**Safeguarding Adults Incident form.**

To be completed as fully as possible if you have concerns regarding an adult. It is important to inform the adult about your concerns and that you have a duty to pass the information onto the safeguarding officer. The Safeguarding Officer will then look at the information and start to plan a course of action, in conjunction with yourself, the adult involved and if necessary social care or other relevant organisations.

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| **Ormskirk Shotokan Karate Club – Adults Safeguarding Incident Report Form**  |
| **Section 1 – details of adult at risk** |
| Name of adult |  |
| Address |  |
| Date of Birth / or Age |  |
| Contact number / email |  |
| GP Practice (if known) |  |
|  |  |
| **Section 2 – Your details** |
| Name |  |
| Contact number / email |  |
| Your role in Ormskirk Shotokan Karate Club |  |
| **Section 3 – Details of Concern** |
| Detail what you have seen/been told/other that makes you believe the adult at risk is being abused or is at risk of abuse (include dates/times/evidence from records/photos etc.) |
| **Section 4 - Abuse type(s) – please tick as many as you feel may apply** |
| Physical | Psychological | Financial |
| Neglect | Hate Incident / Crime | Organisational (Institutional) |
| Internet Abuse | Modern Slavery | Female Genital Mutilation (FGM) |
| Forced Marriage | Domestic Abuse | Radicalisation |
| Self Neglect |  |  |
| **Section 5 - Have you discussed your concerns with the adult? What are their views, what outcomes have they stated they want (if any)?** |
|  |
| **Section 5A – Reasons for not discussing with the adult** |
| Adult lacks capacity |  |
| Adult unable to communicate their views |  |
| Discussion would increase the risk |  |
| State why the risks would increase |
| **Section5B – Have you discussed your concerns with anyone else? E.g.carer/parent. What are their views?** |
|  |
| **Section 6 – What action have you taken /agreed with the adult to reduce the risks?** |
| Information passed to Safeguarding Officer, confirm details: | Referral to Social Care Confirm details: |
| Contact with the police Confirm details: | Referral to other agency – please confirm details: |
| **Section 7 – Risk to others** |
| Are any other adults at risk Yes/No – delete as appropriate |
| If yes state why and what actions have been taken to address these? |
| Are any children at risk Yes/No Delete as appropriate |
| If yes state why and what actions have been taken to address these? |
| Signed: |
| Date: |
| OFFICE USE ONLY |
| **Section 8 – sharing the concerns (To be completed by Safeguarding Officer)** |
| Details of your contact with the adult at risk. Have they consented to information being shared outside of Ormskirk Shotokan Karate Club? |
| Details of contact with the Social Care Team where the adult at risk lives –advice can be still sought without giving personal details if you do not have consent for a referral |
| Details of any other agencies contacted |
| Details of the outcome of this concern |