Adults at Risk Safeguarding Policy

Arts Uplift CIC · Reviewed and updated: October 2026 · Next review due: October 2027

Statement of Intent

Arts Uplift CIC is committed to safeguarding and promoting the welfare, dignity, and rights of all adults at risk who access our services. We recognise our responsibility to take all reasonable steps to protect individuals from abuse, neglect, and exploitation, and to promote their well-being. We believe that safeguarding is everyone's business, and we will act quickly, effectively and professionally when abuse or neglect is suspected or takes place.

Terminology

This policy uses the term "adult at risk" in place of "vulnerable adult". The term "vulnerable adult" can wrongly imply that some of the fault for abuse lies with the person who has been abused. Where earlier Arts Uplift documents or external guidance use "vulnerable adult", it should be read as meaning "adult at risk".

Our Safeguarding Principles

All of our safeguarding work is guided by the following principles:

- **Empowerment:** putting people first and helping them feel involved and informed
- **Protection:** supporting people who have experienced abuse so they can take action
- **Prevention:** responding quickly to suspected abuse and acting to reduce the risk of harm
- **Proportionality:** making sure that what we do is appropriate to the situation and the individual
- **Partnership:** sharing the right information in the right way, and working with other agencies
- **Accountability:** making sure everyone involved has a clear role and knows what it is

Legal and Policy Framework

This policy is written in line with:

- The Care Act 2014, which places duties on local authority adult social services as the lead agencies in protecting adults at risk in England
- The Mental Capacity Act 2005 and its Code of Practice
- The UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018

Definition of an Adult at Risk

An adult at risk is defined under the Care Act 2014 as a person aged 18 or over who:

- Has care and support needs (whether or not they are being met)
- Is experiencing, or at risk of, abuse or neglect, and
- As a result of their care and support needs is unable to protect themselves from the risk or experience of abuse or neglect.

This may include individuals with:

- Mental health difficulties
- Learning disabilities or physical impairments
- Sensory impairments
- Age-related frailty
- Long-term illness
- Substance misuse issues
- Experiences of domestic abuse

Mental Capacity and Consent

Under the Mental Capacity Act 2005, every adult is presumed to have the mental capacity to make informed choices about their safety and how they live their lives. Staff and volunteers must:

- Take into account a person's ability to understand what is likely to result from, or affect, their situation; to take action themselves to prevent abuse; and to take part as fully as they can in decisions about involving other agencies
- Involve the person as fully as possible in any decision that affects them, and seek their agreement before sharing information wherever it is safe and possible to do so
- Respect that a person who has capacity, and who is not being pressured, threatened, frightened or bullied, has the right to make a decision that others consider unwise

- Where a person lacks capacity to make a particular decision, ensure that decisions are made on their behalf in their best interests, in line with the Mental Capacity Act Code of Practice

Questions about capacity should be raised with the Designated Safeguarding Lead (DSL). Staff and volunteers should not make their own judgement that someone lacks capacity.

Types of Abuse (Care Act 2014)

Abuse is a misuse of power and control that one person has over another. It can be the result of an act or a failure to act, can be a one-off incident or ongoing, and can occur in any relationship. Abuse can fall into the following categories, and may not fit neatly into any one of them:

- **Physical:** assault, hitting, slapping, pushing, misuse of medication (including giving the wrong medication or none), restraint, or only letting someone do certain things at certain times
- **Sexual:** rape, sexual assault, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, taking sexual photographs, making someone look at pornography or watch sexual acts, or any sexual act the adult did not consent to or was pressured into
- **Emotional/Psychological:** threats of harm or abandonment, humiliation, blaming, controlling or intimidating behaviour, harassment, verbal abuse, cyber bullying, depriving someone of contact with others, isolation, or unreasonable withdrawal of services or support networks
- **Financial or Material:** theft, fraud, internet scamming, coercion or pressure in relation to finances (including wills, property, inheritance or financial transactions), or the misuse or theft of property, possessions or benefits
- **Neglect and Acts of Omission:** ignoring medical, emotional or physical care needs, failure to provide access to care, education or medical services, or not providing what someone needs to live, such as medication, adequate nutrition and heating
- **Discriminatory:** harassment or insults because of race, gender or gender identity, age, disability, sexual orientation or religion
- **Domestic Abuse:** psychological, physical, sexual, financial or emotional abuse by partners, family members or carers, including coercive control and so-called 'honour'-based violence
- **Modern Slavery:** slavery (including domestic slavery), human trafficking, forced labour
- **Organisational:** neglect or poor care in an institution or care setting, or where an organisation provides care in someone's own home, whether a one-off incident or ongoing ill treatment

- **Self-neglect:** behaviour showing someone is not caring for their personal hygiene, health or surroundings, including hoarding

Abuse can also be carried out by one adult at risk towards another. This is still abuse and must be dealt with. Some types of abuse are also criminal offences, and adults who lack capacity are protected by law in the same way as everyone else.

