

Arts on Prescription (AOP) Safeguarding Adults Policy and Procedures

Safeguarding Lead	East Sussex Adult Social Care contact
Tara Reddy AOP 0796 6442 281 tara.reddy@artsonprescription.org	0345 6080 191 7days a week 8am-8pm on line www.eastsussex.gov.uk/socialcare/ Text: 0779 7878 111

AOP AIMS

Arts on Prescription CIC (AOP) is a not for profit organisation providing creative activities, reminiscence and confidence building workshops designed to enhance mental health, well being and promote social engagement.

We are an innovative community resource linking art groups with health services to enable and promote well being through creative arts-based workshops and intergenerational projects. Our fun activities are designed to accommodate all needs and abilities delivered within GP Surgeries or in Community Settings.

Definition of Safeguarding (ADULTS)

'Safeguarding means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult's well- being is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action. This must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances.' Care and Support Statutory Guidance, Department of Health, updated February 2018 (14.7 and 148)

Under the Human Rights Act 1998, everyone has the right to live free from abuse and neglect. https://www.equalityhumanrights.com/en/human-rights/human-rights-act

Why is the Safe Guarding Policy (SGP) needed?

The people who are likely to attend will be referred by their GP or other health professional or self referred. They may have or had some mental health issues. Therefore may be seen as vulnerable at times. The sessions offered are with various practitioners used to working with diverse groups of people. The policy will give specific guidance to the practitioners for a sound understanding of this subject and actions needed to keep the people attending sessions safe.



AOP Safe Guarding Policy Statement

AOP will not tolerate the abuse of adults in any of its forms and is committed to safeguarding all participants who attend their groups and especially adults with care and support needs.

This policy outlines the steps AOP will make to safeguard an adult with care and support needs if they are deemed to be at risk or are at risk. This policy sets out the roles and responsibilities of AOP in working together with other professionals and agencies in promoting the adult's welfare and safeguarding them from abuse and neglect.

AOP will ensure that decisions made will allow adults to make their own choices and include them in any decision making. AOP will ensure that safe and effective working practices are in place. This policy is intended to support practitioners and volunteers working within the organization to understand their role and responsibilities in safeguarding adults. All board members, practitioners and volunteers are expected to follow this policy.

The key objectives of this policy are for all who is part of AOP to:

- have an overview of adult safeguarding
- be clear about their responsibility to safeguard adults
- ensure the necessary actions are taken where an adult with care and support needs is deemed to be at risk

AOP follows the six key principles that underpin safeguarding work

Empowerment

Prevention

Proportionality (The least intrusive response appropriate to the risk presented)

Protection

Partnership

Accountability

- AOP will ensure that their work reflects the principles above and ensure the adult with care and support needs is involved in decisions and informed consent is obtained.
- AOP will ensure that the safeguarding action agreed is the least intrusive response to the risk.
- AOP will ensure that partners from the community will be involved in any safeguarding work in preventing, detecting and reporting neglect and abuse and this should be transparent and accountable in delivering safeguarding actions.
- AOP will ensure that adults are involved in their safeguarding arrangements and each individual is dealt with on a case by case basis. As adults may have different preferences, histories and life styles, the same process may not work for all.

Adult safeguarding duties apply to all team members of AOP

The Care Act 2014/update 2018 https://www.gov.uk/government/publications/care-act-statutory-guidance/ sets out that adult safeguarding duties apply to adults who:

Have care and support needs



- · Are experiencing, or is at risk of, abuse and neglect
- Are unable to protect themselves from either the risk of, or the experience of abuse or neglect, because of those needs.

Prevent for concerns of Radicalisation

Radicalisation and extremism of adults with care and support needs is a form of emotional/psychological exploitation. Radicalisation can take place through direct personal contact, or indirectly through social media. If team members are concerned that an adult with care and support needs is at risk of being radicalised and drawn into terrorism, they should treat it in the same way as any other safeguarding concern. For more information about

Prevent see: https://www.gov.uk/government/publications/prevent-duty-guidance

Making Safeguarding Personal (MSP)

MSP means a case should be person-led and outcome-focused. The individual should be involved in identifying how best to respond to their safeguarding situation by giving them more choice and control as well as improving quality of life, well-being and safety.

