

Safeguarding Adults Policy and Procedures

Cornerstone Church (Norwich)

We are committed to safeguarding adults by protecting their health, wellbeing and human rights enabling them to live free from harm, abuse and neglect.

AIM

The purpose of our Safeguarding Policy is to prevent harm and reduce the risk of adults with care and support needs suffering from abuse or neglect.

This policy is based on the fundamental principle that all adults regardless of age, disability, gender, gender identity, ethnic, cultural, racial, national origins, religious belief/non-belief or sexual orientation have the right to live safely, free from abuse and neglect.

This policy will give clear guidance to staff, volunteers and visitors about the behaviour we expect and our legal responsibilities to safeguard and promote the welfare of adults at risk of abuse or neglect that we come in contact with at our organisation.

INTRODUCTION

Our organisation fully recognises the contribution we can make in protecting adults from abuse and neglect. Our policy applies to all adults at risk of abuse or neglect, staff, volunteers and visitors.

Under the Care Act 2014 18 and older is considered to be an adult and could potentially be at risk of abuse or neglect **if** she or he:

- Has needs for care and support (regardless of the level of need and whether or not the council is meeting any of those needs)
- Is experiencing, **or** is at risk of abuse or neglect, **and**
- As a result of those needs, is unable to protect themselves against the abuse or neglect or the risk of it.
- Where someone over 18 is still receiving children's services, for example in an education setting until the age of 25, and a safeguarding issue is raised the matter should be dealt with through adult safeguarding arrangements. Children's safeguarding and other relevant partners should be involved as appropriate. The level of need is not relevant and the young adult does not need to have eligible needs for care and support under the Care Act.
- For domestic abuse the age limit is 16 years of age.

Note: To be considered as a safeguarding concern the adult must meet the criteria set out in the Care Act 2014 and detailed above.

OUR ETHOS

Our organisation will establish and maintain an environment where adults feel safe, secure, are encouraged to talk and are listened to. Adults will be able to talk freely to any member of staff, volunteer or regular visitor to our organisation if they are worried or concerned about something.

We will support anyone who, **in good faith**, reports his or her concerns that an adult is being abused or neglected or is at risk of abuse or neglect even if those concerns prove to be unfounded

Through training – both induction and on-going refresher training we will ensure that all our staff, volunteers and regular visitors:

- understand the importance of safeguarding and their role in safeguarding adults
- recognise an adult potentially in need of safeguarding and know what action to take
- are able to recognise a disclosure from an adult and react appropriately
- are aware of the different forms of abuse and neglect
- understand dignity and respect when working with individuals
- know how to report an adult safeguarding concern in line with this policy

We will provide information and advice to enable all the adults we work with to understand their rights and how they can obtain help and support.

At all times we will work in partnership and try to establish effective working relationships with carers, spouses/partners, relatives and colleagues from other agencies and organisations.

GENERAL PROCEDURES

When Joining the Organisation

All new staff, volunteers and visitors will be:

- informed of the safeguarding arrangements in place.
- given a copy of our safeguarding policy and told who our Designated Safeguarding Officer is and how to contact them
- given a copy of the recording format and guidance on how to complete it and who to pass it to.

As part of their induction they will undertake appropriate **Safeguarding Awareness Training**.

Annually

All staff and volunteers will be asked to read this policy annually or after it has been reviewed and updated if necessary. They will sign to say they have read and understood the policy.

Ongoing

We will display the reporting and referral flowchart on our website and taken to the premises our organisation operates from.

All staff, visitors and volunteers will be:

- Told where our policy is kept,
- Given a set of safeguarding procedures, told who our Designated Safeguarding Officer is and how to contact them or an alternative staff member
- Told how the recording and reporting system works

All service users, partners, spouses, relatives and carers will be:

- Informed the policy can be read online or given a copy of the policy to read and asked to sign a distribution list confirming they have seen and read our safeguarding policy
- Informed of our legal duty to assist our colleagues in other agencies with adult safeguarding enquiries and
- What happens should we have cause to make a safeguarding referral to Adult Social Care

All adults or where the adult does not have capacity, their partner/spouse, relatives or legal guardians will be required to complete a consent form at the start of the adult's involvement with the organisation. This will include all vital medical and health information, contact details for the individuals Doctor and next of kin the case of an emergency. It will also contain a section requesting permission for photographs to be taken and used for promotion purposes only.