Who Might Abuse

Adults at risk can be abused by anyone who has contact with them. This includes family members, partners, paid carers and professional staff, volunteers, other adults at risk or service users, neighbours, friends and associates, strangers, and people who deliberately take advantage of vulnerable situations. Abuse is especially serious when carried out by someone in a position of power or authority, including Arts Uplift staff and volunteers.

Indicators of Abuse

Recognising abuse can be complex. These indicators do not automatically mean that someone is being abused, but they mean that we need to look more closely and report our concern.

Physical Abuse

- Unexplained injuries, burns, bruises or fractures
- Frequent medical visits with vague explanations
- Fear of being touched or flinching unexpectedly

Sexual Abuse

- Difficulty walking or sitting, torn or stained clothing
- Reluctance to be alone with certain individuals
- Sudden changes in behaviour or withdrawal

Emotional/Psychological Abuse

- Low self-esteem, anxiety, withdrawal or fearfulness
- Difficulty sleeping, confusion, or changes in communication
- Repeated blaming of themselves for issues

Financial Abuse

Financial abuse can occur on its own, but where other forms of abuse are taking place, financial abuse is also likely. Indicators include:

- Sudden loss of money or possessions, or selling possessions
- Unexplained withdrawals, being unable to pay bills, or lack of funds for essentials
- Financial documents being lost without explanation
- Sudden changes to a bank account, how it is used, or to a will or other financial documents; new people added as signatories
- Money or bank cards being used without the person's permission
- Overly protective or controlling behaviour by a carer or family member around money, or a carer having noticeably more money to spend
- A change in living conditions, or the person being cut off from family, friends or their social network

Neglect

- Poor personal hygiene, malnutrition, untreated medical needs
- Unsafe or unsuitable living environment
- Wearing inappropriate clothing for weather conditions

Discriminatory Abuse

- Derogatory remarks, isolation due to identity
- Signs of exclusion from groups or activities

Domestic Abuse

- Isolation from family/friends
- Low confidence, fearfulness around a partner/family member
- Frequent unexplained absences from activities

Modern Slavery

- Signs of fear, withdrawal, or lack of freedom
- Few personal possessions, always accompanied by others
- Evidence of being controlled or monitored

Organisational Abuse

- Rigid routines, lack of personal choice
- Poor standards of care or overcrowded facilities

Self-Neglect

- Extreme hoarding, refusing help with hygiene or health needs
- Living conditions hazardous to health and safety

Factors that can increase the risk of abuse

- Previous abuse or suspected abuse, or abuse of other members of the person's family
- Family tensions and conflict
- Cognitive impairment or brain injury, affecting memory, thinking or decision-making
- Depression, bereavement or recent loss of a partner
- Living alone, having no friends or social network, or little contact with family

Because many of the people we work with experience isolation, staff and volunteers should be particularly alert to these factors.

Forced Marriage

Forced marriage happens across all cultures. It is when someone is pressured into a marriage, they have not freely chosen, and it can also happen where someone lacks the mental capacity to consent. Possible signs include unreasonable restrictions placed on the person at home, talk of an impending wedding or family trip overseas, a sibling who has been forced to marry, or a person becoming withdrawn or absent from activities without explanation. Concerns about forced marriage must be reported to the DSL immediately and may be referred to the Forced Marriage Unit (gov.uk/stop-forced-marriage), as well as the police and adult social services.

Preventative Measures

Arts Uplift promotes prevention through:

- Safer recruitment procedures (including DBS checks and references)
- Staff and volunteer safeguarding induction and agreement
- Ongoing safeguarding training
- Risk assessments for all activities
- Clear codes of conduct
- Regular monitoring of services and partners
- Reporting procedures and escalation routes
- Policies on health and safety and data protection

Safer Recruitment and Vetting

Arts Uplift ensures all staff and appropriate volunteers are safely recruited. This includes:

- Two satisfactory references (including the most recent employer)
- Enhanced Disclosure and Barring Service (DBS) checks, renewed every 3 years

- Declaration of criminal convictions (spent and unspent) under the Rehabilitation of Offenders Act 1974 (Exceptions) Order
- Interviews to assess suitability for working with adults at risk

A previous conviction does not automatically preclude employment, but any risk posed must be fully considered.

Roles and Responsibilities

The Board of Directors adopts this policy, ensures it is kept up to date, and is responsible for making sure it is followed across the organisation.

The Designated Safeguarding Lead (DSL) is responsible for receiving and acting on safeguarding concerns, making referrals to the local authority, police and other agencies, keeping safeguarding records, ensuring staff and volunteers know about and follow the reporting procedures, and ensuring they have access to training and guidance.

Managers and project leads are responsible for making sure the people they work with understand this policy and have the skills to follow it, and for ensuring safeguarding is considered in the planning and risk assessment of every activity.

All staff and volunteers must know where to find a copy of this policy, read and understand it, and use it to identify and respond to abuse or the risk of abuse. Anyone who does not understand any part of it should ask the DSL for help.

Staff Training

All staff and volunteers must receive or have up to date safeguarding training appropriate to their role, covering:

- Recognising types and indicators of abuse
- Responding appropriately to disclosures
- Mental capacity, consent and best interests
- Duty to report and confidentiality
- Understanding the role of the Designated Safeguarding Lead (DSL)

Managers, project leads and Directors will attend training on their safeguarding responsibilities. Briefings will be provided to keep everyone updated whenever this policy or our procedures change.

