

Specialists in **Place-Making**

*Supporting artists of quality in participatory, place-led, practice*

**Safeguarding Adults & Children Policy**

**Purpose:**  To provide a clear organisational statement on our stance for Safeguarding Adults and Children

*This policy replaces all previous versions*

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**1 Introduction**

**1.1** We are committed to supporting the rights of children, young people and adults at risk to be protected from abuse and to making sure all staff and volunteers work together, in line with this agreed Policy, and act promptly when dealing with allegations or suspicions of abuse.

1.2 For the purposes of this Safeguarding Policy, the Project Co-ordinator is JoJo Spinks (contact details page 5).

**2 Interwoven Partners Agreement**

2.1 The Partners agree that:

**Interwoven Productions (IP)** VOLUNTEERS AND CREATIVE CONTRACTORS WILL NOT WORK ALONE WITH CHILDREN, YOUNG PEOPLE OR VULNERABLE ADULTS. A “buddy” system will therefore be in place for all workshops, rehearsal or other events, outside of the normal construct of partner organisations, and involving these groups.

ALL IP VOLUNTEERS AND CREATIVE CONTRACTORS WILL require a clear Enhanced DBS check in all work-groups before being allowed to carry out Interwoven activity that involves contact with vulnerable workgroups (see Safeguarding Policy) or entering areas, such as schools, where vulnerable groups are. New DBS checks are required every 3 years following continued involvement with Interwoven. Details of checks to be kept by the Project Co-ordinator.

SAFEGUARDING IS EVERYBODY’S BUSINESS - Safeguarding is the responsibility of everyone. We will work together to prevent and minimise abuse. If we have concerns that someone is being abused our loyalty to the vulnerable person comes before anything else – our group, other service users, our colleagues and the person’s friends and family.

DOING NOTHING IS NOT AN OPTION - If we know or suspect that a child or vulnerable adult is being abused, we will do something about it and ensure our work is properly recorded.

**3 Definitions**

3.1 **The definition of a vulnerable adult is a person over the age of 18 years who:**

* Is or may be in need of / eligible for Community Care Services by reason of mental or other disability, age or illness
* AND is unable to take care of him / herself
* OR is unable to protect him / herself from significant harm or exploitation.

3.2 **A vulnerable person may fall into any one of the following groups:**

* Older and frail people; people with a mental health need, a learning difficulty, a physical impairment, a sensory impairment; people who are substance or alcohol dependent; or family carers providing assistance to another vulnerable adult.

3.3 **Abuse is a violation of an individual’s human and civil rights by any other persons(s) or group of people. Abuse may be single or repeated acts. It can be:**

* Physical: for example, hitting, slapping, burning, pushing, restraining or giving the wrong medication.
* Psychological and emotional: for example, shouting, swearing, frightening, blaming, ignoring or humiliating a person, threats of harm or abandonment, intimidation, verbal abuse.
* Financial: including the illegal or unauthorised use of a person’s property, money, pension book or other valuables, pressure in connection with wills, property or inheritance.
* Sexual: such as forcing a person to take part in any sexual activity without his or her informed consent – this can occur in any relationship.
* Discriminatory: including racist or sexist remarks or comments based on a person’s disability, age or illness, and other forms of harassment, slurs or similar treatment. This also includes stopping someone from being involved in religious or cultural activity, services or support networks;
* Institutional: the collective failure of an organisation to provide an appropriate and professional service to vulnerable people. This includes a failure to ensure the necessary safeguards are in place to protect vulnerable adults and maintain good standards of care in accordance with individual needs, including training of staff, supervision and management, record keeping and liaising with other providers of care.
* Neglect and acts of omission: including ignoring medical or physical care needs. These can be deliberate or unintentional, amounting to abuse by a carer or self-neglect by the vulnerable person: for example, where a person is deprived of food, heat, clothing, comfort or essential medication, or failing to provide access to appropriate health or social care services.