TRAINING

Every member of staff will undertake appropriate safeguarding training every **three years**. Training is available from a number of organisations as well as through the Norfolk Safeguarding Adults Board's Safeguarding Training programme. Any Adult Safeguarding Training we use will meet the standards of the NSAB Training

We actively encourage all our staff and volunteers to keep up to date with the most recent local and national safeguarding advice and guidance. This can be accessed via www.norfolksafeguardingadultsboard.info.

The Designated Safeguarding Officer should be used as the first point of contact for any safeguarding queries or concerns in our organisation.

RECRUITMENT

All staff, volunteers and regular visitors who come into contact with vulnerable adults we work with have a duty of care to prevent harm and reduce the risk of them suffering from abuse or neglect. There is a legal duty placed upon us to ensure that everyone who works with or on behalf of all the adults who we come in contact with is competent and suitable to do so.

Our recruitment practices are designed to help prevent unsuitable people from working with adults at risk of abuse or neglect. An integral part of this is the correct use of DBS checks [formerly called CRB checks]: There are three types:

- 1) **Standard** – which includes checks for spent and unspent convictions, cautions, reprimands and final warnings
- 2) **Enhanced** - which includes the same checks as the standard plus any additional information held by local police that is reasonably considered relevant to the post being applied for.
- 3) **Enhanced with Barred List** – this includes the same checks as the enhanced check plus checks against the appropriate barred list to ensure that the individual has not been barred from working with adults at risk of abuse or neglect. Only members of staff involved in **regulated activities** are required to undergo a mandatory Enhanced DBS with Barred List.

It is a criminal offence to allow anyone on the adult barred list to undertake regulated activities with adults at risk of abuse or neglect.

Regulated Activities relating to Adults comprise the provision of:

- health care
- personal care
- social work
- assistance with cash, bills and/or shopping
- assistance in the conduct of a person's own affairs
- transport to and from a place where an individual receives health, personal or social care [excludes family, friends and taxi drivers]

Further information DBS Checks is available on www.gov.uk/disclosure-barring-service-check/overview.

Best Practice Recruitment

We are committed to reflecting best practice in recruitment by ensuring that we:

- Carefully consider the job description/role profile and person specification ensuring they accurately reflect the duties, qualifications and experience that are required

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- Define our selection criteria based on the person specification the role
- Prepare an information pack for candidates
- Circulate details of all vacancies widely
- Ask for a written application form which includes a written declaration with regards to criminal convictions [**Note** you can only ask for details of spent convictions when role involves regulated activities]
- Ask for identification which includes a photograph
- Ask to see and copy the original of any qualifications
- Conduct interviews with at least two people present
- Ask for and check at least two references, including the most recent employer
- Obtain enhanced DBS checks where current legislation requires us to do so
- Organise a comprehensive induction period which includes familiarisation with our safeguarding policies, procedures and safeguarding training

GOOD WORKING PRACTICES

Good practice guidance will help staff and volunteers avoid putting themselves in a situation which could put them at risk of having an allegation of abuse made against them. This includes:

- always trying to ensure, where practical to do so, that a third party is present;
- avoiding unobserved one-to-one situations with adults – keep a door open and/or ensure that you are within the hearing of others;
- offering to transport an adult in your own vehicle;
- never allowing yourself to be drawn into inappropriate attention seeking behaviour
- never entering a room where an adult may not be fully dressed without first clearly obtaining their consent;
- never undertaking activities of a 'personal' nature for an adult unless that is clearly defined as part of your role – this is likely to be considered a regulated activity;
- never engaging in, or allowing, any sexually provocative games, whether based on talking or touching;
- never making suggestive remarks or discriminatory comments;
- never engaging in, or tolerating bullying or harassment
- never engaging in, or tolerating, inappropriate physical activity e.g. horseplay;
- never trivialising allegations of abuse or neglect;
- doing your part in developing a culture in which everyone feels able to point out inappropriate attitudes and behaviours to each other;
- ensuring that all allegations of abuse are reported, including any made against you
- remembering that someone else might misinterpret your actions, no matter how well intentioned.

ROLES AND RESPONSIBILITIES

Any concern for an adult's safety or welfare will be recorded in writing and given to the Designated Safeguarding Officer.

