Guidance for Professionals using the Portal to complete an online Safeguarding Adults Concern

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Professionals using the 'Sunderland City Council Adult Social Care Information Portal' to complete an on-line Safeguarding Adults Concern

All Professionals who wish to make 'Safeguarding Adults Concern' referrals on-line must do so through the 'Sunderland City Council Adult Social Care Information Portal'. This will replace the current process of completing a Safeguarding Adults Concern Form via a word document and submitting it by Fax, e- mail or post and will enable the Sunderland Adult Social Care Safeguarding Team to respond to referrals in a more timely manner.

Important Note:

The 'Sunderland City Council Adult Social Care Information Portal' **cannot be used** to make personal referrals in a non-professional capacity e.g. as a '**member of public**' or '**on behalf of someone else' as a 'member of public**'. For these two scenarios, the **existing referral process will still apply.**

Important Note:

The information contained in any emails from **Adult Social Care is confidential**. It is intended solely for use by the **recipient** (you) and others authorised to receive it. **If you are not the recipient**, you are hereby notified that any disclosure, copying, distribution or taking action in relation of the contents of this information is strictly prohibited and may be unlawful

How to access the Portal:

1. To access the **Sunderland City Council Adult Social Care Information Portal** you must have access to an Internet Browser e.g. **Chrome, Microsoft Edge or Internet Explorer**:

Internet Explorer

Microsoft Edge

Google Chrome







2. Once you have selected the relevant Internet Browser, copy the following link into the field below: **https://adultsportal.sunderland.gov.uk** into the URL field below:

$\leftarrow \rightarrow$	C	â	0										
Adults nee	eds assess	ن 🌀 🕲	allConfirmLive UAT	Captivate Use	er Guide 🔎 D	ashboard	🧕 Directory	🖰 Home - Elec	tronic 🕒 ICT	🔷 Indicative bu	ıdgets 🖺 Liquid Logic - Adult	. 🔹 Liquid Logic - Busin	🚯 Liquid Logic - Proje
	y n	nsn											
	_										•		-
	0 (Outloo	k.com	ad Am	nazon Assista	ant	f	Facebook	V	Shopping	eBay ad	[] Office	B. Book

3. You will be taken to the **Sunderland City Council Adult Social Care Information Portal** page.

Note: If you select the **Information, advice and support hub** icon, you can also access information regarding the help and services available as held in the **Sunderland Information Point**.

	رم Sunderland City Council
Home Adult Social Care Sunderland Information F	Point My Account Recover a saved form
Welcome to Sunderland City C Information Portal	ouncil Adult Social Care
Your information, advice and support hub for adults	
Information, advice and guidance	Worried about someone?
1	
Information, advice and guidance is available on help and services available – Sunderland Information Point	Report a safeguarding concern

- 4. Select the above Worried about Someone? Icon
- 5. You will be taken to the **Worried about someone?** page. This page contains the following:
- Professionals reporting a safeguarding concern via the Portal. As you are a Professional reporting a Safeguarding Concern via the Portal, you will need to click on the link below. Go to Point 6 below for the 'next steps':

Safeguarding Adults Concern (SAC) form

- Members of Public reporting a safeguarding concern. You must only click on this link if you are reporting a concern as a non-professional and you will be routed to the usual member of public on-line referral which sits outside of the Sunderland City Council Adult Social Care Information Portal

Report a safeguarding concern - members of the public

- Report a safeguarding concern - general information





- 6. BEFORE you complete the Professional Safeguarding Concern form via the Portal, you MUST read the guidance that explains the level of information that is required from you as a Professional to assist the Adults Safeguarding Team to deal with the enquiry. To access this guidance, select the following links:
 - Guidance
 - Report a safeguarding concern information for professionals and volunteers

Home	Adult Social Care	Sunderland Information Vint My Account	Sunderland City Council Recover a saved form
Worri	ed about so	omeone?	
Professi If you are a p <u>concern - info</u>	onals reporting rofessional wishing to re rmation for professionals	g a safeguarding concern via the Po port a safeguarding concern via the Portal, please read th and volunteers for further information.	Of ten ne g <u>uidance</u> and visit <u>Report a safeguarding</u>
lf you need t <u>Safeguardin</u>	o make a safeguarding c g <u>Adults Concern (SAC) fo</u>	oncern referral, click on the link below:	

7. Having read the **Professionals reporting a safeguarding concern via the Portal guidance**, you must select the **Safeguarding Adults Concern (SAC**) form option above.

8. You will be taken to the *How does this tool work* page which provides an overview of how to use the on-line safeguarding concern form. You must read these instructions carefully so that you fully understand how to navigate through the on-line referral form and how to successfully update and submit it to the Sunderland Council Adults Safeguarding Team:

		Sunderland _{City Council}
Home Adult Social Ca	re Sunderland Information Point My Acco	unt Recover a saved form
Worried about	someone?	
How does this tool work? <u>2 Safeguarding Adult</u> <u>Concern Form</u> <u>3 B - Details of the alleged</u> <u>abuse and/or neglect</u> <u>4 C - Further details on the</u> named adult <u>5 D - Alleged perpetrator</u> <u>6 E - Details of the person</u> <u>completing this form</u>	How does this tool work? You can complete this form as a professional on How to Navigate Click on the numbered sections on the left hand side of the window or use the Next → and ← Previous options to move through the pages.	behalf of someone else Progress When progressing through the form, the progress bar
2 E- General information 8 Supporting Documentation 9 Submit	Don't use the Browser 'Back' button The Form ② Questions You DO NOT need to answer every question, you need only complete what is relevant. The form uses many different types of questions, including lists and text fields	 Select the option(s) that best describe your situation. This symbol * indicates that the question is mandatory and must be answered in order to continue.
	Options Save the Form Use the Save for Later option to Save the form to return to at any time.	Print the Form Use the Print option to Print a copy of the form if required.
	<u>Pr</u>	int Save for later Close Cancel

9. To start the completion of safeguarding concern – you can either click on the sections of the form on the left-hand side of the page or you can scroll to the bottom of the information page and **select Next.**

				Sunderland City Council
Home Adult Social Care	e Sunderland Information Point	My Account	Recover a saved form	
Worried about	someone?			
<u>1 How does this tool work?</u>	How does this tool work?			
2 Safeguarding Adult Concern Form	You can complete this form as a profess	ional on beha	alf of someone else	
<u>3 B - Details of the alleged</u> abuse and/or neglect	How to Navigate	P	rogress	
4 C - Further details on the named adult	Click on the numbered sections on the hand side of the window	left	When progressing through the f progress bar	form, the
5 D - Alleged perpetrator	or			37% complete
<u>6 E - Details of the person</u> completing this form	use the Next A and	ns to	will show you how far through c form you are.	ompleting the
7 F - General information	Don't use the Browser 'Back' button			
8 Supporting Documentation	The Form			
<u>9 Submit</u>				
	(?) Questions		 Select the option(s) that your situation. 	best describe
	You DO NOT need to answer every ques you need only complete what is relevant	tion,	This symbol ★ indicates that th	he question is
	The form uses many different types of questions, including lists and text fields		mandatory and must be answer continue.	ed in order to
	questions, including lists and text netus			
	Options			
	Save the Form		Print the Form	
	Use the Save for Later option to Save	the	Use the Print option to Print form if required. 9	a copy of the
	torin to retain to at any one. 💆			
				Next ->
		Print	Save for later Close	<u>Cancel</u>

- 10.If you are registering for the first time as a Professional to make the online Safeguarding Concern, then go to the section below: **Professionals Registering for a New Portal Account**
- 11.If you have already registered and your account has been verified by Sunderland Council Safeguarding Team, click on the following link for instructions on how to log on as an existing user: **Professionals logging onto the Portal as an 'Existing User'**
- 12. **Important Note:** The Sunderland Safeguarding Portal will recognise you by your email address that you initially logged in with that was registered with the Safeguarding Team and allowed you to be verified as a professional. Therefore, if you use a different email address to this, you will be treated as 'a new professional' and you will be forced to go through the registration process again in order to be verified as a professional. Therefore, you should always use the same **professional email address**, UNLESS you have valid reason for doing so e.g. new role/job.

Professionals Registering for a New Account:

<u>3 B - Details of the alleged</u> abuse and/or neglect	For notification of suspected or actual abuse or neglect to an individual
<u>4</u> <u>C - Further details on the</u> <u>named adult</u>	person Please do not save a copy of this form to use as a template on your own storage area as this form will be updated as and when required; any copies you hold may be out of date, and, if submitted, will slow the
5 <u>D - Alleged perpetrator</u>	process of raising the concern.
<u>6</u> E - Details of the person completing this form	For further information, docu nents and guidance to support the completion of this form, please access the <u>Sunderland City Council Vebsite</u>
<u>7</u> <u>F - General information</u>	A - DETAILS OF THE ADULT ALLEGED TO BE EXPERIENCING OR AT RISK
8 Supporting	OF ABUSE AND/OF NEGLECT (NAMED ADULT)
<u>Documentation</u> <u>9 Submit</u>	In order to progress with this form you must either log in or complete a simple registration for a new account. You can then continue to complete this form. This will enable you to track the form at a later date.
	Login or Register

1. Having selected **Next**, there is the option to **Login or Register**.

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2. **Important information**: Professionals accessing the Portal for the first time **must register in order to continue**. This can be completed by selecting **Register for new account**:

ſ

l ew to Adult Social Care Information Portal? <u>Register for an a</u> elow. Iready using Adult Social Care Information Portal? Sign in be	<u>ccount here</u> or use the button low.
Existing users Email	New users If you're new to Adult Social Care Information Portal, sign up for an accoun here
Password For additional security, we will confirm your account by sending an authentication code to your email address.	Register for new account

3. **Step 1** - The next screen will ask for 'Forename' and 'Surname' information – you must enter **YOUR DETAILS** as you are the '**Professional' registering for the Portal account.**

Register a new account - step 1	
Forename *	
Joe	
Surname *	
Bloggs	
□ Is this account being used in a professional capacity?	
Property name	
House no	

4. Having completed the Forename and Surname sections, as the professional you MUST select the box next to **Is this account being used in a professional capacity?** By selecting this, the adddional fields will change to enable you to input your **Job Role** and **Organisational details**.

