**Safeguarding Agenda**

**Safeguarding Discussion**

*(001 - For use by SAM to record on LAS)*

*Where enquiries are simple, single agency enquiries it may not be necessary to hold a meeting. Action should never be put on hold, due to the logistics of arranging meetings. Proportionality should be the guiding principle.*

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| **Name of Safeguarding Adults Manager (SAM)** |
| **Name of Safeguarding Officer:** |
| **Name of Adult at Risk:**  | **Liquid Logic ID:**  |
| **Date of concern:** |  |

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| **Background information.***Details of the safeguarding concern and any additional fact finding information* |

*Please ensure that all people contacted are aware of the need for confidentiality. Safeguarding discussions can be face to face, by email or telephone or a combination of all three. Please include the name, title and contact details along with the time and the date contacted.*

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| **Discussion with the adult at risk.*** *Has consent to share information been sought from the adult at risk*
* *The views and wishes of the adult at risk, including what outcome they would like as a result of the concern and their views on safeguarding enquiry plan*
* *If a crime has been committed does the adult at risk agree to police involvement? (note reasons why police report or information sharing may still be undertaken)*
* *Has medical treatment been given and is their need to preserve forensic evidence*
* *Is there a public interest or a vital interest*
* *Are there any concerns regarding the person’s ability to make decisions linked with the safeguarding process that would necessitate the need for a capacity assessment and best interest decisions*
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| **Discussion with family, friends and neighbors.** *Please note this should be with the permission of the service user or in their best interest if they do not have capacity to agree to such contact.* |
| **Discussion with other practitioners or professionals**.  *For example, provider organization, voluntary groups, social worker/care coordinator, the police, medical professional, lead CQC, IMCA, DoLS/Mental Capacity Manager, Safeguarding Team, other care teams, placing authority, contract managers for personal budgets, contracts dept.* |

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| **Safeguarding Plan and risk assessment***Has the adult at risk agreed and been part of the safeguarding plan and risk assessment? If it has not been possible to include the adult at risk please state why. Please include any other family members, friends or professionals that have been consulted in drawing up the risk assessment and safeguarding plan***Immediate risks****Actions to address risk****Risks to other adults at risk or children** |

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| **Agreed Next Step*** **Closure of the safeguarding process** This may be for a number of reasons but should be in agreement with the adult at risk (i.e. no risk of abuse, person does not have need for care and support). In some cases the adult at risk does not consent to a safeguarding enquiry and there is no public interest. In these cases further action may be required, such as safeguarding planning or sign posting to other services.
* **Refer to another team –** Fact finding has been completed and concern is passed to the appropriate team to proceed.
* **Agreement to hold a safeguarding adults meeting**. This should be proportionate and based on the potential risk to the person being harmed or the risk to others. Safeguarding meetings may be needed, for example, where there are complex enquiries and a number of actions to be taken by others to support the outcome
* **Enquiry plan** If it is agreed that a safeguarding meeting is not required but the concern requires an enquiry plan, agree the terms of reference for this.
* **Advocacy**. Has the adult at risk identified a person they would like to act as their advocate and are there any capacity issues related to the safeguarding process?
* **Person causing harm is an adult at risk or carer.** Ensure that consideration has been given to their support needs, both as part of the safeguarding process and in general.
* **Communication and equality issues**
* **Other actions** Detail any actions taken.
* Are there other adults or children potentially at risk and what actions have been taken to address this
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| **SAM:** |
| **Date Completed:** |
| **Enquiry Officer:** |
| **Signed:** |