

Safeguarding Protection Form

DETAILS OF THE ADULT AT RISK

Name of Adult At Risk					
DoB/ Age:		Gender:		Reference no:	
Address:					
Does the adult at risk have Mental Capacity as required to take part in the Safeguarding process?					Yes / No
If the adults at risk does not have Mental Capacity to take part in the Safeguarding Process, has an IMCA been appointed?					Yes / No
Has the adult at risk agreed that a safeguarding adults investigation take place?					Yes / No
If the person has Capacity but has not agreed, please summarise reasons for their reluctance.		(Include consideration of any perceived benefits to the adult at risk from enduring an abusive situation).			

DETAILS OF OTHER PERSON AT RISK

Are any children or other adults at risk:	Yes / No
The relevant Safeguarding Children / Safeguarding Adults alerts must be raised. Has this been done?	Yes / No

DETAILS OF THE PERSON ALLEGED TO BE CAUSING THE HARM

Name of person alleged to be causing the harm:		
Person alleged to be causing the harm's relationship with the adult at risk:		
Is the person alleged to be causing the harm also an adult at risk?	Details	Yes/No/ Not Known

CONTEXT OF THE ALLEGATIONS OF ABUSE

Context in which the alleged incident(s) took place:	
Chronology of Events (Please continue on extra sheet if necessary)	

RISK ASSESSMENT

INDICATOR	ASSESSMENT	RISK LEVEL (None/ Low/ Medium/ High)
1) What kind(s) of harm has been threatened or inflicted? How severe/ serious and are there any children and/or other adults at risk involved:	Detail this for each type of abuse:	
2) Is there evidence to suggest that the abuse is likely to be repeated or escalate?	Assess likelihood that abuse will: a) Continue b) Escalate	
3) Is there evidence to suggest that the abuse was premeditated, accompanied by threats or actual violence or coercion?	Assess likelihood that abuse involved: a) Premeditation b) Threats c) Violence d) Other coercion	

INDICATOR	ASSESSMENT	RISK LEVEL (None/ Low/ Medium/ High)
4) Referring to the chronology, is there a pattern of history for the adult at risk and/or person alleged to be causing the harm:	Describe evidence of patterns of behaviour relevant to abuse concerns:	
5) How long has this particular incident been happening? What is the person's need and what has been carried out so far?	For each category, assess duration:	
6) What has been the impact on the person's independence, health and wellbeing?	Assess severity of impact on the persons: a) Independence b) Health c) General Wellbeing	
7) How much/ what kind of support does the person normally require?	How much/ what kind of support does the person normally require (include reference to carers):	
8) Overall Risk Rating	Considering all of the ratings above, assess the overall risk rating:	

RISK SUMMARY

Please record here overall assessment of risks identified, including the risk to others:	
View of the Risk Assessor:	
Views of the Adult at Risk:	
Views of Carer(s) /others:	
Summary of Action	

SIGNATORIES

Name of Worker Completing Assessment:	
Job Title:	
Signature & Date:	
Name of Safeguarding Adults Manager:	
Signature & Date:	