Forename *			
Joe			
Surname *			
Bloggs			
✓ s this account be	ing used in a professio	onal capacity?	
Role *			
for example, socia	al worker, doctor, etc		
Organisation *			

5. **Please note:** any field displaying a red asterix * denotes that this is a **mandatory field** and MUST be completed in order to progress with the referral. If you try to leave these fields blank, when selecting **Next**, prompts will show that information is required before moving to next step of the process:

Role *	
for example, social worker, doctor, etc	
This field is required.	
Organisation *	
This field is required.	

6. Once all information is input, select **Next** at the bottom of the screen enabling **Step 2** of the registration process to be completed:

← Previous				[Next 🗲
	Print	Save for later	Create PDF	Close	Cancel

 Step 2 – This screen will ask for your e mail address and password information. Note: This must be your PROFESSIONAL EMAIL ADDRESS e.g. joe.bloggs@sunderland.gov.uk

You cannot use your personal email address to make referrals in a professional capacity

	Dessuerd selies
Email address *	Password policy
	Your password must meet the following requirements:
Password *	It must be at least 12 characters lor
	 It must contain at least one letter It must contain only letters, digits,
	and special characters
Confirm password *	It must contain at least one upper- case letter
	It must contain at least one
	numerical digit It must contain at least one special
Back Next Cancel	character.
	Click here to see the list of special
	characters'

8. Having entered your email address, a password must be created. You must comply with the following Password Policy:

It must be at least 12 characters long

- It must contain at least one letter
- It must contain only letters, digits and the following characters:@#\$%&*
- It must contain at least one upper-case letter
- It must contain at least one numerical digit

Lindi duuless	Password policy
joe.bloggs@sunderland.gov.uk	Your password must meet the following
Password *	It must be at least 12 characters long It must contain at least and letter
4	It must contain at least one letter It must contain only letters, digits,
The password must be at least 12 characters long	and special characters It must contain at least one upper-
Confirm password *	case letter
	It must contain at least one numerical digit
Please confirm your password	It must contain at least one special character.

9. Selecting this icon will enable you to see the password that you are entering into the **Password** and **Confirm Password** fields so when you can be confident that you have not made a typo.

10. Select Next to move onto Step 3.



Liquidlogic

11. **Step 3** – An automated email from noreply@sunderland.gov.uk will be sent to your email address that you provided in 'Step 2' of the registration process. This email will contain a secure unique eight-digit verification code:

Retention Policy 90 Dear Joe Bloggs,	Days Mailbox Item Retention (90 days)	Expires 12/12/2021	
Thank you for using	Adult Social Care Information Portal. F	ease enter the following code on the login verificatio	n page:
9274 7893			
Kind regards			
Adult Social Care Inf	ormation Portal		

12. Return to the portal and enter this code into the **Code** field:

We have just sent you an email to confirm your account. Please enter the code this contains below.	Please sent y	e enter the verification code that we ou.
If you can't find this email, it may be in your spam/junk email folder.		
Code		
1313 9717		

13. Select Next



14. The following screen will confirm that the Registration has been Completed

Registration Completed	
Your registration has been completed successfully. Click Continue to carry on with your session.	

15. Select Continue. You are now ready to complete the Online Safeguarding Adults Concern Form.

To go to the next stage of this process click on the following link: General Navigation Rules for completing the Online Safeguarding Adults Concern Form:

Professionals logging in as an 'Existing User'

 To log in as Professional as an Existing User, you must firstly log onto the Sunderland Adult Social Care Safeguarding Portal. For guidance on how to do this, click on the following link: How to access the Portal

Important Note: The Sunderland Safeguarding Portal will recognise you by your email address that you initially logged in with that was registered with the Safeguarding Team and allowed you to be verified as a professional. Therefore, if you use a different email address to this, you will be treated as 'a new professional' and you will be forced to go through the registration process again in order to be verified as a professional. Therefore, you should always use the same **professional email address**, UNLESS you have valid reason for doing so e.g. new role/job.

2. Providing that have already registered and verified by the Sunderland Safeguarding team as a Professional you can log into the Sunderland Adult Care Information Portal as an **Existing User**.

Vorried about	someone?
1 How does this tool work?	Safeguarding Adult Concern Form
2 <u>Safeguarding Adult</u> Concern Form	Care Act 2014
3 <u>B - Details of the alleged</u> abuse and/or neglect 4 <u>C - Further details on the</u>	<u>For notification of suspected or actual abuse or neglect to an individual person</u>
named adult 5 D - Alleged perpetrator	Please do not save a copy of this form to use as a template on your own storage area as this form will be updated as and when required; any copies you hold may be out of date, and, if submitted, will slow the process of raising the concern.
<u>6 E - Details of the person</u> completing this form	For further information, documents and guidance to support the completion of this form, please access the <u>Sunderland City Council Website</u>
7 F - General information	A - DETAILS OF THE ADULT ALLEGED TO BE EXPERIENCING OR AT RISI
8 <u>Supporting</u> Documentation	OF ABUSE AND/OR NEGLECI (NAMED ADULI)
<u>9 Submit</u>	new account. You can then continue to complete this form. This will enable you to track the forr at a later date.
	Login or Register
	Marital Status:
	Reason the Named Adult is in need of support: *
	← Previous Next-
	Print Save for later Close Cance

3. Select Login or Register

4. Secure login - step 1

- **Existing users:** Enter your **PROFESSIONAL EMAIL ADDRESS** e.g. Joe.Bloggs@sunderland.gov.uk. As you an existing user, Portals will remember your professional email address, select your email when you click into this field
- **Password:** Enter the password that you set initially when you registered as a New User:

Secure login - step 1	
New to Adult Social Care Information Portal? <u>Register for an a</u> below. Already using Adult Social Care Information Portal? Sign in be	<u>ccount here</u> or use the button low.
Existing users	New users If you're new to Adult Social Care
Email	Information Portal, sign up for an account
joe.bloggs@sunderland.gov.uk	
Password	Register for new account
For additional security, we will confirm your account by sending an authentication code to your email address.	
Submit Cancel	
Forgotten password?	

5. **Select Submit.** An automated email from noreply@sunderland.gov.uk will be sent to your email address. This email will contain a secure unique verification eight-digit code:

Retention Policy 90 Dear Joe Bloggs,	Days Mailbox Item Retention (90 days) Expires 12/12/2021
Thank you for using	Adult Social Care Information Portal. Please enter the following code on the login verification page:
9274 7893	
Kind regards	
Adult Social Care Inf	ormation Portal

6. Return to the Portal and enter the 8-digit verification code into the **Code** field:

We have just sent you an email to confirm your account. Please enter the code this contains below.	Please enter the verification code that we sent you.
If you can't find this email, it may be in your spam/junk email folder.	
Code	
Finish Cancel Please send me a new code	

7. Select Finish.

Note: If you select the link **Please send me a new code** another automated email from noreply@sunderland.gov.uk will be sent to your email address containing a new secure unique verification eight-digit code. You must always use the most recent code emailed and not any historical codes.

8. If you have forgotten your password, you can select Forgotten Password?

Email
joe.bloggs@sunderland.gov.uk
Password
For additional security, we will confirm your account by sending an authentication code to your email address.
Submit Cancel
Forgotten password?

- 9. **Reset password step 1:** Enter your professional email address e.g. Joe.Boggs@sunderlnad.gov.uk
- 10. Select Next.

Reset password - step 1	
Email joe.bloggs@sunderland.gov.uk	
Next Cancel	
Please enter your email address and we will email you a cod allow you to reset your password.	e to

11. **Reset password – step 2.** The screen will change advising you that an automated email has been sent to your email address:

Reset password - step 2		
We've just sent you an email to confirm your email address. Please enter the code in this email below.		
If you can't find an email, it may be in your Spam/Junk email folder or the email address provided is not registered with us.		
Code		
Next Cancel		
Please enter the verification code that we emailed to you		

- 12. Return to your emails to retrieve the email from noreply@sunderland.gov.uk containing a secure unique verification eight-digit code
- 13. Enter the eight-digit verification code and select Next:

Reset password - step 2
We've just sent you an email to confirm your email address. Please enter the code in this email below.
If you can't find an email, it may be in your Spam/Junk email folder or the email address provided is not registered with us.
5216 6399
Next Cancel
5216 6399 Next Cancel Please enter the verification code that we emailed to you

14. A new password will be required. You must comply with the following Password Policy:

It must be at least 12 characters long

- It must contain at least one letter
- It must contain only letters, digits and the following characters:@#\$%&*
- It must contain at least one upper-case letter
- It must contain at least one numerical digit

acquerd Policy
 assword Policy bur password must meet the following equirements: It must be at least 12 characters long It must contain at least one letter It must contain only letters, digits, and special characters It must contain at least one uppercase letter It must contain at least one numerical digit

15. Your new password: Enter your new password.

Note: this cannot be the same as any previous passwords you have used for portals

16. Confirm password: Enter your new password again.

Note: if you click on this icon, you can ensure that you have typed in the same password into both fields

- 17. Select Finish.
- 18. A **Password Reset Confirmation** message will automate. **Select OK** to continue to the Login page.

