|  |
| --- |
| **Northumberland Safeguarding Adults**  **Request for a Decision**  **This form should be used to request a decision on any concerns regarding abuse or neglect of an adult/s at risk from a Decision Maker.  Please note this is the start of the Safeguarding Adults (Section 42) Enquiry under the Care Act.**  **Please complete the form as fully as possible in order to enable robust decisions to be made in a timely manner about the progression, or otherwise, of a Safeguarding Adults Enquiry. Please attach further information/pages if necessary.**  **This form should be completed as soon as practicable, ideally within 24 hours and sent to** [**safeguarding.triage@nhct.nhs.uk**](mailto:safeguardingtriage@nhct.nhs.uk) |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Date of Referral |  | | | | | | |
| Name of Adult at Risk |  | | | | | | |
| Swift No |  | | | | | | |
| Details of the Incident:  *Please provide detailed description of the alleged incident/concern including times, people involved, witnesses, and any other relevant information:* |  | | | | | | |
| Has the adult at risk consented to this referral? | Yes |  | | | No | |  |
| If consent has not been sought, or you are overriding consent please indicate the reason why: | Public Interest/Risk to others | | | | | |  |
| Risk of serious harm | | | | | |  |
| Suspected serious crime | | | | | |  |
| Adult at risk lacks capacity to consent (BI decision) | | | | | |  |
| Ability to consent is affected by threatening or coercive behaviour | | | | | |  |
| Seeking consent would increase the risk to the adult and/or others | | | | | |  |
| What are the views/wishes of the adult at risk? |  | | | | | | |
| Name of the Alleged Perpetrator (if known) |  | | | | | | |
| Swift No of AP (if applicable) |  | | | | | | |
| Does the AP have any care and support needs? | Yes | |  | No | |  | |
| If yes please give a brief summary |  | | | | | | |
| What actions have been taken to ensure the immediate safety of the alleged victim and others? |  | | | | | | |
| Have the Police been notified?  *If yes please provide the outcome of any Police action and log number (if available):[[1]](#footnote-1)* |  | | | | | | |
| Would the adult at risk have ‘substantial difficulty’ in participating in the Safeguarding Adults process?  If yes, is there a suitable person who could represent them? (E.g. family member, friend, advocate) | Yes | |  | No | |  | |
|  | | | | | | |
| Does the adult at risk have an LPA? | Finances | |  | Health & Welfare | |  | |
| Please provide details of any other people/agencies involved who may be able to help with the Safeguarding Adults enquiry: |  | | | | | | |
| Are you aware of any previous referrals made relating to the alleged victim and/or perpetrator? |  | | | | | | |
| DECISION (Input by Decision Maker) | S42 Referral  (Process through MASH) | | ACN to be recorded  (keyworker to record ACN as the concern; and decision and safety plan as ACN further action) | | | Safeguarding Issues not identified. | |
| Please Tick |  | |  | | |  | |
| Rationale for Decision |  | |  | | |  | |

1. Version 2 11/04/2019 [↑](#footnote-ref-1)