

ADULT SAFEGUARDING 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 (at risk) about your concerns and that you have a duty to pass the information onto the Club Welfare Officer/UKA Safeguarding Team.

Complete as much of the form as you can with the information available

Section 1 – Details of adult (you have concerns about)

Name	
Address	
Date of birth/age	
Contact phone number(s)	
Emergency contact if known	

Consent to share information with emergency contact? Yes No

Section 2 – Details of the person completing this form/your details

Name	
Contact phone number(s)	
Email address	
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.)

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Section 4 – Details of the person thought to be causing harm (if known)

Name	
Address	
Date of birth/age (if known)	
Relationship/connection to adult	
Name of organisation/club	
Role in organisation/club	

Do they have contact with other adults at risk in another capacity (e.g. in their work/family/as a volunteer)?

Section 5 – The views of the adult you have concerns about

Have you discussed 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 6 – Reasons for not discussing with the adult

For example, discussion would put the adult or others at risk/adult appears to lack mental capacity/ adult unable to communicate their views.

Section 7 – Risk to others

Are any other adults at risk? If yes, please add details here based on sections 1–6 above.

Are any children at risk? If yes, please add details here.

Section 8 – Club action

What action have you taken if any/agreed with the adult to reduce the risks? (e.g. person causing harm suspended/session times changed).

Section 9 – Other agencies contacted

Who contacted/reference number/contact details/advice gained/action being taken.

Police

Local Authority Safeguarding Adults Team

Other – please state who and why:

Section 10 – Submit the form

Send this form to your Club Welfare Officer (welfare@lingfieldrunningclub.co.uk) and/or to the UKA Safeguarding Team - safeguarding@uka.org.uk