Password Reset Confirmation	
Your password has been changed. Press OK to return to the login page.	

15. Secure login – step 1:

Enter your professional e-mail address and password details in the **Existing Users** Section:

Secure login - step 1	
New to Adult Social Care Information Portal? <u>Register for an a</u> below. Already using Adult Social Care Information Portal? Sign in be	ccount here or use the button low.
Existing users Email joe.blogs@Sunderland.gov.uk Password	New users If you're new to Adult Social Care Information Portal, sign up for an account here Register for new account
For additional security, we will confirm your account by sending an authentication code to your email address. Submit Cancel Forgotten password?	

- 16. **Select Submit.** Return to your emails to retrieve the email from noreply@sunderland.gov.uk containing a secure unique verification eight-digit code
- 17. Enter the eight-digit verification code and select Finish

Secure login - step 2	
We have just sent you an email to confirm your account. Please enter the code this contains below. If you can't find this email, it may be in your spam/junk email folder.	Please enter the verification code that we sent you.
Code 4925 8322	
Finish Cancel Please send me a new code	

18. You will be taken to the following page with a message advising that as you are making a new referral in a professional capacity, you need to select **Apply to Manage an Account:**

Welcome to PIN Connect	
Welcome, Julie Mathieson.	
As you are making a new referral in a Professional capacity, please select 'Apply to Manage Account' in order to pr	ogress.
When completing the form can you please ensure when updating the following field - 'I am completing this form o select the option: 'Someone else as a Professional e.g. GP'.	n behalf of' - you
Apply to Manage an Account	

19. You will be taken to the page: **Sunderland City Council Adult Social Care Information Portal**. Select the **Worried about Someone?** icon



- 20. Guidance has been made available to explain the level of information that is required to support you as a Professionals to complete form. To access this information, select the following links:
 - Guidance
 - Report a safeguarding concern information for professionals and volunteers

					Sunderlan City Council
Home	Adult Social Care	Sunderland Information Point	My Acc. int	Recover a saved form	
Worri	ied about so	omeone?			
Profess	ionals reporting	g a safeguarding concerr	via the P	tal	
Profess If you are a p concern - infe	ionals reporting professional wishing to re ormation for professionals	g a safeguarding concern port a safeguarding concern via the Port and volunteers for further information.	tal, please read th	al e g <u>uidance</u> and visit <u>Report a</u>	a safeguarding
Profess If you are a p concern - infe If you need to	ionals reporting professional wishing to re ormation for professionals to make a safeguarding c	g a safeguarding concern port a safeguarding concern via the Pori and volunteers for further information. oncern referral, click on the link below:	via the P	e g <u>uidance</u> and visit <u>Report a</u>	a safeguarding

21. To make the safeguarding concern referral as a Professional you must select the **Safeguarding Adults Concern (SAC) Form** button



22. The Worried about somone? information page will be displayed which provides an overview of how to use the on-line safeguarding concern form. You must read these instructions carefully so that you fully understand how to navigate though the on-line referral and how to successfully update this form. For further guidnce reagrding this, click on the following link: General Navigation Rules for completing the Online Safeguarding Adults Concern Form



General Navigation Rules for completing the Online Safeguarding Adults Concern Form

1. To start the completion of safeguarding concern – you can either click on the sections of the form on the left-hand side of the page or you can scroll to the bottom of the information page and **select Next.**

					Sunderland City Council
Home	Adult Social Care	Sunderland Information Point	My Account	Recover a saved form	
Worrie	ed about s	someone?			
1 How does	s this tool work?	How does this tool work	?		
2 Safeguard	fing Adult	You can complete this form as a profe	ssional on beh	alf of someone else	
<u>3 B - Details</u> abuse and/o	of the alleged or neglect	How to Navigate	I	Progress	
4 <u>C - Furthe</u> named adu	r details on the It	Click on the numbered sections on th hand side of the window	e left	When progressing through th progress bar	e form, the
5 D - Alleger	<u>d perpetrator</u>	or			33% complete
<u>6 E - Details</u> completing	of the person this form	use the Next And Previous opt move through the pages.	ions to	will show you how far through form you are.	completing the
7 F - Genera	I information	Don't use the Browser 'Back' button			
8 Supportin Documenta	8 tion	The Form			
<u>9 Submit</u>		Questions		 Select the option(s) that your situation. 	at best describe
		You DO NOT need to answer every qui you need only complete what is releva	estion, nt.		
		The form uses many different types of questions, including lists and text field	s	This symbol * indicates that mandatory and must be answ continue.	the question is ered in order to
		Options			
		Save the Form		Print the Form	
		Use the Save for Later option to Save for Later option to Save	re the	Use the Print option to Print form if required.	a copy of the
					Next 🗲
			Print	Save for later Clo	se <u>Cancel</u>

- 2. IT IS GOOD PRACTICE TO SAVE FORM AS YOU PROGRESS. A warning will be shown to alert you that your session is due to expire.
- 3. If you wish to remain logged in, select Stay logged In

	١	Warning - Your session	on will expire	e in
		Stay logged in	ogout now	
Home	Adult Social Care	Sunderland Information Point	💄 Diane Dodds 🔻	Sunderland ^{City Council}
Worrie	ed about so	omeone?		

4. If you wish to log out, you must save the form first: Scroll to the bottom of the page, select **save for** later

← Previous		Next 🗲
	Print Save for later Create PDF Close	<u>Cancel</u>

5. Scroll to the top of the page and then select log out now

	Warning - Your session will expire in 09:50 minutes Stay logged in Logout now
Home Adult Social C	are Sunderland Information Point 💄 Diane Dodds 👻 Sunderland City Council
Worried abou	t someone?

6. Whilst completing the form, at any stage it is possible to click on the buttons at the bottom of your screen to carry out the following actions:

6.1 You can **progress** to the **previous** or **next page** of the form by selecting the **Previous** or **Next** buttons.

Note: you can only move to the next page if you have completed all of the mandatory fields on that page

← Previous		Next 🗲
	Print Save for later Create PDF Close	Cancel

6.2 **DO NOT USE** the **BROWSER BACK ARROWS TO NAVIGATE**:



6.3 **Saving the Form for Later:** You can **save** the **Safeguarding Concern form** by selecting the **Save for later** button and returning to it at a later date.

← Previous					Next 🗲
	Print	Save for later	Create PDF	Close	Cancel

6.4 A message will appear advising you that an email confirmation has been sent to your email address and that you have **30 days** from the **date you saved the form** to submit the form. If not submitted within that time, you will lose the form:

Save Form	
Your form has been saved. An email confirmation has been sent. You have 30 days to submit the form	n.
Close	

6.5 You can return to the saved form by either selecting the recover page link in the email:

Saved assessment form					<u> </u>
Sunderland Adult Social Care Online <donotreply@liquidlogic.co.uk></donotreply@liquidlogic.co.uk>		← Reply	« Reply All	\rightarrow Forward	
To • Julie Mathieson				Tue 14/09/20	021 19:
Retention Policy 90 Days Mailbox Item Retention (90 days)	Expires 13/12/2021				
***This message originates from outside your organisation. Do not provide login authenticity. If in doubt, email 'Ask.ICT@Sunderland.gov.uk' or call 561 5000 *** Saved Assessment Form	or password details. Do not click o	n links or attachmen	ts unless you	are sure of th	ıeir
Please vis <mark>t <u>the recover page</u> in</mark> order to continue with your form. Many Thanks					
Social Care Team					
Disclaimer					
The information contained in this communication from the sender is confidential. It is intended solely for any disclosure, copying, distribution or taking action in relation of the contents of this information is stri	use by the recipient and others authorized to ctly prohibited and may be unlawful.	o receive it. If you are not	he recipient, you	are hereby notifie	ed tha
This email has been scanned for viruses and malware, and may have been automatically archived by Mi for your human generated data. Specializing in; Security, archiving and compliance. To find out more <u>Cl</u>	mecast Ltd, an innovator in Software as a Se ick Here.	ervice (SaaS) for business	Providing a safe	r and more usefu	ul pla

6.6 Or, by selecting 'recover a saved form' whilst logged into the portal:

≗ <u>Julie Mathieson</u> ▼
My Account
Update Account
Submitted Forms
Recover a saved form
Logout

6.7 Important Notes:

- If you are having difficulties receiving emails in your usual email provider inbox, you **must also check your junk/trash folder**
- You will only receive 1 email per session and not every time you save the form if you are still logged on within that same session.
- If you are New User (have not yet been registered and verified as a Professional by the Adults Safeguarding Team), you will only be able to access your saved form by the email sent as you have no way of accessing your Portal Account at this stage. If you are an Existing User, as you have been registered and verified as a Professional by the Adults Safeguarding Team, you will be able to log on to the Sunderland Portal account to re-access the saved form.
- REMEMBER although you have a maximum of 30 days in which to submit the online Adults Safeguarding Concern, YOU MUST submit a referral as SOON AS POSSIBLE after the alleged incident. The '30 days' is purely a function offered by the Portal and is not reflective of the Sunderland Adults Safeguarding Teams recommended time standards.
- 6.8 For further guidance on how to retrieve your saved form, **click in the following link**: **Recovering a saved form**

- 6.9 You can **Print** the **Safeguarding Concern form**, however you will most likely only use this function once you have **completed the form**.
- 6.10 You can create a **PDF of the form,** however you will most likely only use this function once you have **completed the form**
- 6.11 You can **Close the form. The Close** button allows the form to be cancelled. A prompt message will be received to check that cancellation is required
- 6.12 You can **Cancel the form**. The **Cancel** button also allows the form to be cancelled. A prompt message will be received to check that cancellation is required

← Previous		Next ->
	Print Save for later Create PD	E <u>Close</u> <u>Cancel</u>

6.13 Lastly, all fields marked with a red asterisk * are mandatory fields and any mandatory fields are that not completed will be shown in **RED** when you try to progress to the next page:

Your relationship to	
person *	
P	
This field is required.	

6.14 Numerical fields have been designed to accept numerical digits only and you will not be able to progress to the next page of the form until you have entered the detail in digit format:

В	B - Details of the alleged abuse and/or neglect		
Date the alleged abuse and/or neglect took		12th September 2021	
	place * Allowed date formats are dd-		
	mm-yyyy or dd/mm/yyyy or dd.mm.yyyy		

Recording the Details of The Adult Alleged to be Experiencing or at Risk of Abuse and/or Neglect (Named Adult)/Your Details (Portal User)

- This section is about your details as the Professional. This page will appear slightly differently depending upon if you are a professional making a safeguarding concern referral for the first time (New User), or, if you have previously made safeguarding concern referrals via this portal and have been 'verified' as a professional by the Sunderland Safeguarding Team (Existing User)
- 2. If you are an **Existing User**, to go to the section you require, click on the following link: **Existing User**
- 3. If you are a **New User**, go to the section below:

New User:

4. Your **name**, **email address** and **professional details** will have populated into **Section A – Your Details (Portal User).**

A - DETAILS OF THE ADULT ALLEGED TO BE EXPERIENCING OR AT RISK OF ABUSE AND/OR NEGLECT (NAMED ADULT) Your Details (Portal User)		
First name	Diane	
Last name	Dodds	
Role	Safeguarding Officer	
Organisation	Sunderland City Council	

5. Mobile Phone Number: As you are a Professional making a referral for the first time, YOU MUST enter your professional telephone number in the field below as this will enable Sunderland Adults Safeguarding Team to make contact if further information is required:

Mobile Pho	Mobile Phone Number:				
0734188	1359				

6. Note: if you wish to add your professional telephone number so that it automates every time you make subsequent referrals as a Professional, you can do so by clicking on your name at the top of the page and selecting Update Account. For further guidance, click on the following link: Updating My Account



Home	Adult Social Care	Sunderland Information Point	🛓 <u>Julie Mathieson</u> 🔻	Sunderland Dity Council
Worrie	ed about s	omeone?	My Account	
			Update Account	
			Submitted Forms	
<u>1</u> How does	this tool work?	Safeguarding Adult Con	Recover a saved form	
2 <u>Safeguard</u> Concern Fo	<u>ling Adult</u> rm	Care Act 2014	Logout	
<u>3</u> <u>B - Details</u> abuse and/o	of the alleged or neglect	For notification of suspected	l or actual abuse or	neglect to an individual
<u>4</u> <u>C - Further</u>	r details on the	Please do not save a conv of this form t	o use as a template on your	own storage area as this form will be

Who is the Assessment for? (New User)

- 1. Complete this section for **the person** that **you are making the referral for** paying attention to the following detail, remembering that all fields that display a red asterix^{*} are mandatory fields:
 - 1.1 I am completing this form on behalf of the only code that you will select as a professional is 'Someone else as a Professional e.g. GP'. If you select any of the other codes in this field, the registration process will be delayed as the Safeguarding Team will not be able to verify you as a professional and will need to refer the issue to their ICT Team to resolve.

Who is the Assessn	nent for?		
l am completing this	Someone else as a Professional e.g. GP	•	

2. As a New User, to continue with the completion of this page, click on the following link: Relationship to this person, or, go to **Point 4** below: **Your relationship to person**,

Existing User:

3. Your **name, email address** and **professional details** will have populated into **Section A – Your Details (Portal User).**

How does this tool work?	Safeguarding Ad	ult Concern Form
<u>z Safeguarding Adult</u> Concern Form	<u>Care Act 2014</u>	
B - Details of the alleged abuse and/or neglect	For notification of s	suspected or actual abuse or neglect to an individual
4 C - Further details on the named adult	person Please do not save a copy o updated as and when requ	of this form to use as a template on your own storage area as this form will be ired; any copies you hold may be out of date, and, if submitted, will slow the
D - Alleged perpetrator	process of raising the conc	ern.
5 E - Details of the person completing this form	For further information, do the <u>Sunderland City Counc</u>	ocuments and guidance to support the completion of this form, please access il <u>Website</u>
7 <u>F - General information</u>	A - DETAILS OF THE	ADULT ALLEGED TO BE EXPERIENCING OR AT RISK
<u>Supporting</u> Documentation	OF ABUSE AND/OR Your Details (Porta	NEGLECT (NAMED ADULT) l User)
9 <u>Submit</u>	First name	Julie
	Last name	Mathieson
	Role	GP
	Organisation	Sunderland City Council
	Address	
	Address	2 Union Street Sunderland sr4 Ols
		* 4 * * 2
	Email	julie.mathieson@sunderland.gov.uk
	Telephone	07341881359
	Who is the Assessn	nent for?
	I am completing this	

Who is the Assessment for? (Existing User)

- 4. Complete this section for **the person** that **you are making the referral for** paying attention to the following detail, remembering that all fields that display a red asterix^{*} are mandatory fields:
 - 4.1 I am completing this form on behalf of: the code 'Someone else as a Professional e.g. GP' will automatically default. This is because you are an Existing User e.g. you have previously made safeguarding concern referrals via this portal and have been 'verified' as a professional by the Sunderland Safeguarding Team (Existing User). You must never select any other code from this list. If you do, the registration process

will be delayed as the Safeguarding Team will not be able to verify you as a professional and will need to refer the issue to their ICT Team to resolve.

Liquidlogic

Who is the Assessn	nent for?	
l am completing this form on behalf of *	Someone else as a Professional e.g. GP	•

5. Your relationship to person: Enter your professional relationship e.g. Care Manager, Care Provider

First Name/Last Name: Enter the name of the person that you are making the professional referral for

Date of Birth: The persons DOB can either be manually input using the format shown dd-mmyyyy, or, can be chosen from the calendar icon

Who is the Assessment	t for?
I am completing this form on behalf of: *	Someone else in a professional capacity
Your relationship to person *	Care Manager
First Name *	John
Last Name *	Johnson
Date of Birth * This field is required.	dd-mm-yyyy

Gender *: Select as appropriate from the drop down

Ethnicity *: Select as appropriate from the drop down

Email, Telephone and NHS Number fields: Enter the persons detail if available

Gender *	Male *
Ethnicity *	Information Not Yet Obtained *
Email	
Telephone	
NHS number	

Recording the Persons Address

6. Providing that you know the **Persons post code** and **house number/name**, enter this detail into the fields below:

If you **do not know the persons post code**, click on the following link for guidance on what to do: **Post Code unknown**

Add	ress		
	House nu	mber or name	1
	Postco	ode * 😧	sr2 Org
Find	l address	Enter add	dress

Select **Find Address**. If the address is known, the information will be populated into the Address field as shown:

Address	
1 Smith Street Sunderland SR2 0RG	
Reset Address S	Search Again

Check that the address information populated is correct, if not reset and search for the address again. **Reset address** clears the address fields so that they are blank

Search Again clears the address BUT leaves the information in the address field to be checked and complete search again.

Address	
House number or name	1
Postcode * 💽	sr2 Org
Find address Enter add	iress

Post Code unknown or Person has 'No Fixed Abode' or 'Address needs to be set up' by ICT

Where you are unsure of the Persons post code, but you know the remainder of their address, you must update this section as outlined below:

- Postcode * This is a mandatory field therefore this MUST be entered BUT as you do not know this detail, type as much of the post code as you can e.g. 'SR', 'NE' etc, OR where the person has 'no fixed abode' you must record 'No fixed abode', or where you are awaiting for ICT to create the address, you can record 'Temporary Address'.
- 2. Select Find Address. The section will expand, enter the following address details:

House number or name	
Postcode * 🧕	No fixed abode
Find address	

The message below will appear and the 'Enter address' button will appear

Address		
We couldn't f try again. Oth	ind a match nerwise use	hing address. Please check that you entered the correct information and the Enter address button to enter the address details manually.
House nu	umber or name	
Poste	code * 🧕	No fixed abode
Find address	Enter ad	dress

Select **Enter address.** The following fields will automate and will allow you to manually enter the address. As this is a **No Fixed Abode** address, enter **'No fixed abode'** into the following mandatory fields: **Street**, **Town/City**

Address	
Property name	
House no	
Street *	
Area	
Town/City *	
County	
Postcode * 🧕	

Property name: Where you don't know the persons post code but you know this detail, enter if known/applicable. Where the person has '**no fixed abode'** you must record '**No fixed abode'**

House no – Where you don't know the persons post code but you know this detail, **always enter this** (unless the property does not have a number and has a Property name instead). Where the person has '**no fixed abode**' leave this blank

Street * - Where you don't know the persons post code, as this is a mandatory field, this detail must always be entered. Where the person has '**no fixed abode**' you must record '**No fixed abode**'

Area - Where you don't know the persons post code but you know this detail, enter if known/applicable. Where the person has '**no fixed abode**' leave this blank

Town/City * - Where you don't know the persons post code, as this is a mandatory field, this detail must always be entered. Where the person has '**no fixed abode**' you must record '**No fixed abode**'

County - Where you don't know the persons post code but you know this detail , enter if known/applicable. Where the person has '**no fixed abode**' leave this blank

DO NOT select **Search again**. If you do, the form will not be able to match the address because it will not recognise the partially input post code, or the 'no fixed abode' entry. Instead you must move on to the remaining fields that require updating e.g. **Maritial Status** and **Reason the Named Adult is in need of support** *:

Address	
Property name	
House no	1
Street *	Smith Street
Area	
Town/City *	Sunderland
County	
Postcode * g	5
Search again Enter ad	dress

