

## SAFEGUARDING REFERRAL CHECKLIST

**Report Safeguarding Concerns online [here](#)  
Or by phone on 01942 828777**

All referrals to safeguarding are considered, even if some information is missing, but it helps to have as much of the information below as possible to protect people at risk. Referrers can remain anonymous if they prefer.

Checklist	Essential	Desirable
<b>Your Details</b>		
<b>Name</b>	✓	
<b>Telephone Number</b>	✓	
<b>Email Address</b>	✓	
<b>Organisation</b>		✓
<b>Relationship</b> to the person you are concerned about	✓	
<b>Adult at Risk</b>		
<b>Name</b>	✓	
<b>Address</b>	✓	
<b>Contact details</b>		✓
<b>Communication needs</b>	✓	
<b>Date of Birth</b>		✓
<b>Gender</b>	✓	
<b>GP details</b>		✓
<b>Consent – <i>Remember: Consent can be overridden</i></b>		
<b>If the person at risk is aware</b> that you are raising this referral	✓	
<b>If the person at risk has agreed</b> to you raising this referral	✓	
Details relating to why the person at risk didn't agree <i>(NB: may include that it was not appropriate to speak to the individual)</i>	✓	
Details of reason to <b>Override consent</b>	✓	
<b>Capacity</b> of the person at risk to agree to the referral	✓	
<b>Whether the person at risk is being supported</b>	✓	
<b>Concern</b>		
<b>If the person at risk continues to be at risk</b>	✓	
<b>Type of abuse</b>	✓	
<b>Source of possible risk or abuse</b>	✓	
<b>Location / setting of risk / incident</b>	✓	
<b>Abuse</b>		
<b>Date and Time</b> of abuse	✓	
<b>Factual details</b> of the incident	✓	
• The <b>context of why you are concerned</b>		✓
• Any <b>other information related to risk</b>		✓
• Information from any <b>discussion you have had with the person at risk</b>		✓
• Information about <b>other agencies you have spoken to / are involved</b>		✓
• Any <b>other referrals</b> that have been made in relation		✓
• The potential <b>care and support needs</b> of the person at risk		✓
• If the adult at risk is a parent/guardian to any <b>children</b>		✓
• If the adult at risk is a <b>carer</b> for another adult		✓
Details of any <b>injuries</b>	✓	
Any <b>actions already taken to safeguard</b> the individual	✓	
Any <b>medical intervention</b> required	✓	
Were they seen by a <b>GP</b>	✓	
Were they taken to <b>hospital</b>	✓	
<b>Risk Source (alleged)</b>		
<b>Name</b>		✓
<b>Address</b>		✓
<b>Date of Birth</b>		✓
<b>Organisation (if this is a professional)</b>		✓
<b>If they live with the person at risk</b>	✓	
<b>If they are a carer for the person at risk</b>	✓	
<b>If they are aware that a safeguarding referral has been made</b>	✓	