



10 Top Tips for Making an Adult Safeguarding Report

The form is to be used only for reporting suspected abuse or neglect of an adult at risk to social services. If you want to let social services know other information or to request services or support, please contact the appropriate social services department.

It is important to give as much information as possible in the report form. If you do not give a full account of what has happened, the process of protecting the adult at risk may be delayed.

The following ten tips should help you complete the report:

1. Correctly Recording the Basic Information
 - Name, address and date of birth of the adult at risk;
 - Address and Telephone Contact details.
 - Gender and ethnic origin of the adult at risk;
 - Care and Support need of the adult at risk;

2. Make clear who you are, what your role and relationship is to the person you are making the referral about.
 - **Include where the adult at risk is now and what actions have been taken to ensure the safety of that adult.**

3. State the source of your evidence and be clear what is fact and what is opinion.
 - Is it from the notes, first-hand experience of your interaction with the person, concerns raised by other professionals or 3rd party information? It may be a combination of all.

- Quote exactly what the Adult at Risk has said to you.
 - For example, don't write 'the Adult at Risk says his partner is being physically abusive towards him'; quote exactly what the Adult at Risk said: "my partner pushed me down the stairs last Tuesday and then dragged me along the floor by my hair".
4. Be concise and use short sentences. Explain medical terminology and what this means for the Adult at Risk, as the reader of the referral may not have any medical background.
- For example, you are making an Adult Safeguarding Referral because you have been made aware that Richard's carers have not been giving him his thyroid medication. You could write: 'Richard has hypothyroidism (underactive thyroid) and needs to take his prescribed medication (Levothyroxine) daily. If he does not have his medication daily he could become very unwell. Richard has a learning disability and relies on his carers.
5. Describe what has happened with as much detail as you can and if there were any witnesses.
6. Be clear about what type of abuse you think has occurred.
7. Include as many details about the perpetrator/s as you can
- Do not contact the perpetrator yourself**
8. Consider whether there is anyone else at risk
- For example, children or other Adults at Risk, and state this and who they are.

- Consider whether you need to make a Child Safeguarding Referral.

9. State whether the Adult at risk is aware of the safeguarding concern and what the Adult at Risk would like to happen.

- It should only be in exceptional circumstances that the Adult at Risk (or their family/Power of Attorney if appropriate in cases where the Adult at Risk does not have capacity) should not be told of your concerns.

Remember Safeguarding should be a process done WITH Adult at Risk, not TO them. Exceptions would be that if by telling the Adult at Risk your concern it would put the patient or yourself at risk of harm.

10. Document clearly in your own agency notes what actions has been taken.