Marital Status: Select as appropriate from the code list. If unsure, select Unknown

Reason the Named Adult is in need of support: Select as appropriate from the code list. If none of the codes apply, select '**Other**'. Never select '**None**'

Marital Status:	Unknown	*
Reason the Named Adult is in need of	Mental Health	•
support: *		
- Previous		Next 🗲
	Print Save for later Create PDF Close	Cancel

Once all the mandatory fields have been completed - Select Next

Note: If you have recorded a partial post code because you do not know it, providing you have not selected **Search again** when entering the Persons address, you will be able to progress to the next page of the 'Safeguarding Adults Concern Form': **Recording the Details of the Alleged Abuse and/or Neglect**

Recording the Details of the Alleged Abuse and/or Neglect:

1. Complete as many fields as possible, remembering that * identifies a mandatory field

1	How door this tool	B - DETAILS OF	
	work?		
2	Safeguarding Adult Concern Form	Date the alleged abuse and/or neglect took place *	dd-mm-yyyy
3	B - Details of the alleged abuse and/or neglect	Please provide brief details of the	
4	C - Further details on the named adult	alleged abuse and/or neglect being reported now * If you are aware of any previously alleged abuse and/or neglect,	
5	D - Alleged perpetrator		
6	E - Details of the person completing this form		
7	F - General information	please provide brief details	
~	Our and the set		

- 2. **Date of alleged abuse and /or neglect took place** can either be entered manually or chosen from the calendar icon.
- 3. Please provide brief details of the alleged abuse and/or neglect being reported now this field is to be completed providing information of the safeguarding concerns.

Please provide brief details of the alleged abuse and/or neglect being reported now

concerns of self neglect due to non engagement with services and also poor home conditions

4. If you are aware of any previously alleged abuse and/or neglect, please provide brief details

 this field gives the opportunity for historical safeguarding information to be input.

5. Please indicate all the categories of alleged abuse and/or neglect provides a description of the categories of abuse to correctly identify the category of abuse being reported. Select as many abuse categories as appropriate.



6. Indicate the Threshold tier on first assessment of the alleged abuse and/or neglect.

Threshold tier on	○ Low	Sel
first assessment of	Significant	but
the alleged abuse	○ Very Significant	
and/or neglect		
	 Critical 	

Select appropriate radio outton.

7. You can click on the blue link to refer to **the Safeguarding Adults ADASS threshold guidance** (this is a guide to assessing thresholds and to decision making - Low, Significant, Very Significant or Critical).



8. Is the Named Adult at risk of continuing or further abuse and/or neglect? Select appropriate radio button:

Is the Named Adult at	® Yes ○ No
risk of continuing or	
further abuse and/or	
neglect? *	

 Action taken – Please provide details of all actions that have been taken to ensure immediate safety of the Vulnerable Adult. Please include if police were involved and of all safeguarding measures already in place.

Action Taken (Please provide details of all actions that have	Referral has been made to DN Service ASC have been contacted to carry out Adult Needs Assessment GP to review to rule out any medical cause for behaviour Referral to be made to Memory Protection Service
been taken to ensure immediate safety of the Named Adult. Please include	
if police were involved and of all safeguarding measures already in place) *	
place	

Completed and submitting this form does not constitute management of immediate risks.

- 10. **Is there a crime reference number?** If concerns have been reported to the Police and a crime number has been provided, please input information in this field, as this can assist with any safeguarding enquiries.
- 11. Given the action you have taken, which is your assessment of the threshold tier again please refer to the Safeguarding Adults ADASS threshold guidance (a guide to assessing thresholds and to decision making - Low, Significant, Very Significant or Critical) – Select relevant threshold level from drop down list.
- 12. Please provide names and telephone numbers of other people or organisations involved who will be able to help with this concern and any subsequent Safeguarding Adults Enquiry if no telephone number is known, e mail address can be included.
- 13. Where did the alleged abuse and/or neglect take place? You can only select one location. When completing the location of abuse section, it is important to review all descriptions on the

options before appropriate location radio button. (Please ensure that "Other" is recorded only when none of the options apply").

Is there a crime reference number?		11
Given the action you have taken, what is our assessment of the threshold tier?	O Low Significant O Very Significant O Critical	
lease ensure that you always use the latest Safeguarding aduits ADASS hreshold guidance (a guide to assessing thresholds and to decision making) *		
Please provide names and telephone numbers of other people or organisations involved ho will be able to help	Test	*
with this concern and any subsequent Safeguarding Adults Enquiry *	4	11
Where did the alleged abuse and/or neglect take place? Please ensure that Other' is recorded only when none of the	 Own Home - The person's private residence, whether rented or owned, and/or shared with the alleged perpetrator or anyone else. Do not select this if the location is also a Care/Nursing Home (use relevant Care Home option) Extra Care/Sheltered Housing Scheme or Supported Accommodation (use either of those available options) 	
options apply *	 Extra Care or Sheltered Housing Scheme - This may also be their own ho but this category must be specifically selected if applicable Supported Accommodation - This may also be their own home, but this must be specifically selected if applicable, e.g. Supported Living Relative's Home - Any relative's home providing the adult at risk doesn't there. 	me, live

- 14. Are there any children who could be at risk as a result of the alleged abuse and/or neglect being reported on this form?
 - If there are no children who could be at risk select **No** radio button, followed by **Next** to continue.
 - If there are children who could be at risk select **Yes** radio button. The section expands to show further questions which require input as these are mandatory fields.

Are there any children who could	● Yes	⊖ No	Salaat annyanyiata yadia
e at risk as a result f the alleged abuse nd/or neglect being reported on this form? *			button.

15. If you select No, you have completed this page and you can select **Next** at the bottom of the page.

16. If you select **yes** to the above question, the following questions will automate:

and o.	Where children at risk, has someone responsible for the safeguarding of children and young people been made aware? *	⊖ Yes	○ No	Select appropriate radio button.
--------	--	-------	------	-------------------------------------

17. The following fields will automate regardless of whether you have selected **yes** or **no**. Enter the information inot the free text field:

Where it has been	
identified that	
children are at risk	
etato	
State	
 who has been 	
contacted and	
when; or,	
 if no one has 	
been	
contacted.	
etete why	
state why	
*	

18. Once all information has been input, Select Next to continue.

← Previous		Next ->
	Print Save for later Create PDF Close	Cancel

Recording Further Details on the Named Adult

1. Are there any concerns, generally in relation to the mental capacity of the Named Adult?



- If there are no concerns in relation to mental capacity of the Named Adult **select No** radio button and progress to the next question on this page.
- If there are concerns in relation to the mental capacity of the Named Adult select Yes radio button. The section expands to show 2 further questions which require input as these are mandatory fields.
- 2. Input the required information into the free text box

If there are concerns in relation to the mental capacity of the Named Adult
please provide details (including any diagnosed
impairment of mind or brain) *

3. Select the appropriate radio button:

```
Has the Named O Yes O No
Adult had any
Mental Capacity Act
Assessments?*
```

- 4. If capacity assessments have not been completed, **select No** radio button and progress to the next question on this page.
- 5. If capacity assessments have been completed, **select Yes** radio button. The section expands to allow information to be input on the outcome of specific decision assessments. Information must be provided on any assessments completed including date of assessment, the Specific Decision the assessments relate to and the outcome of each assessment.

Note: for professionals in Local Authoirty Adult Social Care only (Community Socail work teasm and Therapy Practitioners), please inlcude if any e.g. MCA's have been uploaded into Liquidogic in the **Specific Decision** text box

Nhat was the date(s) and e.g. accommodation, care, treat	outcome of any of the specific decision asses	isment(s)?
Date(s) *	Specific Decision *	Outcome *
dd-mm-yyyy		
		Full screen

6. If more than one capacity assessment has been completed, **Select + icon**, which will open another table for completion. This process can be repeated as may times as required.

What was the date(s) and outcome of any of the specific decision assessment(s)? e.g. accommodation, care, treatment, finances (this list is not exhaustive)			
Date(s) *	Date 09-10-2019	09-10-2019	
Specific Decision *	Spec Care and Support	Finances	
Outcome *	Outc Capacitated	Not Capacitated 🔽	
	• =	• •	

- 7. Is the Named Adult aware that this concern is being raised with the Local Authority select appropriate radio button.
- 8. Has the Named Adult been consulted with and consented to this concern being raised with the Local Authority select appropriate radio button.
- 9. What desired outcome(s) has the Named Adult identified or been supported to identify? this is a free text field.
- 10. Is the Named Adult to be supported by a family member, friend, advocate or an advocate appointed under S68 Care Act 2014? Select the appropriate radio button.

11. If No is selected, a further question is generated asking Why is the Named Adult not supported?

 – enter the relevant detail into this free text field. Go to Point 13 below to answer question: Are there Caring/Co-Caring Arrangements?

Why is the Named Adult not	
supported?	

12. If Yes is selected, further questions are generated relating to the Named Adults advocate:

Is the Named Adult to be supported by a family member, friend, advocate or an advocate appointed under S68 Care Act 2014? *	● Yes	○ No	
If the Named Adult is to be supported by someone, please provide their full name address telephone number status i.e. advocate, family member or friend			
Is the Named Adults advocate aware that the concern is being raised?	⊖ Yes	○ No	
Has the Named Adults advocate been consulted with and consented to this concern being raised with the Local Authority?	⊖ Yes	○ No	
Has this advocate been appointed under Section 68 of the Care Act (advocates can request and may be provided with information on behalf of the named adult)	⊖ Yes	○ No	

- 13. Are there Caring/Co-Caring Arrangements? select appropriate radio button and if Yes is selected, a free text box is provided to give details of these arrangements. You should include the following: where the alleged victim is a carer for the e.g. perpetrator
- 14. State any specific needs of the Named Adult (e.g. interpreter, access/mobility assistance) free text box to input relevant information if no specific needs please input None or N/A.
- 15. Select Next.

Recording Alleged Perpetrator

- 1. **Name**: This is a Free text box to be populated with Alleged Perpetrator's name. Where the name of perpetrator is unknown '**unknown**' must be entered into the free text box.
- 2. Address: the Address of Alleged Perpetrator to be input into the free text box if known
- 3. **Date of Birth**: the Date of Birth for Alleged Perpetrator to be input (if known). This can be input manually or by selecting date from the calendar icon to the right of the field.

- 4. **Place of Work:** This is a Free text box and should be populated with the Alleged Perpetrator's Place of Work if known.
- 5. Is the Alleged Perpetrator know to the Named Adult? Select the appropriate radio button.
- 6. In what way is the Alleged Perpetrator known to the Named Adult? Select the appropriate radio button from the list provided. When completing this section, it is important to review all descriptions before selecting appropriate location radio button.
- 7. Is the Alleged Perpetrator also a person who has care and support needs? Select the appropriate radio button.
- 8. Are there any concerns in relation to the mental capacity of the Alleged Perpetrator? Select the appropriate radio button.
 - If there are no concerns in relation to the mental capacity of the Alleged Perpetrator select No radio button, the question in the screen shot below will automatically be greyed out and you will not be required to complete it. Select Next to continue.
 - If there are concerns in relation to the mental capacity of the Alleged Perpetrator select **Yes** radio button. The free text box against the question below will no longer be greyed out and you must enter details of any concerns in relation to the mental capacity of the Alleged Perpetrator.

If there are any concerns in relation to the mental capacity of the alleged perpetrator,	1
please provide details	

9. Once information has been input, select **Next** to continue.

Recording Details of the Person Completing this form

1. This section requires you as the Professional to input their **Job Title**, the Organisation they work for and their contact information, as well as the name of the person who made the original alert, only if this is applicable:

E - DETAILS OF	
Job Title: *	
Name of Organisation: *	
Type of Organisation: *	
Work Address: *	
Telephone Number:	
Secure Email (if applicable):	
Please provide the name and contact details of the original alerter in your organisation	
← Previous	Next ->

2. Select Next.

Recording General Information

- 1. All three questions on this page are mandatory
 - 1.1 Please provide the name of the Safeguarding Lead for your organisation Enter the relevant information into the free text box. This will depend upon your organisation and individual safeguarding guidance e.g this could be your Manager for whom you would discuss the concern as part of the process of raising the concern. If not available, this should not delay the appropriate action being taken.

1.2 Have you discussed this concern with your Safeguarding Lead? If so, when? – Enter the relevant information into free text box

Please provide the name of the		
Safeguarding Lead for your organisation *		
Have you discussed this concern with your Safeguarding Lead? If so, when? *		
Does this concern relate to the quality of service? *	⊖Yes ⊖No	

1.3 Does this concern relate to the quality of service? - Select appropriate radio button.

2. Select Next

Uploading Supporting Documentation

- 1. If you wish to attach supporting documentation, then they must be **Word Documents, PDF Files and Images (in Jpg/png format).** Emails are to be adapted to a word document for attaching purposes as it is not possible to upload emails.
- 2. Select Upload Document.

1	How does this tool	SUPPORTING DOCUMENTATION	78% complete
2	Safeguarding Adult Concern Form	You will only be able to attach the following file types: • Word Documents • PDF Files • Images (in jpg / png format)	
3	B - Details of the alleged abuse and/or neglect	▲ Upload Document	
4	C - Further details on the named adult	← Previous	Next 🗲
5	D - Alleged perpetrator		
6	E - Details of the person completing this form		
7	F - General information		
8	Supporting Documentation		
9	Submit		

ſ

- 3. You will be taken into your filepath. Search for relevant documents, double click on required document to upload.
- 4. Once the upload is completed a link to the document will appear

SUPPORTING DOCUMENTATION	78% complete
You will only be able to attach the following file types: • Word Documents • PDF Files • Images (in jpg / png format)	
Z_\Safeguarding Adults Team\Staff-Folders\Diane\Desktop info\T - 1 INITIAL Minu Invitation.doc Remove	ite Taker
⊥ Upload Document	
← Previous	Next 🗲

5. There is no limit to the number of documents that can be uploaded, if you wish to attach further documents, repeat the process as outlined in Points 2 – 4 above.

Removing a Supporting Document

6. There is also the option to **remove an uploaded document** if it has been attached in error. Select **Remove** and the upload will be deleted:

Z_\Safeguarding Adults Team\Staff-Folders\Diane\Desktop info\T - 1 INITIAL Minute Taker Invitation.do					
1 Upload Document					
← Previous	Next 🗲				

7. Once all documents have been uploaded, **select Next**, in order to submit the Safeguarding Concern form

Sending the PDF version of the form to the appropriate Manager to be quality checked

 Where you are required to pass the referral to your Manager/Safeguarding Lead to 'quality check' BEFORE submitting the form to the Safeguarding Team, then you must create the form in **PDF format**. This automatically **saves the form for later** and will allow you to send the **PDF version** of the form to the relevant Manager within your organisation.

Note 1: the reason that the form is **saved for later** is to allow you to access that form via the **Recover a saved form** option to make any amends that has been advised by your Manager, following their quality check of your Safeguarding Concern Referral. For further guidance click on the following link: <u>Recovering a Saved Form</u>

Note 2: Once 'submit' has been selected, that is the final version of the form and it cannot be edited by you.

2. Select Create PDF

Home	Adult Social Care	Sunderland Informatio	n Point	💄 Julie Mathieso	n - Si Ci	underlar ty Council	nd	
Worrie	ed about s	omeone?						
<u>1 How does</u>	s this tool work?	Submit						
2 Safeguard Concern Fo	<u>ding Adult</u> rm	Submit Form						
3 <u>B - Details</u> abuse and/	s of the alleged or neglect							
<u>4 C - Furthe</u> named adu	er details on the It	← Previous						
5 D - Allege	d perpetrator							
<u>6 E - Details</u> completing	s of the person this form							
<u> 7 F - Genera</u>	al information							
<u>8 Supportin</u> Documenta	ation							
9 Submit								
			Print	Save for later	Create	PDF	lose	<u>Cancel</u>

3. Select OK



4. Select Close



5. The PDF version of the form will appear either at the bottom of your screen, or at the top. Select the **Open file** link



6. The PDF version of the form will automate:

Please provide brief details of the alleged abuse and/or neglect being reported now	test
If you are aware of any previously alleged abuse and/or neglect, please provide brief details	
Please indicate all the categories of alleged abuse and/or neglect	Domestic - An incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse by someone who is or has been an intimate partner or family member regardless of gender or sexuality. It can include: psychological, physical, sexual, financial, emotional abuse; 'honour' based violence; Female Genital Mutilation; forced marriage.
Threshold tier on first assessment of the alleged abuse and/or neglect When completing this, you must refer to the Safeguarding eduts ADASS threshold guidance (a guide to assessing thresholds and to decision making - Low, Significant, Very Significant or Critical)	Significant
Is the Named Adult at risk of continuing or further abuse and/or neglect?	No
Action Taken (Please provide details of all actions that have been taken to ensure immediate safety of the Named Adult. Please include if police were involved and of all safeguarding measures already in place)	test
Is there a crime reference number?	
Given the action you have taken, what is your assessment of the threshold tier? Please ensure that you always use <i>the</i> <i>latest</i> Safeguarding adults ADASS threshold guidance (a guide to assessing thresholds and to decision making)	Significant
Please provide names and telephone numbers of other people or organisations involved who will be able to help with this concern and any subsequent Safeguarding Adults Enquiry	test
Where did the alleged abuse and/or neglect take place?	Own Home - The person's private residence, whether rented or owned, and/or shared with the alleged perpetrator or anyone else. Do not select this if the location is also

7. Use your PC functions to pass to your respective manager via their preferred method e.g Print and pass a hard copy to them, email the form to them by saving it into your organisations file path and then email e.g. right click on the PDF document and select **'Send to'**

	^	News	^	Data madifi		Trees	C	
🖈 Quick access		ivame		Date modifi	ea	іуре	Size	
01 Julie		BPMs		27/10/2021	18:17	17 File folder		
Deckton	-	Docs		12/10/2021	10:23	File folder		
Describe		Google	Chrome_files	21/01/2017	12:54	File folder		
Downloads	1	Suppor	t Plans	15/10/2021	16:41	File folder		
Libraries	*	29-0-	Open	20/10/2021	13:20	Microsoft Edge P	106 KB	
Peoples Performance Team	*	Build	Maura ta Ora Deiva		6:05	JPG File	25 KB	
Documents	*	Build	 Move to OneDrive 	 	6:21	JPG File	50 KB	
🛜 My Pictures	*	Build	/-ZIP		B:55	JPG File	24 KB	
Current KSGs	*	Chroi	CRC SHA	/	6:13	Microsoft Edge P	82 KB	
Change Requests		Citrix	Scan with Microsoft Defender		0:55	Shortcut	2 KB	
Performance		📰 Conti	E Share		1:55	Shortcut	3 KB	
		coun	Open with	<u> </u>	8:23	JPG File	3 KB	
SCAS_SPA		C credit	Sync	>	6:54	Microsoft Edge H	3 KB	
Social Work Teams		devm	Restore previous versions		2:29	Shortcut	1 KB	
OneDrive - Sunderland City Council		C Googe	Send to	<u> </u>	IB:11	Microsoft Edge H	56 KB	
Attachments 2			Schuto			Communitation of the second second		
Becordings			Cut			Compressea (zippea) tolai	er	
Recordings			Сору			Desktop (create snortcut)		
Sunderland City Council		Peop	Create shortcut			Documents		
TW-SCC-ASC-STAFF - Documents		Denso	Delete	f	3446	Fax recipient		
TW-SCC-BDT-ASC - Documents		Caba	Rename			Mail recipient		
TW-SCC-BDT-People - Documents		Self fi	Properties		5	Sunderland SEND	Nhusinesedata	Adult Services) (O)
TW-SCC-BDT-Systems - Documents		Short T	erm Support and Planned Care	27/10/2021	Ξ.	Global share (\\cos sunder	and local/busi	inecclata) (S)
TW-SCC-BDT-Systems - LAS BAU Meetings		🔊 Sunder	land SEND	04/12/2020		Dock Street () cos sunder	and local burin	accedata DockStData) (M/s)
TW-SCC-BDT-Systems - Liquidlogic (LAS)					Ξ.	lulie Mathieson (\mor-ha	fs=01\HomeAn	esc() (X-)
						D (\cos.sunderland local	\businessdata\	BROData) (Y:)
L6140/					-	BS (\\cos.sunderland local	\businessdata)	(7:)
3D Objects					- ·	ss (((cossumeriandilocal	(o com coodid)	(=)

8. Select Mail recipient

9. You will be taken to your emails, the PDF form will be attached, send the email to the manager who will be responsible for quality checking the referral as per your business as usual processes.