4 **How Might We Notice Abuse?**

4.1 Concerns about or evidence of abuse can come to us through:

* A direct disclosure by the vulnerable adult.
* A complaint or expression of concern by another member of staff, a volunteer, another service user, a carer, a member of the public or relative.
* An observation of the behaviour of the vulnerable adult by the volunteer, member of staff or carer.

4.2 Where abuse to a vulnerable person is alleged, suspected, reported or concerns are raised, the Safeguarding Procedure must be followed.

4.3 The confidentiality of the vulnerable person will be respected wherever possible and their consent obtained to share information.

4.4 The vulnerable person should be made aware that staff cannot ignore issues around abuse and that steps will be taken to deal with them in as sensitive a manner as possible. The welfare of the individual is paramount.

**5 Useful Contacts**

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| Project co-ordinator – JoJo Spinks, Interwoven Productions – 07855 935137jojo@interwovenproductions.com |
| Police – Non emergency number 101 (Specify it is a safeguarding issue – use 999 in an emergency).  |
| Exeter Community Safety Partnership Police Local Neighbourhood TeamExeter\_east@devonandcornwall.pnn.police.ukPCSO Percy Giles 07711 037222 |

**6 Safeguarding Procedure**

6.1If you think abuse has or may have occurred. Act immediately.

6.2 It is the responsibility of the person first becoming aware of a situation where there may be a child or vulnerable adult subject to, or at risk of, abuse to:

***Make Safe***

* Deal with the immediate needs of the person. This may mean taking reasonable steps to ensure the adult is in no immediate danger and seeking medical treatment if required as a matter of urgency.
* Do NOT discuss the allegation of abuse with the alleged perpetrator.
* Do NOT disturb or destroy articles that could be used in evidence. Where an assault of some kind is suspected do not wash or bathe the person unless this is associated with first aid treatment necessary to prevent further harm.
* If the allegation is about a staff member or volunteer of any organisation, ensure that the allegation is properly managed. This may include suspending the member(s) of staff or volunteer. The staff member or volunteer is also entitled to support at this stage. Please refer to the Disciplinary Policy and Procedure.

***Inform***

* Tell your Project Co-ordinator immediately. Contact the police if it is thought a crime has just been committed.

***Record***

* Record details of the allegation as soon as possible somewhere that can be kept secure.

**7 Responsibilities**

7.1 It is the responsibility of the Project Co-ordinator to:

* Decide without delay on the most appropriate course of action once the allegation or suspicion of abuse has been raised.
* Deal with any immediate needs:
	+ Ensure that the victim of the alleged abuse is safe
	+ Ensure that any necessary emergency medical treatment is arranged.
	+ Ensure that no forensic evidence is lost.
	+ If the alleged perpetrator is also a vulnerable adult, ensure that a member of staff is allocated to attend to their needs and ensure that other service users are not put at risk.
* Clarify the facts stated by the member of staff but do NOT in any circumstances discuss the allegation of abuse with the alleged perpetrator or, if possible, the victim.
* Check that the circumstances fall within the safeguarding adults procedures i.e. meeting the definition of abuse as defined in this Policy and Procedures.
* Address issues of consent and confidentiality.
* A formal referral must be made on the same day as the alert is raised wherever:
	+ A crime has been, could have been, or yet could be committed.
	+ There is a suspicion that an abuse has taken place.
	+ The allegation involves a member of staff or paid carer.
	+ Other vulnerable adults are at risk.
	+ The alleged perpetrator is a vulnerable adult.
	+ They are unsure if abuse has taken place.

7.2 Where a formal referral is made, the organisational line manager or Project Co-ordinator will make the other Projects partners aware via a confidential route.

7.3 Where a decision is made NOT to refer, the alert must be recorded, with the reasons for the decision not to refer.

**8 Policy Review**

8.1 This policy will be reviewed every 2 years unless there is a change of law or contractual requirements which will result in earlier review and changes.