



Inter-agency Safeguarding Adults Concerns Form (ALERT) & Referral to the Multi-Agency Safeguarding Hub for Adults at Risk (MASH)

STRICTLY CONFIDENTIAL

This form may be used to notify the Office of the Committee for Health and Social Care of a concern or incident where safeguarding duties apply:

- **Safeguarding duties apply to an adult who has needs for care and support: AND**
 - **is experiencing, or at risk of, abuse or neglect: AND**
 - **as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect.**
- A. You should first contact **01481 725241** and ask for the Adult Safeguarding Manager, or in their absence, the Adult Safeguarding Team Lead for the HSC service providing support to the adult at risk, to discuss.
- B. Please complete this form with as much detail as possible. Lack of access to the necessary information should NOT delay reporting the alert.

REMEMBER: If you suspect that someone is being abused and they are in **immediate** danger you should contact the Police without delay. **Guernsey Police 01481 725111 (OR 999 in an emergency)**

This Inter-Agency form should be used to report an adult safeguarding concern where HSC safeguarding duties apply; *even where you have already reported the matter to the police; or raised an incident via the HSC Ulysses Incident Reporting system; reported a clinical incident; reported this concern as a disciplinary or regulatory matter; or reported this concern within your own organisation.*

PART A: Please indicate date of the concern / incident if known:		<input type="text"/>
1 Tell us about the adult at risk that you are concerned about: <i>(please complete as much of this as is known – if not known put N/K)</i>		
Name: <input type="text"/>		
Gender: <input type="text"/>		
Home address: <input type="text"/>		
Telephone No: <input type="text"/>		
Age: <input type="text"/>	Date of Birth: <input type="text"/>	
Ethnic Origin/Nationality: White British	Religion: <input type="text"/>	
Primary support needs of the adult at risk: Choose an item.		



2 Tell us about the main contact for the adult at risk

Name: <input type="text"/>	
Relationship to adult at risk: <input type="text"/>	
Are they the relative/carer? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
Are they aware that this concern has been raised? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
Contact address: <input type="text"/>	Telephone No: <input type="text"/>
	Mobile No: <input type="text"/>
Postcode: <input type="text"/>	Email: <input type="text"/>
Are they willing to be contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	

3a Tell us about the concern (s) being raised

Has the allegation of abuse occurred within a Service, relate to a Service, (E.G. service user on service user assault) or implicate a Service or a named individual who works within a Service?
 Yes No

If 'Yes' please give details of Service (e.g. name of establishment/type of organisation):

Have you or anyone else reported this to the relevant regulatory body, where appropriate?
 Yes No Not relevant Unknown Undecided

If 'Yes' please give details e.g. HSC Inspector of homes, HSC Governance Ulysses Incident report/ HSE(RIDDOR)/ other:

Is the adult at risk involved with any other support agencies or service providers?

Type of abuse suspected- Please select all that apply:

<input type="checkbox"/> Financial	<input type="checkbox"/> Physical	<input type="checkbox"/> Emotional/ Psychological
<input type="checkbox"/> Sexual	<input type="checkbox"/> Discriminatory	<input type="checkbox"/> Organisational
<input type="checkbox"/> Modern Slavery	<input type="checkbox"/> Self-Neglect	<input type="checkbox"/> Neglect and acts of omission

Domestic Abuse (this includes Forced Marriage, Sexual Exploitation, Female Genital Mutilation and Honour Based Violence) by a third party Yes No

Does the concern involve sexual exploitation? Yes No

And do you consider this abuse is also Hate Crime? Yes No

3b Tell us about the alleged incident/concern(s) being raised - continued

3c Actions taken to reduce the risk of harm or abuse to the adult at risk.



Summarise what actions (if any) have been taken to ensure the immediate safety of the adult at risk.

4.MAKING SAFEGUARDING PERSONAL (MSP)

Has the adult at risk given their consent for this information to be shared?

See guidance at the end of this form

- Consent given Consent not given Unsafe to seek consent
- Unable to give consent

If no consent obtained, have you informed the adult at risk that you will be escalating this concern?

NB: You should explain that you are raising this concern, unless there is good reason for you not to do so IE: by doing this, it may put the adult or others at further risk. **However, please do not commence an investigation or interview the adult at risk with regard to the safeguarding concerns unless advised to do so by the HSC safeguarding lead or the police.** If you have NOT spoken to the adult at risk to inform them that you are raising a concern, please explain why in the space below.

Does the adult at risk:

A. feel safe at the moment In relation to this safeguarding concern,

- Yes No Unknown

B. Has the adult at risk indicated what outcomes they wish to achieve?

(EG: I want protective action taken, I want to feel safe, I want to make a statement to the police, I want to manage this concern in my own way, I need support to manage this concern, I want to move to a safe location etc.)

In their own words where possible, please indicate what action (if any) the adult at risk would like taken?

Where is the adult at risk now? (Include where they are in relation to the person alleged to have caused harm)



Is anyone else at risk of abuse?

Yes No Unknown

If 'Yes' give name(s) and details including details of dependant adults.

Please advise Children's Multi-Agency Support Hub (MASH) on 01481 723182 if there are concerns regarding the welfare of any children present. If a child is at risk of immediate harm, call Police on 999.

