



Allegations against a Person in a Position of Trust (PIPOT) with Adults with Care and Support Needs Referral Form

This referral applies to allegations or concerns raised about a person, whether an employee, volunteer or student, paid or unpaid who works with or cares for adults with care and support needs.

On completion, this document is not to be uploaded or stored on any electronic record system. When completed this referral is the sole property of Wigan Safeguarding Adults Team and will be processed and stored in line with data protection and GDPR requirements. Any requests for data held will be considered in line with the PiPoT policy.

Criteria for PiPoT:

Tick all those that apply:

The PiPoT's own work/voluntary activity (with Adults and/or Children) (for example where a worker or volunteer has been accused of the abuse or neglect of an Adult who may have care and support needs, or a child/young person)	
The PiPoT's life outside of work i.e. concerning adults with care and support needs in the family, social circle (for example where a son is accused of abusing his older mother and he also works as a domiciliary care worker with adults with care and support needs. Or where a woman is convicted of grievous bodily harm and also works in a residential home for people with learning disabilities)	
The PiPoT's life outside of work i.e. concerning risks to children and young people, the individual's own children or other children (for example where a woman who works in-a host authority with women who suffer domestic abuse and lives in the neighbouring authority is subject to child protection procedures involving her own children due to domestic abuse by her husband)	

And the person has:

Behaved in a way that has harmed or may have harmed an adult with care and support needs.	
Possibly committed a criminal offence against or related to an adult/s with care and support needs.	
Otherwise behaved towards an adult with care and support needs or in a way that indicates s/he is unsuitable to work with adults with care and support needs.	
May be the subject to abuse themselves which means their ability to provide a service to adults with care and support needs must be reviewed.	
Behaved in a way which questions their ability to provide a service to an adult with care and support needs which must be reviewed e.g. conviction for grievous bodily harm against someone who is not an adult with care and support needs.	

Section 1: Person In Position Of Trust Details

Surname:		First Name:	
DOB:		Gender:	
Home Address			
Tel. No			
Current Address (if different)			
Organisation & address Person in Position of Trust works/volunteers for:			
Is the Organisation named above CQC registered?	Y/N		

Title and Role of Person in a Position of Trust:	
Does the Person in Position of Trust have a Professional Registration? <i>(e.g NMC, HCPC, GMC, Social Work England, Teachers regulations etc.)</i>	Y/N State: NMC / HCPC / GMC / (specify)
Manager Contact Details at Employing Organisation:	Name: Address: Email: Telephone:
Current employment status:	Employed/self-employed/volunteer/unemployed (specify)
Has this person been referred to PiPoT before? When? What were the concerns and the outcome? e.g. managed as an advice issue or went to PIPOT Meeting	Y/N
Does the Person in Position of Trust know you are making this referral?	Y/N
If not, why? (Please note there may be situations where the adult may be placed at greater risk if the PiPoT is informed immediately)	

Section 3: Incident/Concern Details

Description of incident / concerns:	
Was the victim a child or adult with care and support needs?	Child / Adult with care and support needs / Other (please state)
Are there adult or children's safeguarding procedures currently in process, if so; where?	Y/N
Police Crime Reference Number (if applicable)	

Section 4: Alleged Victim's details

Full Name of alleged Victim	<i>If there is more than one, or multiple, alleged victims please complete details on continuation sheet.</i>		
Gender	Male / Female (please circle)	Date of Birth	
Current/Past Local Authority Involvement	Are they in receipt of formal service provision?		
If alleged Victim is a child or young person please state parent / guardian name and DOB			
Relationship with Person in Position of Trust:			

Section 5: Referrer Details

Surname		First Name/s	
Position		Email Address	

Agency		Tel. No/Mobile	
Address			

Section 5: Invite List

Please provide names of key individuals and the PiPoT lead will need to consider who to invite to the PiPoT meeting.

Job role/ title	Name and Job Role	Organisation	Telephone Number	Email Address
Referrer Details here				

Reference adapted from:
 Birmingham Safeguarding Adults Board in conjunction with conjunction with West Midlands Adult Policy and Procedures (2015) <http://www.bsab.org/media/PIPOT-Protocol-Final-Feb-16.pdf>

Completed referrals email to: dutysteam@wigan.gov.uk