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The Designated Safeguarding Officer is responsible for:

-  liaising with Adult Social Services and other agencies where necessary and making referrals using the agreed procedures detailed below
-  ensuring that all staff and volunteers are aware of our policy and the procedure they need to follow
-  ensuring that all staff, volunteers and regular visitors have received appropriate safeguarding information and training during induction and this training is refreshed every three years
-  ensuring that our safeguarding policy is in place, is reviewed annually and follows the guidance provided by the NSAB
-  ensuring that at all times safer recruitment practices are followed

Our organisation undertakes to remedy without delay any weakness in regard to our safeguarding arrangements that are brought to our attention.

DEALING WITH ALLEGATIONS OF ABUSE/NEGLECT AGAINST OUR STAFF

Allegations of abuse or neglect can sometimes arise from a differing understanding of the same event, but when they occur they are distressing and difficult for all concerned. We also recognise that many allegations are genuine and there are some people who harm or abuse adults.

As part of our commitment to safeguarding the adults we work with and support we will follow the policies and guidance from Norfolk Safeguarding Adults Board.

All the people who work and volunteer with us will be made aware of the procedures that will be followed if an allegation of abuse or neglect is made against them.

We will support anyone who, **in good faith**, reports his or her concerns that an adult is being abused or neglected or is at risk of abuse or neglect even if those concerns prove to be unfounded

The MASH [Multi-agency Safeguarding Hub] must be informed **within one working day** of any allegation reported directly to us. Telephone [0344 800 8020](tel:0344 800 8020) follow the prompts to the Adult Safeguarding option.

Any allegations that are made to the Police or Adult Social Care about an employee will be referred to the MASH who will liaise with us as to the appropriate course of action.

If an individual [paid worker or unpaid volunteer] is bared from working with adults (or would have, had the person not left first) because the person poses a risk of harm to adults, we must make a referral to the Disclosure and Barring Service. **It is a criminal offence to fail to make a referral without good reason.**

HANDELING A DISCLOSURES OF ABUSE

An adult may tell someone they trust that they are being abused or neglected. They will often not be aware of sources of help and support. It takes courage to confide in someone – the way in which staff/volunteers respond can be crucial.

Do:

- remain calm and receptive;
- listen without interrupting;
- make it clear that you are taking the matter seriously;
- acknowledge their courage in telling you;
- let them know you will do what you can to help;
- try to get their permission for you to share the information on a need to know basis to enable them to receive the help and support they need
- record, using ink, what was said as soon as possible – signing and dating it
- contact the Designated Safeguarding Officer immediately
- Seek support

Do not:

- allow your shock to show;
- ask leading questions;
- probe for more information;
- make assumptions or speculate;
- make negative comments about the abuser;
- make promises you can not keep;
- give assurances of absolute confidentiality – particularly in those situations where other adults may be at risk

What to do if the adult asks you to keep the information secret:

- If the adult has **mental capacity** the **public interest test applies** [if someone else could be a victim of the alleged perpetrator it is in the public interest to report it with or without the victims consent]
- If they do not have mental capacity you have a duty to report it without their consent

If in doubt ask your Designated Safeguarding Officer

MAKING A SAFEGUARDING REFERRAL

We are clear that the Local Authority and the Police must lead all investigations into any allegation regarding safeguarding.

Telephone: **0344 800 8020** [operates 24 hours a day 365 days a year] – follow the prompts to take you to the Safeguarding Option.

State that it is an adult safeguarding matter and explain your concerns

Clarify with them what action should be taken and by whom.

Make a note of the person you spoke to including the guidance they gave you, their name and contact details on the reporting form. Guidance on the information required when making a referral is available on the NSAB website

www.norfolksafeguardingadultsboard.info/professionals/guidance-and-documents

Send a copy to the named contact by e-mail, fax, or post within 24 hours.

If we are unsure if a referral should be made contact the MASH and ask for a professional consultation. This can be anonymous on the part of the adult to help establish the level of concern and any action advised.

RECORDS AND CONFIDENTIALITY

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If we are concerned about the safety or wellbeing of any adult in our organisation we will record our concerns immediately on the agreed reporting form and give this to the Designated Safeguarding Officer.

All information relating to a safeguarding concern given to the Designated Safeguarding Officer must be made in writing – in ink, signed and dated by the person with the concern.

Any information recorded will be kept in a separate named file, in a secure cabinet and not in the individual's file. These files are the responsibility of the Designated Safeguarding Officer and information will only be shared within the organisation on a need to know basis for the protection of the adult.

Any safeguarding information will be kept in the file and added to. Copies of referrals will be stored in the file.

All information is confidential and must be managed in line with the Data Protection Act 1998. However, if there is safeguarding concern information can be shared with Adult Social Care, the Police and where appropriate the Care Quality Commission.

WHAT IS ABUSE AND NEGLECT

The Care Act 2014 does not set out a specific definition of abuse. Abuse can consist of a single or repeated act(s); it can be intentional or unintentional or result from a lack of knowledge. Abuse and neglect:

Can take many forms:

- It may be an isolated incident, a series of incidents or a long term pattern of behaviour
- It could affect one person or many more
- It may be in someone's home, in public or in an institutional setting
- It may be deliberate or the result of negligence or ignorance
- Exploitation in particular is a common pattern in abuse and neglect
- The degree or lack of intent will inform the response which will be appropriate and proportionate to the concerns that have been raised.

Can happen anywhere - including:

- In a person's own home and/or other people's homes;
- In public places or in the community;
- In clubs;
- At work;
- Schools and colleges of further education;
- In hospitals, surgeries or other health centres;
- Care homes;
- In places of worship
- Via electronic media including the intranet;
- Day centres.

Patterns of abuse vary - and include:

- Serial abusing in which the perpetrator seeks out and 'grooms individuals – sexual abuse sometimes falls into this pattern as do some forms of financial abuse and radicalisation;
- Long-term abuse in the context of an ongoing family relationship such as domestic violence between partners/spouses or generations or persistent psychological abuse; or
- Opportunistic abuse such as theft occurring because money or jewellery has been left lying around.
- Situational abuse which arises because pressures have built up and or because of difficult or challenging behaviour
- Neglecting a person's needs because the carer has difficulties. These could be debt, alcohol, or mental health related or the specific demands resulting from caring for someone

Anyone can be an abuser or neglect someone – including:

- Spouses/partners
- Other family members;
- Carers
- Neighbours;
- Friends;
- Acquaintances;
- Local residents;
- People who deliberately exploits adults their perceive as vulnerable to abuse;
- Paid staff or professionals; and
- Volunteers and strangers

TYPES OF ABUSE AND NEGLECT

The statutory guidance in the Care Act 2014 lists a number of types of abuse. However, this is not intended to be an exhaustive list but rather a guide to the sort of behaviours which could give rise to a safeguarding concern. It is important that we do not limit our view of what constitutes abuse or neglect to those types or the different circumstances in which they can take place.

Discriminatory Abuse – includes:

- forms of harassment, slurs or maltreatment because of someone's actual or perceived age, disability, gender, gender identify, ethnic, racial, cultural or national origin, religious belief/non-belief or sexual orientation
- ***hate incidents are a form of discriminatory abuse***

Domestic Abuse – The Home Office (2013) defines this as an incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse by someone who is or has been an intimate partner or family member regardless of gender or sexuality. **For this type of abuse the age range is extended down to 16.** It includes:

- psychological, physical, sexual, financial, emotional abuse;
- 'so called honour' based violence;
- female genital mutilation and
- forced marriage
- it also includes being a witness to domestic abuse of another person

Financial or Material Abuse – is the main form of abuse according to the Office of the Public Guardian. While it can occur in isolation, it is often present with other forms of abuse and includes:

- theft and fraud
- internet scamming
- some forms can involve the perpetrator seeking out and grooming individuals
- coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions
- misuse or misappropriation of property, possessions or benefits

Modern Slavery and Human Trafficking encompasses:

- Sexual exploitation including prostitution and 'adult entertainment'
- Forced Labour – commonly in agricultural, construction, food processing, hospitality industries, factories, car washers and nail bars
- Domestic servitude
- Organ harvesting
- Forced criminality – includes cannabis cultivation, street crime, forced begging, burglary, metal theft and benefit fraud

Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment. They may use concerns about an individual's immigration status or concerns that their families may be at risk if they resist exploitation.

