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**Identifying, Recording and Reviewing Warnings**

This document is for Adult Care and Community Wellbeing only.

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# **KEY POINTS**

* Warnings should be added to records where there are concerns of risk to self or others that need to be flagged to anyone potentially coming in to contact with a person or family.
* Warnings should stem from a risk assessment evident on the record.
* Warnings should be reviewed each time an involvement or episode is ended to determine whether they need to remain in place – annual review is the minimum requirement.

# **Introduction**

A Warning is a point of concern recorded in the person’s record of which other professionals need to be immediately aware if they are involved in a person’s case.

Where a person’s Risk Assessment shows that there is significant risk to the person or those around them (for example family, friends, neighbours, members of staff, members of the public), a Warning must be added to their record and the record of any related person affected by the risk issue.

It is important that a Warning should be removed as soon as the reason for its existence has expired. This is to ensure that information held about the person is accurate and that staff are fully informed of the person’s current situation. For this reason, Warnings must be reviewed regularly, as per agreed timescales, and lead practitioners must monitor Warnings to ensure that none are overlooked.

A key worker should discuss any potential requirement for a Warning to be recorded with their lead practitioner prior to it being recorded. The discussion should consider risks identified in relevant Needs Assessments, Risk Assessment and Management Plans.

The needs of the person should dictate how often the Warning is to be reviewed and the Warning must have a review date of no more than one year from the date of the request. The lead practitioner must be satisfied that the risk is adequately articulated and recorded on the case file.

The key worker is responsible for monitoring and reviewing Warnings attached to their allocated cases. The lead practitioner is responsible for cases without an allocated worker.

The need for a Warning to remain open must be reviewed prior to closing the case. If there is a reason for the Warning to remain in place, the case should continue to be reviewed regularly.

# **Decision to Record a Warning**

The following steps should be taken:

* the practitioner completes the Risk Assessment;
* the practitioner identifies the potential need for a Warning to be added to the person’s record;
* the practitioner and lead practitioner discuss the Risk Assessment and agree whether recording the Warning is appropriate;
* the lead practitioner records a rationale in the person’s record, detailing the discussion and decision, i.e. evaluation of the risk. The record should only contain the information of which a professional needs to be immediately aware of and avoid confidential information, for example details of where more detailed information can be found or who to contact for further details. Care must be taken to ensure the information is concise and as factual as possible, avoiding conjecture. Any other related information should be recorded in the Risk Assessment;
* the lead practitioner records the Warning Type, with a review date of no more than one year from the date of the request;
* the lead practitioner must be satisfied that the risk is adequately articulated, and the Risk Assessment is recorded on the case file.

# **Review of a Warning**

The following steps should be taken when reviewing a Warning:

* the needs of the person should dictate how often the Warning is to be reviewed. The minimum standard for Warning Reviews is at least annually;
* if it is clear to the lead practitioner during a one-to-one discussion and other evidence available, that the Warning and the person’s circumstances remain unchanged, they can update the Warning Review Date and record the decision in the relevant records without allocating the review to a practitioner;
* in all other circumstances, the case needs to be allocated to a key worker, who is then responsible for reviewing the Warning. If the person does not have a current key worker, the practitioner who originally identified the need for the Warning, if they are available should review, or the case to be allocated to another keyworker;
* the key worker and the lead practitioner should discuss whether the Warning is to remain open or be ended;
* the key worker and the lead practitioner should pay particular attention to possible patterns forming and agree required action;
* the lead practitioner should record the details of the discussion and decision, i.e. evaluation of the risk;
* if the Warning is to remain open, the Warning must include a new review date of no more than one year from the date of the previous review;
* the lead practitioner must be satisfied that the risk is adequately articulated, and the Risk Assessment and/or Risk Management Plan are recorded.

# **Monitoring of Warnings**

The following steps should be taken when monitoring Warnings:

* the key worker is responsible for monitoring and reviewing Warnings attached to their allocated cases. The lead practitioner is responsible for cases without an allocated worker;
* the frequency of review for Warnings must be recorded in the Risk Assessment, if there is one, and strictly adhered to. The minimum amount of time between Warning Reviews is annually, in line with the annual review;
* the need for a Warning to remain open on a person’s record must be reviewed prior to closing the case. If there is a reason for the Warning to remain in place, the case should continue to be reviewed regularly;
* lead practitioners should run the Warning Exception Report at least bi-monthly to ensure all reviews are up to date.