

## Kingston Vulnerable Adults Multi Agency Panel (KVAMA) Referral Form & Risk Assessment

**Submission - Please email your referral securely to: [kvama@kingston.gov.uk](mailto:kvama@kingston.gov.uk)**

The VAMA Panel is a partnership approach between organisations in the Kingston borough to consider cases of adults who remain at high risk of harm despite previous intervention efforts through either agency risk management systems or safeguarding adult's procedures. It is to consider high risk, complex cases where the initial Safeguarding Adult Procedure, and its associated policies, have been unable to reduce or alleviate the risk(s). Also, to focus on cases where people self-neglect, hoarding or display behaviours pose a risk to themselves and others and where all the usual channels have been exhausted.

### Referrer Details

<b>Name (of person making a referral):</b>	
<b>Name of your Agency</b>	
<b>Position:</b>	
<b>Your email:</b>	
<b>Your telephone number:</b>	

### Details of Person being referred

<b>NAME:</b>	<b>ADDRESS:</b>
<b>DATE OF BIRTH:</b>	<b>TENURE:</b>
<b>GP DETAILS:</b>	<b>IAS/RIO NUMBER:</b>
<b>ANY OTHER PROFESSIONALS/AGENCIES INVOLVED (current or previous):</b>	

<b>REASON FOR REFERRAL AND BACKGROUND INFORMATION</b> (Briefly outline the reasons for your referral. Include details of all actions & concerns taken by your agency or which you know about taken by other agencies)	
<b>Outline the help you are expecting from KVAMA</b>	

**Please identify the current risks** (Refusing to engage with support, Self-Neglect, Hoarding, Fire, Eviction/homelessness, Unsafe Environment, Risk of harm to others, Risks to children living in the property)

RISK IDENTIFIED		Population which may be affected					Severity				Likelihood				Risk Rating
No.		SU	FM	PC	P	P/O	1	2	3	4	1	2	3	4	(1-16)
1															
2															
3															
4															
5															
6															
7															
8															
9															
10															

SU = Service User, FM = Family Member, PC = Paid Carer, P = Professional worker, P/O = Public / Other

**SEVERITY:** 1=Low, 2=Medium, 3=High 4=Extreme

**LIKELIHOOD:** 1=Remote, 2=Possible, 3=Probable, 4=Frequent

**RISK RATING: 1-4** - Continue with existing controls and regular ongoing monitoring. Do not refer to KVAMA

**5-8** - Requires attention to reduce rating and ongoing monitoring. Referral to KVAMA

**9-12** - Requires attention ASAP to bring the risk down to an acceptable level. Referral to KVAMA

**13-16** - The risk is extremely high and needs further discussion with supervisor / line manager. Referral to KVAMA

**Please provide details of any current risk management plan in place**

Risk No.	A)	Current risk Management in place to reduce risk	B)	Further Risk Management Required	Responsible Person	Implemented On (DATE)
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

## **Guidelines on how to complete the Risk Assessment Form**

This assessment can be used as a stand-alone document or as part of a more in-depth assessment of the risks involved in a service user's life. A qualified or non-qualified member of staff can complete the form but they must know the service user well. It is recommended that more than one person/professional is involved when completing this form.

### **Part One**

#### **Reason for Referral and Background information**

Outline the reasons for referral. Include details of all actions and concerns taken by your agency or which you know have been taken by other agencies. Provide any relevant information regarding the service user including their level of capacity, relevant health issues, accommodation, staff support etc.

#### **Risk Identified**

Describe each risk adding more rows if necessary i.e. because of (x) – (y) may happen

#### **Population**

- Identify who may be at risk e.g.
- Service user (client / patient)
- Family Member (parent / sibling / grandparent / child)
- Paid Carer (support worker)
- Professional Worker (social worker / district or community nurse / therapist / GP)
- Public / Other (shop worker / delivery person / taxi or bus driver)

#### **Severity**

Describe the severity of the risk using the 1 – 4 rating scale (1 being low and 4 being extreme)

#### **Likelihood**

Describe the likelihood of the risk happening using the 1 – 4 rating scale (1 being remote and 4 being frequent)

#### **Risk Rating**

Multiply the severity rating by the likelihood rating and record the number, which will be between 1 and 16.

### **Part Two**

#### **Current Risk Management**

In *all cases* describe risk management plans that are currently in place

#### **Further Risk Management**

If the risk rating is between 1 and 4 this means there is minimal risk and there is no need for changes to the risk management. If the rating is 5 and over, further risk management needs to be put in place to ensure the risk is reduced. As the rating rises, so does the risk so it is important to consider if there is a better way of managing the risk. Referral to KVAMA.

#### **Responsible Person**

Document on the form who is responsible for monitoring or implementing the risk management plan. This can include the service user.

#### **Dates**

Document the date when the Risk Assessment form was completed. Provide a time scale for when the further risk management will be implemented by. Provide a date when the form will be reviewed.

## 4 x 4 Risk Assessment Matrix

**Quantify the Severity of the Risk** (something that can cause harm)

**1.Low**

(risk will not result in serious injury or illness - remote possibility of damage)

**2.Medium**

(risk can cause illness, injury or equipment damage but the results would not be expected to be serious)

**3.High**

(risk can result in serious injury and/or illness, property & equipment damage)

**4.Extreme**

(imminent danger exists, risk capable of causing death and illness on a wide scale)

**THEN**

**Quantify the Likelihood of the Risk being realised**

**1.Remote** (unlikely, though conceivable)

**2.Possible** (likely to occur)

**3.Probable** (will occur)

**4.Frequent** (frequent event)

**NOW**

**Calculate the Risk Rating (Severity X Likelihood):**

**If the Risk Rating is between:**

**1-4** - Continue with existing risk management and regular monitoring. Do not refer to KVAMA

**5-8** - Requires attention to reduce rating and ongoing monitoring. Referral to KVAMA

**9-12** – Requires attention ASAP to bring the risk down to an acceptable level. Referral to KVAMA

**13-16** – The risk is extremely high and needs further discussion with supervisor/line manager. Referral to KVAMA