Neglect and Acts of Omission includes:

- ignoring medical, emotional or physical care needs
- failure to provide access to appropriate health, care and support or educational services
- withholding of the necessities of life, such as medication, adequate nutrition and heating

Organisational Abuse and Neglect – includes:

- neglect and poor care practice within an institution or specific care setting such as a hospital or care home for example in relation to care provided on one's own home
- this may range from one off incidents to on-going ill-treatment
- it can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.

Physical Abuse - includes:

- hitting, pushing, pinching, shaking, grabbing, biting, hair-pulling, scalding;
- misusing medication;
- withholding food or drink, force-feeding;
- restraint or inappropriate physical sanctions;
- failing to provide physical care or aids to living – for example glasses or a walking stick

Psychological Abuse and Neglect - includes:

- emotional abuse;
- threats of harm or abandonment;
- deprivation of contact;
- radicalisation [being exploited by those who would want them to embrace terrorism]
- humiliation, blaming, controlling,
- intimidation, coercion,
- harassment, verbal abuse and cyber bullying;
- isolation or unreasonable and unjustified withdrawal of services or support.

Sexual Abuse – includes:

- rape, sexual assault or sexual acts to which the adult has not consented to, was unable to consent to, or was pressured into consenting to;
- indecent exposure; sexual harassment,
- inappropriate looking or touching,
- sexual teasing or innuendo
- sexual photography, subjection to pornography or witnessing sexual acts.

Sexual Exploitation is a subset of sexual abuse. It involves:

- exploitative situations and relationships where people receive 'something' (e.g. accommodation, alcohol, affection, money) as a result of them performing, or others performing on them, sexual activities,
- can also involve serial abusing in which the perpetrator seeks out and 'grooms' individuals - Grooming is defined as developing the trust of an individual at risk of abuse and/or his or her family in order to engage in illegal sexual conduct

Self-neglect covers a wide range of behaviour - including:

- neglecting to care for one's own personal hygiene, health, safety or surroundings;
- behaviour such as hoarding.

The definition of self-neglect **excludes** a situation in which a mentally competent person, who understand the consequences of his/her decisions, makes a conscious and voluntary decision to engage in acts that threaten his/her health or safety as a matter of personal choice.

However, there is a need to assess your concerns- balancing the individual's right to choose their lifestyle taking into account their mental health or capacity to understand the consequences of their actions. It may require a referral for a Care and Support Assessment. It can be a care or risk management issue rather than a safeguarding referral.

Signs and Indicators of Abuse/Neglect/Human Trafficking

The signs of abuse are not always clear. The following may, however, suggest the possibility of abuse:

- disclosures by the victim
- concern expressed by a third party
- admissions by the perpetrator
- someone expressing fears that abuse might happen
- evidence of unreported injuries
- signs of fear or distress
- injuries suggesting a possible non-accidental cause
- explanations that are incompatible with injuries presented or where conflicting explanations are given
- a history of persistent illness, infection or injury
- inappropriate use of medication
- possessions or money going missing or bills not being paid
- property being sold without the owner's consent or understanding
- sudden or unexpected removal of an individual from a care setting
- a person is uncharacteristically withdrawn, without apparent reason
- a person is found alone and at risk without adequate explanation
- a long time lapse between injury or illness and obtaining medical or other care
- abrupt or frequent changes of doctor or caring agency
- unexplained weight loss
- uncharacteristically unkempt appearance or surroundings
- agencies have repeated difficulty in gaining access to see someone
- it is made difficult to speak to a person alone without their carer/another person present
- evidence of avoidance, including regularly missed appointments, refusal of help, etc
- evidence of alcohol or other substance misuse (by the abuser and/or victim?)
- signs of stress
- history of previous abuse or violence in the family
- unexplained pain, itching, infection or injury in the anal, genital or abdominal areas
- torn, stained or bloody underclothing
- multiple unrelated people living at one address living in overcrowded private rental accommodation

Signs an individual may be led into extremism:

The following may indicate that an individual is at risk of being radicalised or is being exposed to extremist views:

- Being in contact with extremist recruiters and/or spending increasing time in the company of other suspected extremists;
- Loss of interest in other friends and activities not associated with the extremist ideology, group or cause;
- Accessing extremist material online, including through social networking sites;
- Possessing or accessing materials or symbols associated with an extremist cause;
- Justifying violence to address social issues;
- Graffiti symbols, writing or art work promoting extremist messages or images;
- Significant changes to appearance and/or behaviour increasingly centred on an extremist ideology, group or cause;
- Changing their style of dress or personal appearance to accord with the group;
- Attempts to recruit others to the group/cause;
- Using insulting to derogatory names for another group