Responding to Concerns

We take all suspicions and allegations of abuse seriously, and we respond quickly. The needs and wishes of the adult at risk are of the highest importance. Staff and volunteers must:

- Not investigate, but record and report concerns immediately
- Report directly to the Designated Safeguarding Lead (DSL). It is not necessary to prove that abuse has taken place before reporting a concern
- In an emergency or where someone is in immediate danger, call 999
- Where possible, listen to the person, reassure them, and avoid promising confidentiality

The DSL will decide on the appropriate response, acting in the person's best interests and involving them as fully as possible. This may include:

- Making a safeguarding adults referral to Coventry, Warwickshire or Worcestershire Adult Social Care (or whichever district we are working in). Local authority adult social services take the lead in coordinating the multi-agency response to safeguarding adults at risk
- Referring to the police where a crime may have been committed. Examples include physical, psychological or sexual assault, theft, fraud or other financial exploitation, and certain forms of discrimination
- Referring to the Forced Marriage Unit where forced marriage is suspected
- Raising concerns with the Care Quality Commission where the concern relates to a regulated care provider
- Considering whether a referral to the Disclosure and Barring Service is required where a person has been removed from working with adults at risk because of harm or risk of harm

We will agree the need to involve other agencies with the local authority or lead agency, so that our enquiries do not put any police investigation at risk.

Record Keeping

All safeguarding concerns must be recorded clearly and promptly, including:

- Date, time, setting
- Names of those involved
- What was said or observed (in the person's own words)
- Any action taken

Records are stored securely in compliance with UK GDPR and the Data Protection Act 2018 and are only accessible to authorised personnel.

Confidentiality and Information Sharing

Arts Uplift will handle all personal information in line with UK GDPR and the Data Protection Act 2018. Anyone who is being abused, or suspected of being abused, has a right to expect that their privacy, and that of their family and carers, will be protected.

Where safeguarding concerns exist, we will share information with relevant professionals so that we can protect the individual concerned or other people. We will:

- Seek the person's agreement before sharing personal information wherever it is safe and possible to do so
- Share information on a need-to-know basis only, and take care that the information shared is accurate
- Share information without consent where there is a risk of serious harm to the individual or others, where their vital interests are at stake, where a crime has been committed or may be prevented, where it is in the public interest, where it is in the best interests of a person who lacks capacity, or where required under safeguarding law or a court order
- Respect the rights of people who raise concerns in good faith, and of people who are accused of abuse

All personal data is stored securely and retained only as long as necessary.

Digital and Online Safeguarding

Staff engaging in online delivery must follow Arts Uplift's Online Safeguarding Principles, including:

- Safe online platforms
- Staff-present digital sessions
- Clear communication guidelines
- Carer or support worker involvement where appropriate

Staff Ratios and Risk Assessment

Each project will undergo a risk assessment to determine appropriate staff-to-participant ratios. As a general guide, a 1:10 ratio will be followed, with an additional representative from the partner organisation or from Arts Uplift present (staff or volunteers).

Partnership Working

Arts Uplift is committed to working in partnership with statutory and voluntary agencies to ensure effective safeguarding, in the knowledge that organisations working together is the best way to protect people. This includes making referrals, sharing information appropriately, attending multi-agency meetings, and participating in safeguarding reviews when required.

Whistleblowing

Arts Uplift is committed to the highest standards of openness, integrity, and accountability. Staff, volunteers, and partners are encouraged to raise concerns if they believe that safeguarding issues, malpractice, neglect, or abuse are being ignored, covered up, or not dealt with properly.

Who can raise concerns? Any staff member, volunteer, contractor, or partner organisation working with Arts Uplift.

How to raise concerns: Concerns should be raised in the first instance with the Designated Safeguarding Lead (DSL). If the concern involves the DSL, it should be reported directly to the Board of Directors. In cases where individuals feel unable to report internally, they may contact the local authority Adult Safeguarding Team or the Care Quality Commission (CQC).

Confidentiality: All whistleblowing reports will be treated sensitively and, where possible, confidentially. Arts Uplift will make every effort to protect the identity of individuals who raise concerns in good faith.

Protection from Victimisation: No person will suffer harassment, retaliation, or victimisation for raising a safeguarding concern in good faith, even if it is later found to be unsubstantiated.

Fair treatment of those accused: Anyone accused of abuse or poor practice will be treated fairly, and their rights respected, while concerns are looked into.

Malicious or Vexatious Allegations: Allegations found to be deliberately false or malicious may be treated as misconduct and dealt with under disciplinary procedures.

Monitoring and Evaluation

Safeguarding will be included in all service reviews and contract monitoring processes. This policy is reviewed annually and updated in line

with legal and procedural developments, and whenever there is a change in national policy or the law.

Designated Safeguarding Lead (DSL)

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Policy Review

This policy will be reviewed annually or in response to legislative or regulatory changes.

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Next Review Due: October 2027