

MASM Proforma

Name of person

Address

Date of Meeting

In Attendance:

Chair:

Apologies:

Purpose of Meeting: To co-ordinate a multi-agency meeting to share information, assess risk and produce a plan to minimise the potential risk to and/or from a vulnerable adult.

Please explain why client or patient did not attend the meeting:

Situation (Consider all relevant circumstances. Key worker to provide succinct case overview, why we are here, what brought us to this meeting, etc.?)

Does the person have capacity? (What are the specific mental capacity issues, who assessed them, are they recorded and what are the outcomes? What is their understanding of the potential cause, queries of this situation?)

Regaining of Mental Capacity – Where appropriate

What are the specific risks to this person and/or others? (Usually care, finances, possibly treatment, something else?) *Record individual risks and rate on a risk scale i.e. low, medium, high.(Refer to Thresholds document)

What are the person's wishes, past and present views, feelings beliefs and values?

What are the views of others? (Consider everyone's views and record these, can include: family, carers, relatives, others as per case needs ect.)

Is there an advocate? (What are their views?)

What actions and interventions have taken place to date?

Conclusion/Outcomes (Reflect on the discussions of each point in the pro-forma and attempt and encourage all to reach an agreed overview of the issues and outcomes.)

Recommendations/Outcomes (Be specific, names/ people/ lead agency for each issue/identifies tasks with time frames. Set a review date.)

1.

2.

3.

4.

5.

Chair persons (Name, title, signature and date)