

**Initial guidance for the completion of safeguarding adults alert forms**



**The role of the Alerting Manager**

The Alerting Manager is a nominated person within an organisation who is responsible for ensuring actions are taken to ensure the adult at risk is safe from harm and for deciding whether to make a safeguarding Alert.

Where actions are needed urgently or no Alerting Manager is available, **any member of staff or volunteer may need to make an Alert**, in which case, they should also follow this guidance.

For explanation of your individual and organisational responsibilities, refer to the full length version of the West Yorkshire Multi-Agency Safeguarding Adult Policy and Procedures, which are held on Calderdale Council's website.

If the adult at risk has mental capacity to decide about a safeguarding Alert their consent should be sought, unless to do so may place a person at risk or it is not possible to seek that person's consent.

Any actions taken without the adult at risk's consent should be proportionate to the risk of harm. The following are examples of when a decision to make an Alert without consent will be required:

- It is in the public interest, for example,
  - there is a risk to other 'adults at risk', or
  - the concern is about institutional or systemic abuse, or
  - the concern or allegation of abuse relates to the conduct of an employee or volunteer within an organisation providing services to adults at risk, or
  - the abuse or neglect has occurred on property owned or managed by an organisation with a responsibility to provide care
- the person lacks mental capacity to consent and a decision is made to make the alert in the person's 'best interests' (Mental Capacity Act 2005)
- a person is being unduly influenced or intimidated, to the extent that they are unable to give consent
- it is in the person's vital interests (to prevent serious harm or distress or in life-threatening situations)
- it is necessary to prevent crime

## **The Alert form**

The alert form comprises two pages with page dedicated to general information about the person alleged to be at the harm, the type of abuse and the location of the alleged abuse.

The main detail that the Council will require in order to make an effective and timely decision about to respond to the safeguarding alert is covered on page 2 and comprises three questions, as follows:

**Safeguarding alert summary (actual harm caused / likelihood of harm):** When the Council receives safeguarding adults alerts managers are required to ascertain if the information provides any evidence of actual abuse, or any information that indicates a high likelihood of abuse if the safeguarding alert is not accepted.

To assist managers in this process and to allow the Council to provide timely feedback (on the outcome of the alert) to people who have raised the concern. It is essential that any safeguarding adults alerts make explicit the type(s), nature and severity of the alleged abuse, whilst also making clear a distinction between abuse that has occurred and concerns you have about a person experiencing a likelihood of abuse if the safeguarding alert is not accepted.

Without this level of information the Local Authority is unable to assess the level of risk effectively, which could result in situations progressing through the safeguarding process when it is not necessary, or more concerning not accepting a safeguarding alert when it was appropriate to do so.

In order for the council to accept a safeguarding adults referral there must be information to support actual abuse has occurred or there is a likelihood that the person will experience abuse if we do not investigate under the safeguarding adults policy.

**What immediate action has been taken to safeguard the adult at risk?:** When making decisions about whether the Local Authority should be undertaking a safeguarding adults investigation managers are required to consider the type of abuse identified above against the immediate actions undertaken to safeguard the adult at risk.

The following is not an exhaustive list of the types of actions that could be undertaken in response to identifying a safeguarding concern, but some examples include:

- Immediate suspension of a staff member, commencement of disciplinary process, etc
- GP review in response to a medication error
- Referral to specialist health practitioners in response to identified medical needs: TVN's, dietician, GP, etc.
- Review of the person's support needs, care plans, risk assessments etc.
- Increase in staffing levels.
- Staff training needs that have been identified.

**If a crime was suspected the expectation is that the police would be contacted in the first instance as they will lead on any criminal investigations.**

Without this level of information the Local Authority is unable to effectively assess if the appropriate actions have taken place in response to a safeguarding concern being raised.

This could result in situations progressing through the safeguarding process when it is not necessary.

Providing this type of information also supports the underpinning philosophy of the safeguarding adults policy and procedure, which is that safeguarding is everyone's business and the responsibilities of the alerting manager extends beyond the actions of raising a safeguarding adults alert.

**What are the person's views? What outcomes do they want from the safeguarding alert?:**

Person centred practice and personalisation clearly set the principles that underpin safeguarding adults work and to effectively embed this, it is crucial that people are asked for their views on the incident when making a safeguarding adults alert. This will support the Local Authority to reach a decision about how to proceed with a Safeguarding adults alert and will ensure people who are risk of abuse are seen as equal partners in the process and can actively contribute to the actions that are required to make themselves (and others where appropriate) feel safer.

Without asking this information the risk is that people will be subject to a safeguarding adults process that they have little control over, that does not meet their expectations and does little to make them feel safer as a result of safeguarding activity.

When doing this the alerting manager will be give careful consideration to how you speak to people about passing the safeguarding alert to the Local Authority as a number of people would not want to make a fuss, or want anyone to get into trouble.

Therefore the person who has this discussion should be mindful of who the best person is to undertake such a discussion (within the 24 hour time period) and also be mindful of explaining the statutory requirements placed on them by the essential standards of care that are regulated by CQC and the expectations placed on provider managers by the safeguarding policy to raise an alert.

Dated 8<sup>th</sup> November 2013

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