|  |
| --- |
| **Request for Information: Adult Safeguarding Team** |

Please fill in the below to the best of your knowledge; the rationale behind the request needs to be clear and concise.

**Confidential Data**

The data you are requesting is sensitive and highly confidential, The Adult Safeguarding Team will seek legal advice before a decision is reached as to whether the information should be shared in accordance with legislative guidance: article 8 ECHR and in the wider public interests. Any information gathered as part of your request will be kept and stored securely and in accordance with schedule 1 of the Data Protection Act and Article 5 of the GDPR Regulations.

Please note that information will only be shared if there are significant risks to children, young people and / or adults with care and support needs and whereby the risk posed outweighs the need for confidentiality.

In order to accept this referral your identity must be confirmed. To ensure this request is considered appropriately please provide the following:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Date of Request:** | |  | | | | |
| **Name of person the enquiry is about:** | |  | | | | |
| **Address:** | |  | | | | |
| **Employment status:** | |  | | | | |
| **Details of your Request and rationale: please fully explain the reason for making this request and the information you wish to access as a result.**  **Continue on a separate sheet of paper if necessary** | |  | | | | |
| **Details of person making the enquiry** | | | | | |
| **Surname** |  | | **First Name/s** |  | |
| **Position** |  | | **Email Address** |  | |
| **Agency** |  | | **Tel. No/Mobile** |  | |
| **Address** |  | | | | |
| **How would you like to be contacted?** | **Secure Email (via Egress)** | | | |  |
| **Post (Recorded Delivery)** | | | |  |

|  |
| --- |
| **Practitioner Decision** |
| *Document full clear rationale underpinning your decision (legislation)* |

Please return the form by post or email to the address below where it will be screened and responded to in due course:

|  |
| --- |
| **Postal Address:**  Adult Safeguarding Team  Wigan Life Centre South  College Avenue  PO BOX 100  WN1 1YN  **Tel:** 01942 486178  **Email:** [dutysteam@wiganmbc.gov.uk](mailto:dutysteam@wiganmbc.gov.uk) |