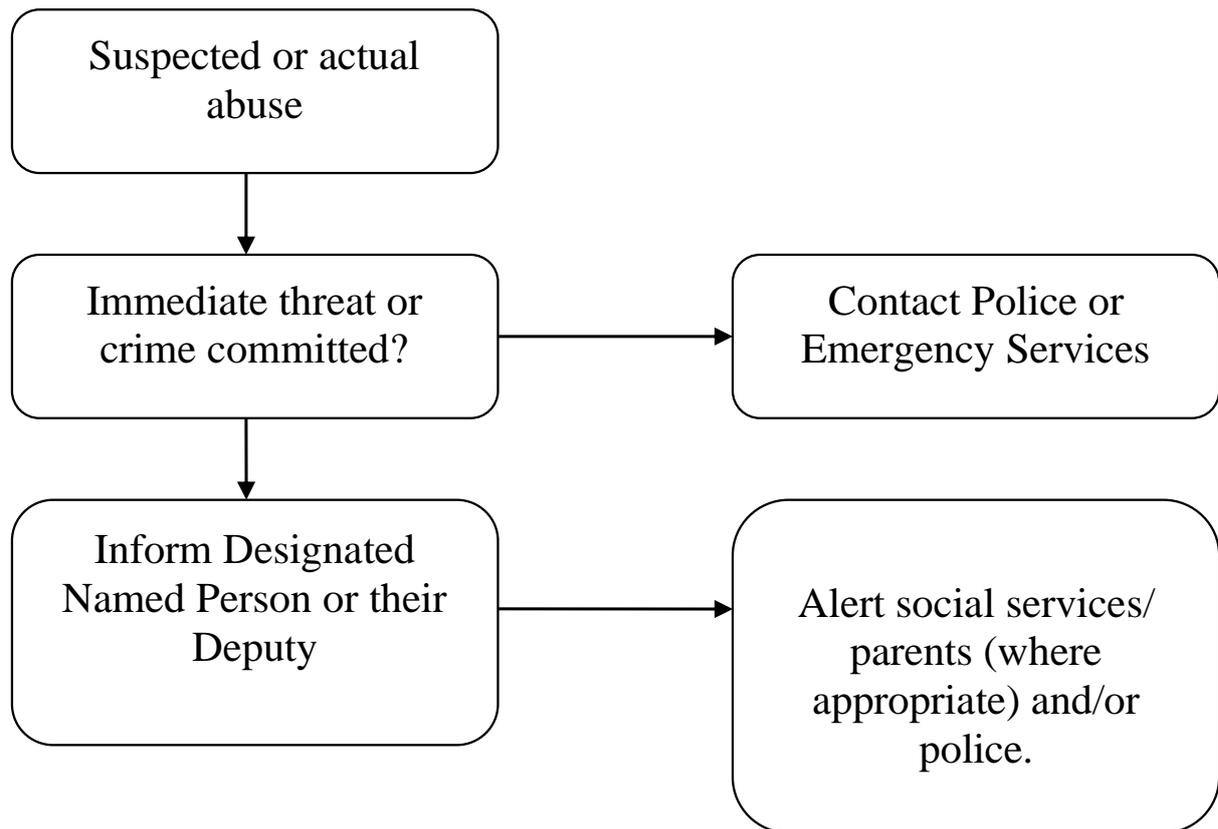
**Other legislation includes:**

- Protection of Freedoms Act 2012 (Disclosure and Barring Service Transfer of Functions) Order 2012
- Serious Crime Act 2015 Section 76
- Domestic Violence, Crime and Victims Act 2004
- The Counter Terrorism and Security Act 2015
- The Modern Slavery Act 2015
- Anti-social Behaviour, Crime and Policing Act 2014
- The Criminal Justice and Courts Act 2015 Section 20-25
- Public Interest Disclosure Act 1998
- Equality Act 2010
- The Health and Social Care Act 2008 (Regulated Activities) (Amendment) Regulations 2015
- Human Rights Act 1998
- Safeguarding Vulnerable Groups Act 2006

## Ratification and Review

This policy was reviewed by Claudia Kitsberg and ratified by Claire Lemer in June 2023 and will next be reviewed in June 2024. The Designated Named Person will ensure that any changes are clearly communicated to Representatives.

## Appendix 1 – Abuse action chart



## Appendix 2 – Safeguarding Alert Form

<b>Safeguarding Alert Form</b> <b>Reference: UJCSG1</b> <b>This form is to be used to notify record disclosure/concern in relation to any safeguarding issue. Once completed it is to be forwarded to the Designated Person in charge of Safeguarding.</b>
<b>Person completing the form:</b>  <b>Region Name:</b>  <b>Phone contact details:</b>  <b>Email address:</b>

<b>Details of incident/suspected or actual abuse:</b>	
<b>Date of alleged incident/harm:</b>	<b>Area where incident/harm took place:</b>
<b>Time of alleged incident/harm:</b>	<b>Who reported the alert:</b>
	<b>Date:</b>
<b>Who was involved:</b>	
<b>Details of Alleged Victim</b>	<b>Name and address of GP:</b>
<b>Name:</b>	
<b>Address:</b>	<b>Ethnic Origin:</b>
	<b>Nature of alleged victims' vulnerability:</b>
<b>Date of Birth:</b>	

Phone:	Any other details (e.g., communication needs):
<b>Details of Alleged Perpetrator</b> Name:  Address:  Date of Birth:  Phone Contact:  If the alleged perpetrator is a staff member, please provide staff details (E.g., job role, employer, address of place of work)	Ethnic Origin:  Relationship to victim:  Are they an Adult at Risk? Yes/No  Alleged perpetrators vulnerability (if applicable):  Any other details:
Have you made the victim aware that details of the incident are being recorded and will be investigated:	
Yes/No	
If not, why not?	

