**People in Positions of Trust (PiPoT) Information Gathering Form**

*Use the PiPoT procedures for guidance when completing this form, in particular section 5 two to six*

|  |  |
| --- | --- |
| **Date of referral** | Click here to enter text. |

|  |  |
| --- | --- |
| **PiPoT against whom the allegation is made**  (Name, address & contact details) | Click here to enter text. |
| **Job role**  (Specify paid or unpaid) | Click here to enter text. |
| **Employer/Agency/Organisation**  (Name, address & contact details) | Click here to enter text. |

|  |  |
| --- | --- |
| **Adult MASH lead** | Click here to enter text. |

|  |  |
| --- | --- |
| **MASH Manager’s Actions** | |
| Is this a PiPoT referral? | Click here to enter text. | |
| Is PiPoT a PCC/CCC employee? | Click here to enter text.  ***If yes, refer to PSW*** | |
| If not a PiPoT referral, reason closed | Click here to enter text. | |

|  |  |
| --- | --- |
| **MASH Adult Safeguarding Practitioner’s Actions** | |
| Is a Children’s PiPoT required? | Click here to enter text.  *If yes, state how will lead the investigation* |

|  |  |
| --- | --- |
| **Details of Actions/Contacts with Referrer** | |
| **Date** | **Action taken** |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |

|  |  |
| --- | --- |
| **Details of Actions/Contacts with PiPoT** | |
| **Date** | **Action taken** |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |

|  |  |
| --- | --- |
| **Details of Actions/Contacts with Employer** | |
| **Date** | **Action taken** |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |

|  |
| --- |
| **Referral outcome** – Include justification for decisions, be proportionate.  *Refer to PiPoT procedures, section 5, steps five and six* |
| Click here to enter text. |

**FOR LOCAL AUTHORITY USE**

**This process should not be followed where an identified adult coming under safeguarding is at risk. The Safeguarding Adults process must be used.**