

Appendices

Appendix 1 - Safeguarding Adults Report Form

To be completed as fully as possible if you have concerns regarding an adult.

If it is safe to do so, it is important to inform the adult about your concerns and that you have a duty to pass the information onto the safeguarding lead. The Safeguarding Lead will then look at the information and start to plan a course of action.

Section 1 – Details of 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				
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 5 – Details of the person thought to be causing harm (if known)				
Name				
Address				
Date of Birth/Age				
Relationship/connection to adult				
Role in organisation				
Do they have contact with				
other adults at risk in				
another capacity? E.g. in				
their work/family/as a				
volunteer				
·	ed your concerns with the adult? What are their views,			
What have they stated about what they want to happen and what outcomes they				
want?				



Section 6A – Reasons for not discussing with the adult			
Discussion would put the adult or others at risk. Please explain:			
Adult appears to lack mental capacity. Please explain:			
Adult unable to communicate their views. Please explain:			
Section 7 - Risk to others			
Are any other adults at risk Yes/No/Not known – delete as appropriate			
If yes please fill in another form answering questions 1-6			
Are any children at rick Veg/No/Not known Delete as appropriate			
Are any children at risk Yes/No/Not known Delete as appropriate			
If yes please fill in a safeguarding children referral form and attach to this.			
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Section 8 – What action have you taken if any /agreed with the adult to reduce the			
risks?			
TIORO.			
Actions by club: e.g. person causing harm suspended, session times changed.			



Section 9: Other agencies	Who contact	ed/reference number/contact		
contacted	details/advice gained/action being taken			
Police				
Ambulance				
Other – please state who and	why:			
Section 10: Contact with Welfa	re Officer/othe	rs within the club		
Who else has been informed o	of this issue? –	and what was the reason for information		
Consultation with Safeguarding Lead		Dates and times		
Completed Form copied to Safeguarding Lead; Date and time				
Signed:				
Date:				

OFFICE USE ONLY

Section 11 – Sharing the concerns (To be completed by Safeguarding Lead)

Details of your contact with the adult at risk of harm. Have they consented to information being shared outside of British Taekwondo Council



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: