**HSAB Joint Case Review Subgroup**

**Case for Consideration**

On completion please send to the Partnership Team ([admin.sbu@herefordshire.gov.uk](mailto:admin.sbu@herefordshire.gov.uk)).

The Partnership Team will circulate to all sub group members who will research information held by their agency and come fully prepared to a rapid review meeting with sufficient information and analysis to support a final decision at the first meeting about whether a SAR needs to be commissioned and, if not, to agree what other action needs to be taken.

**SECTION 1 -** TO BE COMPLETED BY THE REFERRER

Contact details of individual / agency completing this form

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| **Name** | **AGENCY & DESIGNATION/TITLE** | **CONTACT DETAILS – Address, telephone number and e-mail address** |
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| --- | --- | --- | --- |
| **Name of adult to be considered:** |  | | |
| **Also known as:** |  | | |
| **NHS number:** |  | | |
| **D.O.B:** |  | | |
| **Protected Characteristics (please complete where known)** | Age: | Disability: | Gender: |
| Marriage: | Race: | Religion: |
| Sex: | Sexual Orientation: | Pregnancy/Maternity: |
| **D.O.D (if relevant):** |  | | |
| **Home Address:** |  | | |
| **Any previous addresses:** |  | | |
| **Significant others:** |  | | |
| **Their home address:** |  | | |
| **Explain why the case is being referred to the JCR sub group.**   * What serious harm\* has come to the person * What are the concerns about how local services have safeguarded the person |  | | |
| **Date form completed:** |  | | |

\*Something can be considered serious abuse or neglect where, for example the individual would have been likely to have died but for an intervention, or has suffered permanent harm or has reduced capacity or quality of life (whether because of physical or psychological effects) as a result of the abuse or neglect.

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| **About this referral** | | |
| **Which of the following Care Act s44 Criteria does this case meet? Tick all that apply** | | |
| The **adult has needs for care and support** (whether or not the local authority has been meeting any of those needs) | |  |
| There is **reasonable cause** for concern about how the Safeguarding Adult Board, members of it or other persons with relevant functions **worked together** to safeguard the adult. | |  |
| The adult has **died** and you know or suspect that the death resulted from abuse or neglect (whether or not it knew about or suspected the abuse or neglect before the adult died). | |  |
| The adult is **still alive** and you know or suspect that the adult has experienced serious abuse or neglect. | |  |
| Please state why you think this person should be considered for a Safeguarding Adults Review?  *(Please include any relevant historical information, section 42 enquiries and outcomes)* |  | |
| Agencies believed to be involved |  | |
| Was the person previously known to Social Care? |  | |
| Any other information relevant to decision about whether or not to instigate a SAR |  | |
| Criteria for SAR  *(a) there is reasonable cause for concern about how the SAB, members of it or other persons with relevant functions worked together to safeguard the adult, and*  *(b) condition 1 or 2 is met.*  *(2) Condition 1 is met if—*  *(a) the adult has died, and*  *(b) the SAB knows or suspects that the death resulted from abuse or neglect (whether or not it knew about or suspected the abuse or neglect before the adult died).*  *(3) Condition 2 is met if—*  *(a) the adult is still alive, and*  *(b) the SAB knows or suspects that the adult has experienced serious abuse or neglect.*  *(4) An SAB may arrange for there to be a review of any other case involving an adult in its area with needs for care and support (whether or not the local authority has been meeting any of those needs).*  *(5) Each member of the SAB must co-operate in and contribute to the carrying out of a review under this section with a view to—*  *(a) identifying the lessons to be learnt from the adult’s case, and (b) applying those lessons to future cases.* | | |