

Adult Safeguarding – Adult Incident or Concern Report Form

To be completed as fully as possible if you have concerns regarding any vulnerable adult or adult at risk.

If it is safe to do so, it is important to inform the adult about your concerns and to tell them that you have a duty to pass the information onto the National Safeguarding Officer (NSO). You should also discuss with the adult what they want to happen and the outcome they would like. The NSO will then look at the information and start to plan a course of action.

Section 1 – Details of the adult you have concerns about				
Name of adult				
Address				
Date of Birth/ Age				
Contact number				
Emergency contact if known				
Consent to share information				
with emergency contact?				
Section 2 – Details of the person completing this form/ Your details				
Name				
Contact phone number(s)				
Email address				
Line manager or alternative				
contact e.g Federation				
Safeguarding Officer or Club				
Chairman				
Name of organisation / club				
Your Role in organisation				

Section 3 – Details of concern		
Please explain why you are concerned. Please give details about what you have seen/been told/other that makes you believe the adult is at risk of harm or is being abused or neglected (include dates/times/evidence from records/photos etc.)		
Date/ Time	What happened	
Section 4 - Have you discussed your concerns with the adult? What are their views,		
What have they said abo	ut what they want to happen and what outcomes they want?	
Section 4A – Reasons for	not discussing with the adult	
Discussion would put the	adult or others at risk. Please explain:	

Adult appears to lack me	Adult appears to lack mental capacity. Please explain:				
Adult unable to commun	icato thoir vious Plaasa avalain:				
Addit dilable to commun	Adult unable to communicate their views. Please explain:				
Section 5 – Details of the	person thought to be causing harm (if known)				
Name					
Address					
Date of Birth/Age					
Connection to adult or					
relationship.					
Role in organisation					
Do they have contact					
with other adults at risk					
in another capacity?					
E.g. in their					
work/family/as a					
volunteer					
Section 6 – Risk to others					
Are any other adults at ri	sk Yes/No/Not known – delete as appropriate.				
If yes, please fill in another of these forms for each person, answering questions 1-6					
Are any children at risk	Yes/No/Not known (Delete as appropriate)				
If yes, please fill in a safeguarding children incident report form and attach to this.					
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Section 7 – What action have you taken if any /agreed with the adult to reduce the risks?				
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Actions by club: e.g. person	causing harm suspended, se	ession times changed.		
Section 8: Other agencies contacted	Who has been contacted/reference number/contact details/advice gained/action being taken			
Police				
Ambulance				
Other – please state who an	d why:			
Section 9: Contact with Club	Welfare/Safeguarding Office	cer or others within the club		
		e reason for information sharing?		
Consultation with National Safeguarding Officer		Dates and times		
Completed Form copied to N	NSO; Date and time			
Signed:				
Date:				

NSO USE ONLY
Section 10 – Sharing the concerns (To be completed by National Safeguarding Officer)
Details of your contact with the adult at risk of harm. Have they consented to information being shared outside Croquet England?
Details of contact with the Local Authority Safeguarding Team/MASH where the adult at risk of harm 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: