

Allegations against People Who Work in Positions 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. These individuals are known as People in Position of Trust (PiPoT) and the process is the Position of Trust (PiPoT) process.

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 Project5 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.

Section 1: Referrer Details

Date of Referral sent:		Date of Alleged Incident:	
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Surname		First Name/s	
Position		Email Address	
Agency		Tel. No/Mobile	
Address			

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 2: Person in a Position of Trust Details

Surname:		First Name:	
DOB:		Gender:	
Home Address			
ID Number		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		
Job Title and Role of Person in a Position of Trust:			
Does the Person in Position of Trust have a Professional Registration? (e.g NMC, HCPC, GMC etc.)	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)		

<p>Has this person been referred to the PiPoT Lead before?</p> <p>When? What were the concerns and the outcome?</p> <p>e.g. managed as an advice issue or went to POT Meeting</p>	Y/N
<p>Does the Person in Position of Trust know you are making this referral?</p>	Y/N
<p>If not, why? (Please note there may be situations where the adult may be placed at greater risk if the PiPoT is informed immediately)</p>	

Section 3: Incident/Concern Details

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

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	<i>Are they in receipt of formal service provision?</i>		
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: Invite List

Please provide names of key individuals connected to the alleged person in a Position of Trust as 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
Supervisor/Line manager				
HR/Personnel				
Provider Manager				
Police Contact				
Contract and commissioning contact for provider				
CQC for provider				
Health Professional				
Others				

Please provide names of key individuals connected to the alleged victim(s) as 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
Social Worker				
Health Professional				
Advocate				
Voluntary Agency				
Contract and Commissioning contact for provider				
Others				

Completed referrals email to:

Designated Safeguarding Officer www.support@project5.com