	\triangleright	From 🗸	Julie.Mathieson@sunderland.gov.uk					
	Send	То						
		Cc						
		Subject	Emailing: 29-Oct-2021 12_50_Safeguarding Adults Concerns Form, 26-Oct-2021					
	29-Oct-2021 12_50_Safeguarding Adults Concerns Form, 26-Oct-2021.pdf v							
Yo	Your message is ready to be sent with the following file or link attachments:							
29-Oct-2021 12_50_Safeguarding Adults Concerns Form, 26-Oct-2021								
No	ote: To pr	otect against co	omputer viruses, email programs may prevent you from sending or receiving certain types of file attachments. Check your email security settings to determine how attachments are handled.					

10. They will be able to open the PDF form to read the information. Any amends required will be e.g. emailed back to you for you to add into your referral. You can then Submit the Portal referral to the Safeguarding Team

Submitting the Form

1. Select Submit Form

v does this tool k? eguarding lt Concern m Details of the ged abuse	SUBMIT Submit Form]	E		89% complete
eguarding llt Concern m Details of the ged abuse	Submit Form				
Details of the ged abuse					
/or neglect					
Further details he named It					
Alleged					
Details of the son completing form					
General rmation					
porting					
cumentation					
f G	Form Beneral mation Doorting umentation mit	form General mation porting umentation mit	Form Beneral mation Dorting umentation mit	form General mation porting umentation mit	Form Beneral mation borting umentation mit

2. A message will appear on the screen asking if you are sure that you want to submit this Safeguarding Adults Concern form. Once submitted, you will not be able to make any further changes. If you do not want to submit, select **Cancel**, otherwise **Select Submit**.

Submit Form	×
Are you sure you want to submit this Safeguarding Adults Concern now? You will not be able to make any further changes once it has been submitted.	
Cancel Submit	

3. A message will be displayed to confirm that the information has been submitted to Adult Social Care. If you are a **new professional** registering for the first time, you will also receive an email advising of this.

Home	Adult Social Care	Sunderland Information Point	💄 Diane Dodds 🔻	Sunderland City Council
My Ne	eeds			
Thank You				
<u>Recover a s</u>	aved form	Thank You		
		The information you completed has beer	n submitted to Adult Social	Care.
		You will be contacted in the next few day Please allow additional time for weekend	s by Adult Social Care. ls or bank holidays.	
		Thank you for using this service.		

4. This finalises the Safeguarding Adults Concern referral process. If you are a new professional registering for the first time, for security purposes, it may be necessary for you to be contacted by the Safeguarding Team to 'verify' you as a Professional. Thereafter you will not need to be verified for any subsequent referrals that you make whilst using the same professional email address.

Note: You can access all submitted forms for 365 days from the date of submission by selecting your name and Submitted **forms** when it appears in the drop-down menu. For further information, click on the following link: **Portal - Additional Functions**

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For Professionals who have direct access to LAS (Therapy Practitioners and Social Work Teams), a copy of the Portal form can also be accessed with the respective Safeguarding Contact. For further information, click on the following link: Accessing the Safeguarding Form via LAS (for Therapy Practitioners and Social Work Teams only)

5. If you need to submit more than one referral, please select **HOME**, allowing a further referral to be made as already outline din this guide. Click on the following link for



End of Process



Appendices

General Navigation

 When you initially select the Adult Social Care Online Portal link to access the Safeguarding Concern form in the Portal, you will be taken to the screen below -'Welcome to Sunderland City Council Adult Social Care Information Portal' and various Icons will appear on the blue ribbon at the top of your screen:

					Sunderland
Home	Adult Social Care	Sunderland Information Point	: My Account	Recover a saved form	
Welco Inforn	me to Sund nation Port	derland City Coເ al	ıncil Adult	Social Care	
Your informat	ion, advice and support h	ub for adults			
	Information, advice	and guidance		Worried about someone?	
	i			A	
Information, available – St	advice and guidance is av underland Information Poi	ailable on help and services nt	Report a safeguarding	concern	

 It is recommended that you log into the Portal first to use these icons e.g. click on the Worried about someone icon above to progress to the Secure login – step 1 page as shown below:

Secure login - step 1	
New to Adult Social Care Information Portal? <u>Register for an a</u> below. Already using Adult Social Care Information Portal? Sign in be	ccount here or use the button low.
Existing users Email Password	New users If you're new to Adult Social Care Information Portal, sign up for an account here Register for new account
For additional security, we will confirm your account by sending an authentication code to your email address.	

3. Once you have logged into the Portal e.g. have entered **your Professional email address and password**, these icons will change as shown below and will continue to appear wherever you are within the **Portal tool** and you can use these icons at any stage to navigate to specific sections of the Portal:

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Home	Adult Social Care	Sunderland Information Point	💄 Julie Mathieson 🔻	Sunderland City Council
Welco	ome to PIN	Connect		
Welcome	Julie Mathieson.			
As you ar	e making a new referral	in a Professional capacity, please selec	t 'Apply to Manage Accou	nt' in order to progress.
When cor select the	npleting the form can yo option: 'Someone else a	u please ensure when updating the fo s a Professional e.g. GP'.	llowing field - 'I am comple	eting this form on behalf of - you
Apply to M	anage an Account			

Home Icon

1. Select **Home icon** - if you select this icon you will be taken back to the **Welcome Page** for the **'Sunderland City Council Adult Social Care Information Portal'**:

Welcome to Sunderland City Coun Information Portal	cil Adult Social Care
Your information, advice and support hub for adults	
Information, advice and guidance	Worried about someone?
1	

Adult Social Care Icon

1. Select the Adult Social Care icon:

Home Adult Social Care Sunderland Information Point	💄 Julie Mathieson 🔻	Sunderland City Council	
---	---------------------	----------------------------	--

Liquidlogic

2. You will leave the Sunderland Adults Social Concern Portal and you will be taken to the Adult Social Care page from where information can be accessed in relation to a range of Adult Social Care services/support simply by clicking on the relevant heading shown on the screen below:

Sign up to email alerts Sunderland Information Point	Co-operative Council Log into your account
Residents 🗸 Business 🗸 Your Council 🗸 🔾	Sunderland City Council
Home > Residents > Health and wellbeing	
Adult social care	
Smart home technology	Specialised equipment, monitors and alarms
Adult social care and support	Blue Badge scheme
Worried about someone?	

3. To return to the **Sunderland Adults Social Concern Portal**, scroll to the top of your screen and click on the **Portal tab with the same name as the screen that you navigated from**:

Portal Home X	🜔 Adult social care - Sunderland 🗆 🗙	Report a safeguarding concerns x U Liquidlogic Web Applications - L x P BI launch pad
	,	

Portal - Additional Functions

 As already outlined above, once you are logged onto the Portal, the icons on the Blue ribbon at the top of the screen will change to reflect that you are logged on to your account. The My Account heading that appeared before you logged on will have changed to your name and offers additional and very useful functionality:



2. Click on your name, the following menu will appear:



My Account

1. Select **My Account**. You will be taken to the 'Welcome to PIN Connect page' where you can make a **Safeguarding Adults Concern** referral by selecting **Apply to Manage an Account**



Update Account

1. Select Update Account



2. You will be taken to the **Update Account Details** page where you can amend your profile details and change your password:

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Update Account Details		
Change profile details To keep your account secure, we'll ask you to enter your password to authorise your details change. Change profile details Change password Change password		

3. Select Change profile details. The following screen will appear:

Your current password *	
Forename *	
Diane	
Surname *	
Dodds	
Mobile Phone Number:	
09999999999999	

CP	
Gr	
Organisation: *	
Sunderland City Council	
Property name	
louse no	
2	
itreet *	
Union Street	
krea	
own/City *	
Sunderland	
County	
ostcode *	
sr4 0ls	

4. Make the amends in the relevant fields. In order for the amends to be accepted YOU MUST enter your password into mandatory field: Your current password * If you do not do this and select Finish at the bottom of the page, the following prompt will appear:

Change Profile		
Update your account details. A notification will be sent to the local authority with the updated	detai	ils.
Your current password *		
Please enter your current password		

5. Once you have entered your password, scroll to the bottom of the page and select Finish:

Postcode	*
sr4 Ols	
Finish	Cancel

6. A Profile Change Confirmation message will automate. Select OK:

Profile Change Confirmation			
Your profile has been changed.			