Hate Incidents

A hate incident is any incident which is perceived by the person, or any other person as being motivated by prejudice or hatred. Hate incidents / crime can be anything from name calling, physical attack, vandalism or stealing a person's property, motivated by prejudice, hostility or hatred towards that individual because they are 'different'. It may or may not be a crime and it may or may not be linked to a safeguarding concern. There are a number of ways to report a hate incident:

- In an emergency always phone 999
- Contact the police via email: enquiries@norfolk.pnn.police.uk or visit their website: www.norfolk.police.uk
- Going to any Norfolk County Council public building such as libraries and reporting it, where staff will be able to assist if needed
- Going to your district council, local police station or anywhere you see the 'Hate Incident Reporting Place' logo
-

RELEVANT GUIDANCE AND LEGISLATION

Human Rights Act 1998
Disability Discrimination Act 1998
Public Interest Disclosure Act 1998
Data Protection Act 1998
Care Standards Act 2000
Sexual Offences Act 2003
Domestic Violence Crime and Victims Act 2004
Mental Capacity Act 2005
Modern Slavery Act 2015
'Safeguarding Adults' National Framework 2005
The Safeguarding Vulnerable Groups Act 2006
Equality Act 2010
The Protection of Freedom Act 2012
Care Act 2014
Section 26 and 29 of the Counter Terrorism and Security Act 2015
Serious Crime Act 2015 – Section 76 – Domestic Abuse

OTHER RELEVANT POLICIES

To underpin the values and ethos of our organisation and our intent to ensure the adults we work and support with are appropriately safeguarded the following policies are also included under our safeguarding umbrella:

Cornerstone Church CP Policy Documents

Anti - Bullying
Code of Conduct
Complaints
Confidentially
Health and Safety
Working Practice
Recruitment
Whistleblowing

USEFUL CONTACTS

Adult Social Services Access Team 0344 800 8020

Norfolk Police:

- Non-Emergency 101
- In an Emergency 999

Norfolk Safeguarding Adults Board www.norfolksafeguardingadultsboard

Care Quality Commission (CQC) 0300 061 6161

NHS and Social Care Whistleblowing Helpline 0800 072 4725

NAMED DESIGNATED SAFEGUARDING OFFICER

The following designated members of staff are in post:

Designated Officer:

Telephone Number:

Deputy Designated Officer:

Telephone Number:

POLICY REVIEW

We will always make any changes immediately to our procedures in line with Norfolk Safeguarding Adults Board's guidance www.norfolksafeguardingadultsboard.

The policy will be reviewed on:

APPENDIX A - REFERRER'S CHECKLIST

From:-

<https://www.norfolksafeguardingadultsboard.info/assets/NSAB-Procedures/NSAB-Safeguarding-Procedures-SEPT2016FINAL.pdf>

This checklist will help you make sure you take down all the information you can, and record information to make a referral. Referrals will be considered regardless of the whether the referral has been able to gather all of this information.

