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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Date of Referral:** | | | | | | | |
| **Name of Person Referring:** | | |  | | | | |
| **Dept and Role of Person Referring:** | | |  | | | | |
| **Contact Number and Email of Person referring:** | | |  | | | | |
| **Name of Student(s) at Risk**  (If there is more than one student linked to this risk please name them and please include all student identification numbers): | | |  | | | | |
| **Student Contact Number:** | | |  | | | | |
| **Student Accommodation:**  (If known please include their status i.e. private halls or HMO or family home etc…) | | |  | | | | |
|  | | | | | | | |
| **Is the student at risk or involved parties subject to the Student Disciplinary Process or any other relevant proceeding such as a criminal investigation or judicial process?**  (Please include as much detail as is known) | | | |  | | | |
| **Communication:**  How best to communicate with the person being referred. Please note here factors such as language, sensory impairment, memory issues, anxiety issues, speech issues.  Please also note if the adult has someone who acts as advocate for them and if so, on what basis. | | | |  | | | |
|  | | | | | | | |
| **Does the student (s) know you are making the referral: Yes/No** (please delete accordingly)  **If ‘yes’, has the adult being referred consented to the referral?** (where viable please obtain this consent in writing/email/text etc..)  **If ‘no’ please detail reason**  A referral can still be made without an adult’s knowledge if you think there is a significant or immediate risk of harm to self or to others that requires it to be expedited. | | | |  | | | |
|  | | | |  | | | |
| **Summary of Reason for Referral:**   1. Please include as many specific details known to you regarding what you deem the safeguarding risk to be. 2. Is the student immediately at risk or is a mechanism in place to keep them safe in the immediate hours? How have you made this assessment of safety, please identify if you/or another has called for an emergency response e.g. ambulance or Police or mental health crisis support? 3. Are there any other adults at risk or with care and support needs or children impacted upon by the concern? If so, who are they and what is the possible impact on them and are they at immediate risk? 4. If there is a third party involved/alleged perpetrator? Are they a student at Solent University or accommodated with the student at risk? | | | | | | | |
| **Please write detail here** | | | | | | | |
| **Please tick relevant boxes regarding nature of risk that is present:** (more than one can be ticked) | | | | | | | |
| Mental Health e.g. suicide ideation, self-harm |  | Risk of/or indicators of sexual exploitation | | |  | Risk of or indicators of self- neglect e.g. extreme hoarding, deteriorating physical presentation |  |
| Alleged victim/perpetrator of Sexual Offence |  | Risk of/or indicators of sexual exploitation | | |  | Alleged victim/perpetrator of physical Harassment, stalking or malicious communications |  |
| Alleged victim/perpetrator of a Violent Offence |  | Risk of/or indicators of financial exploitation | | |  | Alleged victim/perpetrator of Domestic Abuse including violence, financial, emotional and psychological and coercive and controlling behaviour (CCB) |  |
| Risk of or indicators of extremism/ radicalisation (include online behaviours)  **(of note this may result in a Prevent referral)** |  | Risk of neglect/acts of omission by another e.g. the adult has care and support need and there is a care provision (paid or unpaid) | | |  | Alleged victim/perpetrator of online offending e.g. harassment, stalking malicious communications, intimidation, revenge porn, unwanted sexual images, accessing pornographic or sexual images that are a risk to children |  |
| Missing or long-term absence prompting a safeguarding concern |  | Risk of harm due to a threat linked to a protected characteristic e.g. hate crime | | |  | Other…. (please specify) |  |

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| **Other agencies or professionals involved/supporting the adult:**  (please include name, role and contact details where known) | | | **Why do we ask this?**  Being clear about information sharing is crucial in adult safeguarding work.  We need to ensure the person being referred has support from their family/ friends but also that we do not breach their confidentiality.  If there are key things about information sharing e.g. the adult being referred has expressed wishes about who does/ does not know about the concern, please note this. |
| **Name** | **Role** | **Contact number and email** |
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**Safeguarding Referral Information and Guidance**

**1.0 Introduction**

**1.1** Solent University has a duty of care to deliver its education and pastoral services to a high standard and in carrying out its services and functions to act reasonably to protect the health, safety and welfare of its students. The Solent University Safeguarding Manager and Student Experience team are in place to support you with any safeguarding concerns that may be raised to your attention and take the relevant actions to support mitigation of potential risk.

**2.0 Purpose**

**2.1** There will be times when as course leaders or staff you are made aware of an incident or situation which may cause you concern for a student or group of students. To enable as much clarity as possible the Safeguarding Referral Template is in place to enable a smooth referral process into the Safeguarding Manager and on occasion the wider Student Experience team (dependent on the student (s) need).