7. You will be returned to the **Update Account Detail** screen. When you next log onto the Portal, the amends that you made to your Professional Profile will display in the first page of the **Adults Safeguarding Concern Portal form**

Worried about	t someone?	
4 How door this tool work?		
1 How does this tool work?	Safeguarding Ad	ult Concern Form
2 Safeguarding Adult Concern Form		
3.B - Details of the alleged	Care Act 2014	
abuse and/or neglect	For notification of s	suspected or actual abuse or neglect to an individual
4 C - Further details on the	Please do not save a corv o	of this form to use as a template on your own storage area as this form will be
named adult	updated as and when requ	ired; any copies you hold may be out of date, and, if submitted, will slow the
5 D - Alleged perpetrator	process of raising the conc	em.
6 E - Details of the person completing this form	For further information, do the <u>Sunderland City Counc</u>	cuments and guidance to support the completion of this form, please access i Website
7 F - General information	A - DETAILS OF THE	ADULT ALLEGED TO BE EXPERIENCING OR AT RISK
8 Supporting	OF ABUSE AND/OR	NEGLECT (NAMED ADULT)
Documentation	Your Details (Porta	User)
9 Submit	First name	Julie
	Last name	Mathieson
		maureson
	Role	
		GP
	Organisation	Sunderland City Council
	Address	2 Union Street
		Sunderland Tyne and Wear
		sr4 0ls
	Email	is the mathian and the underland area ad-
		human and an
	Telenhone	
	relephone	07341881359

8. Click on Change Password:



- 9. **The Change Password** screen will appear allowing you to update your Portal password. **Please Note:**
 - You MUST comply with Password Policy as highlighted below in order to re-set it
 - You cannot choose passwords that you have previously used for the Portal:

Change Password	
ease enter your new password	
Your current password	Password Policy Your password must meet the following requirements:
Your new password	 It must be at least 12 characters long It must contain at least one letter It must contain only letters, digits, and special characters
Confirm password	It must contain at least one upper- case letter It must contain at least one numerical digit It must contain at least one special
Finish Cancel	character.

10. **Note:** you can use the **eye icon** to see the password to ensure that you have not made any typos:

Y	our new password		
	··	@	
C	onfirm password		

11. Once you have entered/confirmed your new password, select **Finish.** You will be returned to the **Update Account Detail** screen

Accessing Submitted Forms

1. Select Submitted Forms:

My Account
Update Account
Submitted Forms
Recover a saved form
Logout

- 2. You will be taken to the following screen listing all Adults Safeguarding Concern Online Portal forms that you have recently submitted. Please Note: the forms will only be retained for a maximum of 365 days from the date that they were submitted. If you need to retain the referral for a longer period, then as detailed in 'Point 6' below, you will need to either:
 - Select the form which will open as a PDF version, 'save' the form and store electronically in your organisations filepath

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- Select the form which will open as a PDF version 'print' the form and store manually
- 3. The table will show the **name of the Person** that you have submitted the **Adults Safeguarding Concern referral** for and the **date that you made the online referral**

Submitted Forms	5			
	Recently Submitted Forms (Last :	30 Days)		
Ι Γ	Details	Name	Date	Response
	Safeguarding Adults Concerns Form	Wednesday Portal	18 Aug 2021	No response posted
	Cancel			•

- 4. You can access the Portal form by clicking on the <u>Safeguarding Adults Concerns Form</u> <u>link</u>.
- 5. A PDF version of the form will automate:

Sunderland City Cou	ncil Sunderlar City Council	D
All Departments		
Tel:		
Fax:		
How does this tool w	ork?	
Printed Assessment	Details	
Printed By	System User	
Print Date	15-Sep-2021 16:52	
Person	Mr Wednesday Portal, 05-Aug-1965 (Ref: 1016838)	
Lead Assessor	System User	
Status	Completed	
Dates		
Date Started	18-Aug-2021	
Safeguarding Adult C	Concern Form	

6. If you wish to retain a copy of this form for your records, you can access the usual PDF functionality to print the form or save it within your respective filepaths:



7. To return to the **Submitted Form** page in the Portal, select the **Submitted Forms tab** at the top of your screen:

Liquidlogic Web Ap	plications - L 🗙 🛛 🕇	BI launch pad	× C	Submitted Form	ns X	Mr Wedr	nesday Portal, 05-Aug-1 🗙 🗙	+
ightarrow C $lpha$	f https://proto	ocolsund.syhapp.com:146	20/web/porta	l/viewdoc?a=01	90f1a25d63f9b8F12	270712		
Adults needs assess 🎯	CallConfirmLive UAT	Captivate User Guide	🔎 Dashboard	Directory	🕒 Home - Electron	nic 🕒 ICT	✤ Indicative budgets	🕒 Liquid Logic - A
Set Microsoft Edge as th	he default application	for reading PDF files?	Set as defau	it				

Recovering a Saved Form

Overview:

1. When you are completing an Adults Safeguarding Concern Online Portal form that you have 'saved for later', a message will automate advising that 'Your form has been saved. An email confirmation has been sent. You have 30 days to submit the form'



- You will only receive 1 email per Portal session and not every time you save the form if you are still logged on within that same session.
- If you are **New User** (have not yet been registered and verified as a Professional by the Adults Safeguarding Team, you will only be able to access your saved form by the email sent as you have no way of accessing your Portal Account at this stage. If you are an **Existing User**, as you have been registered and verified as a Professional by the Adults Safeguarding Team, you will be able to log on to the Sunderland Portal account to re-access the saved form.

Saved assessment form					
Sunderland Adult Social Care Online <donotreply@liquidlogic.co.uk> To O Julie Mathieson Retention Policy 90 Days Mailbox Item Retention (90 days)</donotreply@liquidlogic.co.uk>	Expires 14/12/2021	← Reply	≪ Reply All	→ Forward Wed 15/09/202	21 18:07
*** This message originates from outside your organisation. Do not provide logir authenticity. If in doubt, email 'Ask.ICT@Sunderland.gov.uk' or call 561 5000 ***	n or password details. Do not click on links o	or attachmen	ts unless you	are sure of the	əir
Saved Assessment Form					
Please visit the recover page in order to continue with your form.					
Many Thanks					
Social Care Team					

2. Select Recover a Saved Form



3. You will be taken to the **Recover an Assessment** page. This screen will show:

- A list of Adults Safeguarding Concern Online Portal forms that you have 'saved for later' within 30 days which will be counted from the Start Date e.g. the date that you saved the form for later
- The number of days left before the Form will be deleted from the Portals.
 REMEMBER although you have a maximum of 30 days in which to submit the online Adults Safeguarding Concern, YOU MUST submit a referral as SOON AS POSSIBLE after the alleged incident. The '30 days' is purely a function offered by the Portal and is not reflective of the Sunderland Adults Safeguarding Teams recommended time standards.

Recover an Assessment				
Recover a saved form	5	Saved Forms		
		Start Date	Description	Days Left
	1	09 Sep 2021 8:09 AM	Safeguarding Adults Concerns Form	24 days
	<u>2</u>	13 Sep 2021 8:06 AM	Safeguarding Adults Concerns Form	28 days
	<u>3</u>	13 Sep 2021 8:29 AM	Safeguarding Adults Concerns Form	28 days
	<u>4</u>	13 Sep 2021 8:33 AM	Safeguarding Adults Concerns Form	28 days
	<u>5</u>	13 Sep 2021 8:59 AM	Safeguarding Adults Concerns Form	28 days
	<u>6</u>	15 Sep 2021 10:28 AM	Safeguarding Adults Concerns Form	30 days
	Can	cel		

4. You can click on any of the **saved forms** to access the **actual form** so you can further update. Once completed you will need to follow the normal submission process as outlined in this guide. For further details of the process for Saving the form for later, click on the following link: **Saving the Form for Later**

Logging Out

 Logging out – To ensure that your session is properly disconnected from the Adult Social Care Information Portal, YOU MUST logout by clicking on your name in the blue ribbon at the top of your screen

Home Adult Social Care Sunderland Information Po	pint Julie Mathieson - Sunderland City Council
--	---

2. The following menu will appear. Select Logout

	Ci	
My Account		
Update Account		
Submitted Forms		
Recover a saved form		
Logout		

3. The screen below will confirm that you are now logged out:

Home	Adult Social Care	Sunderland Information Point	My Account	Recover a saved form		
You	You are now logged out of PIN Connect					
Click	Click Home to go the home page, or Login to login again.					
Home	Login					

Accessing the Safeguarding Form via LAS (for Therapy Practitioners and Social Work Teams only)

For Professionals who have direct access to LAS (Therapy Practitioners and Social Work Teams), a copy of the Portal form will no longer appear in the respective Safeguarding Contact via **Attachments** page, instead, it will need to be accessed via the **View Submitted form** link below:

Information Record		☐ Save Einalise R
🖶 Print 🔒 Recent 🃮	Contact Record	
Contact Record **	Contact Details	
 Service User Additional Details Safeguarding - Member of Public 	Who has made contact?	Any other Professional
I Attachments (0)	Complete the details of the Extern	al Agency or Professional
 Show Most Recent Answers 	Professional	
	Position	
	Agency	Liquidlogic Portal
	Address	WCRC, Ayton Rd, Washington, Washington, Sunderland, ne38 0da
		æ
	Telephone	01915613535
	Referrer's email address	
	Source of Contact	· · · ·
	Please Specify if 'Other' above	
	Contact Method	Portal Contact
	Submitted Self Assessment:	View Submitted Form
	Date and time of Contact Alter as necessary	02-Dec-2021 17:02
	Contact Type	Safeguarding Adults Concern

END OF PROCESS