**Type of Abuse** (Please tick one or more)

✓			
Sexual		Physical	
Emotional		Neglect or omission	
Psychological		Financial/Material	
Discriminatory Abuse		Institutional	
Other i.e., suspicious death of a service user			

**Description of alleged incident / alleged harm, detailing all people involved including witnesses.**

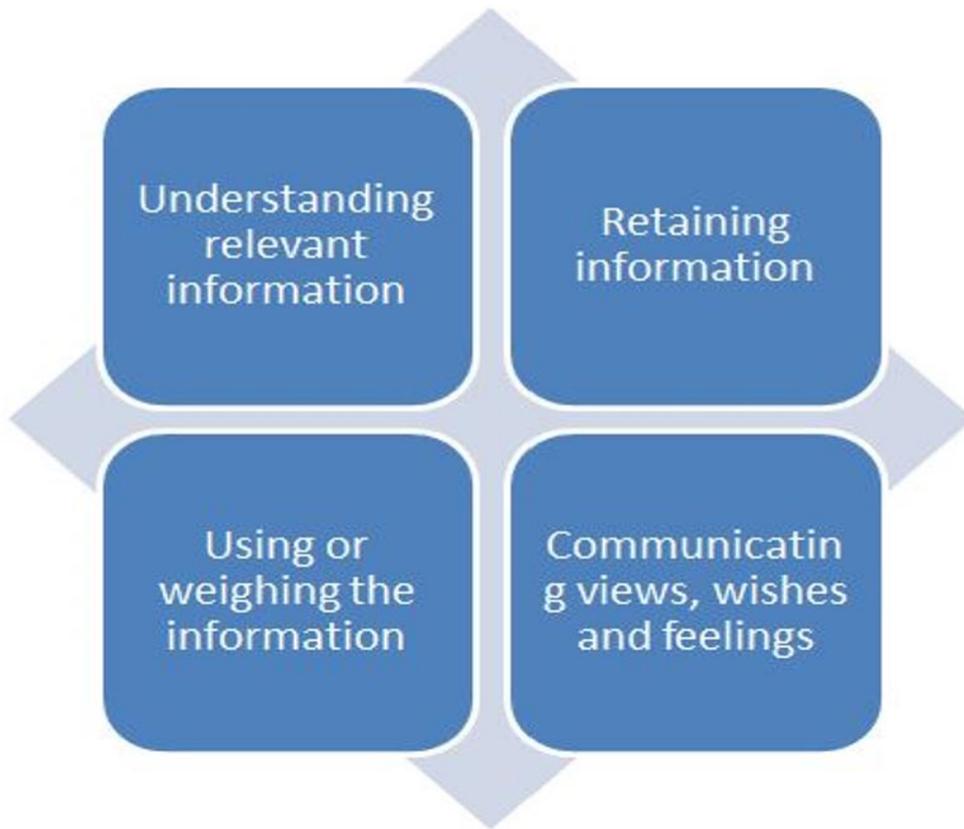
On this page, please give a detailed description of the incident (please include times) and any other comments you feel are relevant. If necessary, attach further pages.

<p><b>What action did you take immediately after the incident/allegation of harm</b> (E.g., administered first aid, asked perpetrator to leave, took victim to secure area)</p>	
<p><b>Were the Police called: Yes / No</b></p>	<p><b>Were any other emergency services called: If yes, which service(s)? Yes / No</b></p>
<p><b>Names and badge numbers of Police:</b></p>	<p><b>Outcome:</b> (Response time, taken to hospital etc)</p>
<p><b>Are there any other Agencies involved? Yes/No</b></p>	<p><b>Please provide details of agencies:</b></p>
<p><b>Are there any capacity issues?</b> Yes/ No</p>	<p><b>Please provide details:</b></p>
<p><b>Has the victim made any previous referrals/alerts? Yes/No</b></p>	<p><b>Please provide details</b> (e.g., dates, type of abuse):</p>
<p><b>Is the victim in immediate danger of further abuse? Yes/No</b></p>	<p><b>Have any immediate actions been identified to reduce the potential for further abuse? Yes/No</b></p>
<p><b>Has an initial assessment been made to determine further potential risk to the victim? Yes/No</b></p>	<p><b>What actions have been taken to reduce the potential for further abuse?</b></p>
<p><b>Are there any risks to others? Yes/No</b> (Adults at Risk, children)</p>	<p><b>Please provide details</b> (include who this information has been shared with – e.g., Children’s Social Care, Police):</p>

Signed:	Date:
Time:	
This form must be sent to the Designated Named Person for Safeguarding and followed up with a phone call.	

Decision by Designated Named Person for Safeguarding:
Safeguarding Alert Yes / No
If No – please give reasons for decision.

# Mental capacity?



FROM MCA 2005 AND AWIA (2000)