**2.2** This form is an essential document and is not intended to be onerous, much of it is tick box or yes/no answers and the reason for this is to provoke thought and consideration as to what the safeguarding issue or risk is. This information is critical to enable informed and robust decision making regarding next steps, particularly it allows the Safeguarding team to see if there is the potential for imminent risk.

**2.3** It is appreciated that you may not have all the information available to you, in those circumstances you can note in the free text boxes that the information is not known. We would urge you however to fill out as much as possible – this enables us to clearly consider which protective measures are the most appropriate and the best interests of the student and/or the wider University and its student population.

**3.0 Information Gathering and Sharing**

**3.1** Any information gathered will be collated and held within GDPR and Data Protection legislation, however when a safeguarding concern is raised that identifies an adult at risk[[1]](#footnote-1) of harm a decision will be made as to whether this requires onward referral to a third party such as the police or Adult Social Care. Whilst the University is not a specific provider within the Care Act 2014[[2]](#footnote-2) the University applies the principles and furthermore operates under a duty of care to take reasonable steps to prevent harm occurring.

If it is identified that a child is at risk of significant harm[[3]](#footnote-3) as identified under Working Together 2018[[4]](#footnote-4) then a referral will be made to the Multi-Agency Safeguarding Hub within the Local Authority area that the child resides or to the relevant emergency service if there is imminent risk.

* 1. **Making a Referral**

Safeguarding adults can be complex and the needs and wishes of the adult must be identified and respected. Referrers are not expected to understand all elements of Safeguarding however there are some key areas of importance for all staff and volunteers within Solent University:

1. All staff and volunteers should know how to recognise and report a safeguarding concern. Safeguarding is everybody’s responsibility. If there is uncertainty advice can be sought from the Solent University Safeguarding Manager via email at [safeguarding@solent.ac.uk](mailto:safeguarding@solent.ac.uk)
2. When a concern is raised the referrer will be respected and listened to and all suspicions and allegations will be taken seriously. If it is not a Safeguarding referral, we can also support signposting to the most appropriate support service.
3. Wherever possible we would wish to have consent from the adult at risk or ideally, they should be made aware that a referral is being made – in circumstances where this is not possible or if there is a potential risk to self or others then the referral can be made without consent and the Safeguarding Manager will make a decision regarding the next steps.
4. If the adult is not an adult at risk, however they have disclosed that they have been a victim of a serious offence, but do not wish to take further action, please ensure you are up to date with the services that Student Experience offer. You can sign post the student to the support available for example the Therapy and Mental Health Team. The Student Experience team as whole can also provide general advice regarding external agencies that provide support-based services.
5. In an emergency you must report your concern to the relevant statutory agency i.e., police or ambulance. If it is out of hours but not an emergency a referral for adults can also be sent to [adultsocialcareconnect@southampton.gov.uk](mailto:adultsocialcareconnect@southampton.gov.uk) **Telephone:** 023 8083 3003 For children the Multi-Agency Safeguarding Hub <https://www.southampton.gov.uk/health-social-care/children/child-social-care/multi-agency-safeguarding-hub>. If this action is undertaken, please notify the Safeguarding Manager within 1 working day.
6. On receipt of the Safeguarding referral the Safeguarding Manager will seek to clarify the facts as far as able to enable sound decision making regarding next steps. This may also include completing a risk management framework with the person identified to be at risk.
7. If upon receipt of referral the Safeguarding Manager assesses that the information should be passed to a third party i.e., Police, Local Authority, Prevent or other Safeguarding lead you will be notified that this has occurred.
8. Feedback following referral is not always possible, this is to ensure we do not breach confidentiality or legislative requirements. We will however acknowledge the referral and inform you when matters are resolved.

1. An adult at risk is any person who is aged 18 years or over and is at risk of abuse or neglect because of their care and support needs (regardless of whether the care and support needs are being met) and as a result of those needs are unable to protect themselves from either the risk of, or the experience of abuse or neglect [↑](#footnote-ref-1)
2. https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance [↑](#footnote-ref-2)
3. ‘Anyone who has concerns about a child’s welfare should make a referral to local authority children’s social care and should do so immediately if there is a concern that the child is suffering significant harm or likely to do so’. Working Together 2018 [↑](#footnote-ref-3)
4. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file/942454/Working\_together\_to\_safeguard\_children\_inter\_agency\_guidance.pdf [↑](#footnote-ref-4)