In your opinion, does the adult at risk have the mental capacity to understand the risks within this safeguarding concern?

Yes No Unknown

Are there any difficulties in gaining access to the adult at risk? Or In your view, is there any potential risk to anyone visiting the adult?

If you think that a crime has been committed have police been contacted?

Yes No inappropriate *If Yes, what was the outcome?*

Who did you speak to?

If No, why not?

Who else has been informed / made aware of this concern?

5 Details of person(s) alleged to have caused harm (if known)

(please complete as much of this as is known and continue on a separate sheet if more than one is involved)



Name: <input type="text"/>	
Address: <input type="text"/>	
Occupation/Position/Title/: <input type="text"/>	
Organisation: <input type="text"/>	
Date of Birth: <input type="text"/>	Gender: <input type="text"/>
What is the relationship of the person alleged to have caused harm to the adult at risk? Choose an item.	
Does the adult at risk know the person alleged to have caused harm? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
Is the person alleged to have caused harm also a person with care and support needs? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
Is the person alleged to have caused harm the main family carer? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	



Is the person alleged to have caused harm aware of this alert?

Yes **No** **Unknown**

If yes, what is their response, and are there any hazards to be aware of?



6: Details of person raising the concern

Name: <input type="text"/>	Job title <input type="text"/>
Organisation <i>(if applicable)</i> : <input type="text"/>	Type of organisation: Choose an item.
Contact address: <input type="text"/>	Telephone No: <input type="text"/> Mobile No: <input type="text"/>
Email: <input type="text"/>	Postcode: <input type="text"/>
Relationship to the adult at risk: <input type="text"/>	
Who made the disclosure /raised the concern with you? <input type="text"/>	Date form completed: <input type="text"/>
This form Completed by (if different to above) <input type="text"/>	
Contact details <input type="text"/>	

Please send the completed form as a confidential document to:
Adult Safeguarding Manager, Perruque House, Rue de la Perruque, Castel, Guernsey, GY5 7NT
The form can also be e-mailed securely to HSC PerruqueHouseAdmin@gov.gg with 'Safeguarding adults concern' as the subject.

Where physical injury / wounds / bruising are evident in relation to the concerns raised, please use and attach (appendix 1) BODY MAP which should be completed by hand and signed.



Guidance Notes for completing this form

(a) ON COMPLETING THE WRITTEN DETAILS OF CONCERNS

The written details will need to include:

- The date and time when the disclosure was made, or when you were told about/witnessed the incident
- Who was involved, any other witnesses, (including service users and other staff if within a service)
- Exactly what happened or what you were told, in the persons own words, keeping it factual and not interpreting what you saw or were told
- The views and wishes of the adult (see further guidance below)
- The appearance and behaviour of the adult and/or the person making the disclosure
- Any injuries observed (attach body map)
- Any actions and decisions taken at this point
- Any other relevant information e.g. previous incidents that have caused you concern

REMEMBER TO:

- Include as much detail as possible
- Make sure the written report is legible and is of a quality that can be photocopied
- Make sure you have printed your name on the report and that it is signed and dated
- Keep the report factual as far as possible. However, if it contains your opinion or assessment, it should be clearly stated as such and be supported by factual evidence. Information from another person should be clearly attributed to them and they should be informed that the information they provide is to be used in this manner.
- Keep the report confidential, storing in a safe and secure place until needed

(b) ON OBTAINING CONSENT OF THE ADULT

- 'MAKING SAFEGUARDING PERSONAL' means that the adult is placed at the centre of the process by considering their wishes, views and feelings.
- Gaining consent of the adult involved is good practice, but the provisions of the Guernsey Data Protection Law do not present a barrier to the sharing of such personal information.

- This means that if you are seriously concerned about the risks and the adult does not wish for this to be pursued within the safeguarding process you should still give consideration to raising your concerns in line with HSC safeguarding procedures.
- You should clearly document the adult's views on this form and evidence why you are still raising these concerns. (Please consider public interest and duty of care – this may also mean reporting your concerns to the Police if you believe a crime may have been committed).
- Remember the adult's consent is **not** required in all situations. Where the allegations are against a Person in a Position of Trust, whether or not consent is given by the adult with care and support needs, consideration should be given to the possible risks to others. These risks could outweigh respecting the wishes and feelings of the adult with care and support needs and so an AAR (A) Safeguarding Alert 'Raising a Concern' form should be completed.

How to respond if you receive an allegation:

- Reassure the person concerned
- Listen to what they are saying
- Record what you have been told/witnessed as soon as possible
- Remain calm and do not show shock or disbelief
- Tell them that the information will be treated seriously
- Don't start to investigate or ask detailed or probing questions
- Don't promise to keep it a secret

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 a crime has been committed
- To preserve evidence
- To keep yourself, staff, volunteers and service users safe
- To inform your manager (unless they are implicated in the alleged abuse) or the designated adult safeguarding lead in your organisation as soon as you can
- To contact the HSC adult safeguarding manager to escalate your concern and forward this completed alert form.
- To record what happened and store this information as per your organisation's policy for recording and storing sensitive adult safeguarding information

Please be aware that the information you provide may be shared sensitively with other organisations involved in the safeguarding process