Safeguarding Lead ROLE (ASG Lead)

All practitioners and volunteers should contact the ASG Lead Tara Reddy for any concerns/queries they have in regards to safeguarding adults. A log of the concern will be kept in the AOP safeguarding logbook.

- The Lead in Adult Safeguarding (ASG) will be responsible for making decisions about notifying adult social services if required and consider alternative actions, where necessary.
- Will ensure that the safeguarding adults' policies and procedures are in place and up to date.
- Will ensure that safe environments are available for practitioners, volunteers and adults accessing the service.
- Will ensure that practitioners and volunteers are up to date regarding safeguarding adults' information and have training as needed.

Actions

When there is concern regarding the welfare of those attending groups and especially adults with care and support needs.

All practitioners and volunteers should contact the ASG Lead for all concerns/queries they have in regards to safeguarding adults. A log of the concern will be kept.



- Take emergency action if someone is at immediate risk of harm/in need of urgent medical attention. Dial 999 for emergency services
- 2. Get brief details about what has happened and what the adult would like done about it, but do not probe or conduct a mini-investigation
- 3. Explain The AOP ASG policy and procedures
- 4. Seek consent from the adult to take action and to report the concern
- Consider whether the adult may lack capacity to make decisions about their own and other people's safety and well-being. If you decide to act against their wishes or without their consent, you must record your decision and the reasons for this.
- 6. Report to the lead (ASG) Tara Reddy within the day of the concern
- 7. The ASG Lead and the organization should ensure that the adult with care and support needs is involved at all stages of their safeguarding enquiry ensuring a person-centred approach is adopted.

NOTE:

- If the allegation is against one of team report to ASG Lead
- o If the allegation is about the ASG Lead report to ES ASC team

The local authority Adult Social Care Team (ASC Team) will decide on who will lead on a safeguarding enquiry should it progress to that stage. The named organisation should not conduct its own safeguarding enquiry unless instructed to do so by the local authority.

Recording

Incidents will be recorded in a log book and kept in secure filing cupboard.

Details needed

- The participant name.
- The date time and venue
- Who is raising the concerned
- As far as possible, records should be written contemporaneously,
- Must be dated and signed
- Records about safeguarding concerns are confidential and only shared on need to know bases



Record all actions and record times

NOTE: AOP participants details are kept to a minimum as we do not hold more than basic information such as name, address, contact details and next of kin, any special needs, GP details and professional contacts if appropriate. Participants who are deemed vulnerable attend with their support worker who will be the adult with safeguarding responsibility as appropriate to the need.

Actions by ASG Lead

In making a decision whether to refer or not, the ASG Lead should take into account:

- The adult's wishes and preferred outcome
- Whether the adult has mental capacity to make an informed decision about their own and others' safety
- The safety or well-being of children or other adults with care and support needs
- Whether there is a person in a position of trust involved
- Whether a crime has been committed

This should inform the decision whether to notify the concern to the following people:

Police if a crime has been committed
East Sussex Adult Social Care regarding possible safeguarding enquiry
Professionals allocated to the person concerned
Family/relatives as appropriate (advice from adult ESASC)

Keep a record of the reasons for referring the concern or reasons for not referring.

ASL will send acknowledgement of the referral and brief feedback to the person raising the original concern. Feedback should be given in a way that will not make the situation worse or breach the Data Protection Act. If the police are involved, they should be consulted prior to giving feedback to the referrer to ensure any criminal investigation is not affected.

Other considerations for all AOP team members

Incidents of abuse may be one-off or multiple and may affect one person or more. Practitioners and volunteers should look beyond single incidents to identify patterns of harm. Accurate recording of information will also assist in recognising any patterns.

An adult may be unable to protect themselves from harm or exploitation due to many reasons, including their mental or physical incapacity, sensory loss or physical or learning disabilities. This could be an adult who is usually able to protect themselves from harm but maybe unable to do so because of an accident, disability, frailty, addiction or illness.



The Mental Capacity Act 2005/2018

https://www.nhs.uk/conditions/social-care-and-support-guide/making-decisions-for-someone-else/mental-capacity-act/ -practice.