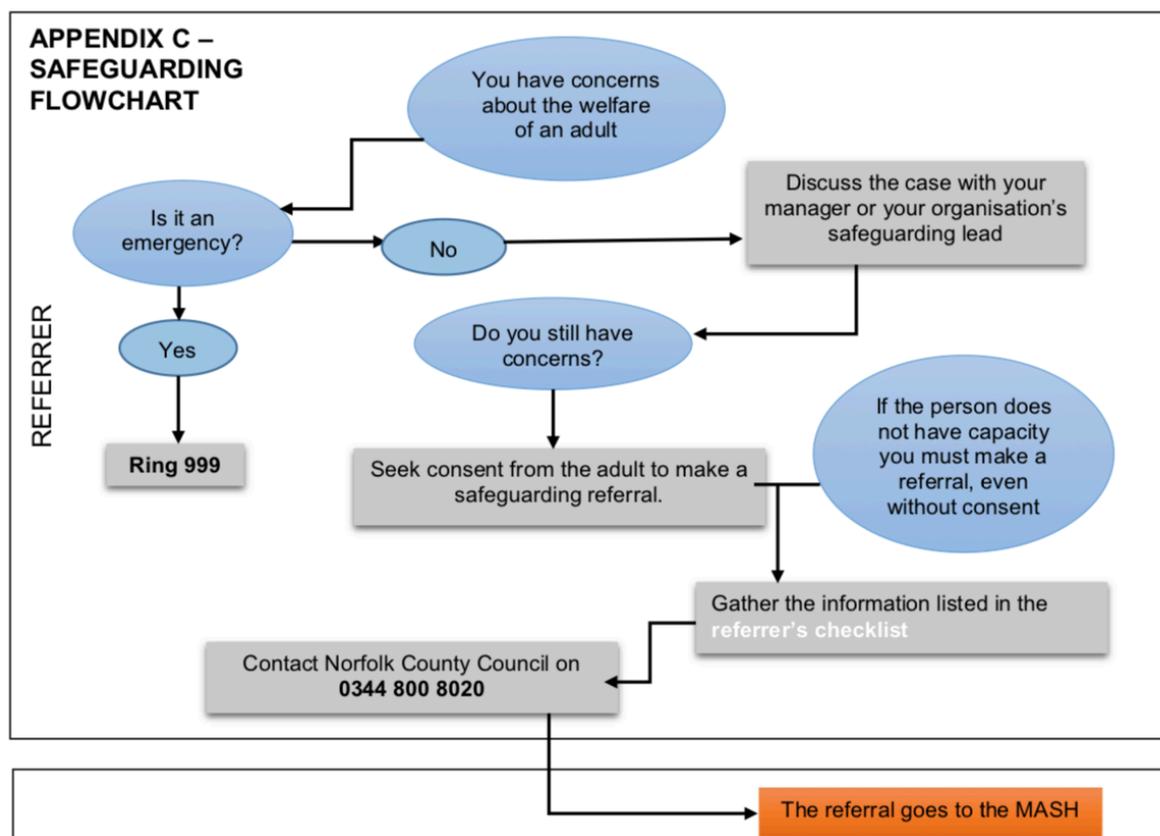
	Essential	Desirable
Name of referrer (You can remain anonymous)		✓
Contact details of referrer		✓
Relationship to Victim		✓
Organisation of referrer		✓
Name of Adult at risk of abuse or neglect		
Name of Adult at risk of abuse or neglect	✓	
Address of Adult at risk of abuse or neglect	✓	
Address, if different, of place of alleged abuse	✓	
Contact details of Adult at risk of abuse or neglect	✓	
Details of Category of Vulnerability (Older, frail, Mental Health, Learning Disabilities etc.)	✓	
Date of Birth or Age		✓
Gender		✓
Ethnicity		✓
Religion		✓
Capacity and understanding		✓
Communication needs (sensory loss, Language, other)		✓
Name of Alleged Perpetrator		✓
Address of Alleged Perpetrator		✓
Date of Birth of Alleged Perpetrator		✓
Details of Referral - You need to consider the following so that the person taking the referral can gain adequate information		
Nature of abuse/incident	✓	
When did it happen?	✓	
Where did it happen?	✓	
Was anyone else involved?		✓
Was the incident witnessed?		✓
Have you had previous concerns regarding this person? If so what?		✓
Does the adult at risk of abuse or neglect know you are making this referral?	✓	
What does the person want to happen?		✓
Have you done anything to assist the adult at risk of abuse or neglect at this time? (What actions have been taken?)	✓	
How do you want to be contacted in the future?		
How do you want to be contacted in the future?	✓	

APPENDIX B - Left Blank

APPENDIX C - SAFEGUARDING FLOWCHART

From:-

<https://www.norfolksafeguardingadultsboard.info/assets/NSAB-Procedures/NSAB-Safeguarding-Procedures-SEPT2016FINAL.pdf>



Consent

Wherever possible you should seek the consent of the adult to make a safeguarding referral. People who have mental capacity to make decisions for themselves should be consulted before a referral is made and their consent sought. If the person does not have capacity and has been harmed or is likely to be, then you must make a safeguarding referral.

If the alleged abuser has contacts with other adults at risk of harm, a referral must be made so that these adults can be safeguarded. If the alleged abuser is a formal or informal carer for another person, then a referral must be made in the public interest, as other adults may be at risk of harm from them. In these circumstances, a referral should be made regardless of whether the person has given consent.