CONFIDENTIALITY (ASG)

AOP expects all team members and volunteers, board members to maintain confidentiality in line with Data Protection law. However if there is concern regarding an adults health or personal safety under ASG policy it may be necessary to share relevant information with others. Sharing the right information, at the right time, with the right people can make all the difference to preventing harm.

Guidance on appropriate sharing see:

https://www.scie.org.uk/care-act-2014/safeguarding-adults/sharing-information

AOP Data privacy and Data protection policy will be on the AOP web site AOP Confidentiality in general

It is likely that people who attend groups will share personal information.

Therefore a clear statement regarding Confidentiality should be made clear to group members by practitioners. It is not appropriate to talk about what others share in the groups. Confidentiality will be kept by practitioners unless there is concern for the health, welfare and safety of individual group members or others.

Examples:

Extreme pain, distress, inappropriate behaviour and violence

Lack of self care or not taking medication for a diagnosed condition

It appears that the person is under the influence of alcohol or illegal drugs

In such circumstances confidentially cannot be kept. The ASG Lead is informed and other relevant people. Examples GP/CPN/Support Worker.

People who attend groups will be asked for details of next of kin and any relevant professionals involved.

Recruitment and selection

AOP seeks to make their organization safe for all. Safe recruitment practices, such as Disclosure and Barring checks reduce the risk of exposing adults with care and support needs to people unsuitable to work with them. These checks will be carried out for all who work with groups.



Awareness Training for AOP team members

Team members and volunteers will be offered training and records of such training will be logged and kept by ASG Lead.

AOP ensures that all team members and volunteers receive basic awareness training on safeguarding adults as they may come across adults with care and support needs who may be at risk of abuse. Those adults may report things of concern to Team members or volunteers who should be equipped with the basic knowledge around safeguarding adults and be confident to identify that abuse is taking place and action is required. All staff and volunteers should be clear about the core values of the organization and commitment to safeguarding adults. There are various training on ASG available which will be considered by the organization. When used they will be evaluated as to effectiveness There may be a may need to consider Safeguarding for children.

Support/Supervision for team members this will be ongoing and as needed.

Complaints procedure

AOP promotes transparency and honesty when things go wrong. All team members should apologise and be honest with service users and other relevant people when things go wrong. If any other member of the organisation is unhappy with decision about the safeguarding concern, they will be referred them to the AOP Board. The organization is committed to ensuring that team members who in good faith whistle-blow in the public interest, will be protected from reprisals and victimisation.

Copies of this policy will be made available to all AOP Board members, practitioners and volunteers to read and confirm their commitment to the policy.

Appendix

What are the types of safeguarding adults' abuse?

The Care and Support statutory guidance sets out the 10 main types of abuse:

- Physical abuse
- Neglect
- Sexual abuse
- Psychological
- Financial abuse
- Discriminatory

- Organisational
- Domestic violence
- Modern Slavery
- Self-neglect
- Genital Mutilation is a criminal offence and is reported to the police



However, you should keep an open mind about what constitutes abuse or neglect as it can take many forms and the circumstances of the individual case should always be considered

What are the possible signs of abuse?

Abuse and neglect can be difficult to spot. You should be alert to the following possible signs of abuse and neglect:

- Depression, self-harm or suicide attempts
- Difficulty making friends
- Fear or anxiety
- The person looks dirty or is not dressed properly
- The person never seems to have any money
- The person has an injury that is difficult to explain (such as bruises, finger marks, 'non-accidental'
- injury, neck, shoulders, chest and arms),

- The person has signs of a pressure ulcer,
- The person is experiencing insomnia
- The person seems frightened, or frightened of physical contact.
- Inappropriate sexual awareness or sexually explicit behaviour
- The person is withdrawn, changes in behaviour

You should ask the person if you are unsure about their well-being as there may be other explanations to the above presentation.

Who abuses and neglects adults?

Abuse can happen anywhere, even in somebody's own home. Most often abuse takes place by others who are in a position of trust and power. It can take place whether an adult lives alone or with others. Anyone can carry out abuse or neglect.

September 2019

TR/MD OAP