Safeguarding Adults at Risk Policy and Procedure

1 Introduction

The Independent Society of Musicians (‘the ISM’) is a not-for-profit professional association promoting the art of music and serving the interests of its members and the music profession. This policy and guidance is specifically focused on adults at risk. Members requiring further guidance on safeguarding children should consult the ISM Safeguarding & Child Protection Policy, Code of Practice and Procedures.

Adults at risk – definitions

In England and Wales an adult at risk is defined as a person over the age of 18 who:

- has needs for care and support (whether or not a local authority is meeting any of those needs)
- is experiencing, or at risk of, abuse or neglect
- as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect.

In Scotland an adult at risk is defined as a person over the age of 16 who:

- is unable to safeguard their own well-being, property, rights and or other interest
- is at risk of harm
- is more vulnerable to being harmed because they are affected by disability, mental disorder, illness or physical mental infirmity compared with adults who are not so affected.

In Northern Ireland an adult at risk is defined as a person over the age of 18:

- whose exposure to harm through abuse, exploitation or neglect may be increased by their personal circumstances and/or life circumstances.

This policy and guidance should be observed by all ISM members and staff of the Society.

Many ISM members will have frequent contact with adults of all ages in the course of their professional activities. The ISM acknowledges that it has a responsibility to promote best practice and the highest standards of conduct among its members and staff, including in relation to the safety of adults at risk. It also recognises that good safeguarding policies and
procedures for adults at risk are also of benefit to ISM members, as they can help protect them from misunderstandings or erroneous allegations.

**Responsibility for safeguarding adults at risk**

It is the responsibility of all ISM members, staff and ISM volunteers to ensure that they are familiar with the ISM Safeguarding Adults at Risk policy and procedure, and to take action in line with this guidance.

**Scope**

This policy covers the ISM.

It applies to all ISM members, ISM staff, ISM Council Members, and volunteers.

This policy should be read in conjunction with the ISM Code of Conduct, ISM Safeguarding & Child Protection Policy, Code of Practice and Procedures; ISM Data Protection Policy; ISM Code of Practice for Council Members and the ISM Staff Handbook.

**Review**

The ISM Council will review this policy every 12 months or following any legislative changes, whichever comes first.

**2 Policy statement**

It is the ISM’s policy that:

1. All ISM Members, ISM Staff, ISM Council and any volunteers working with the ISM understand and accept their responsibilities in working together to safeguard adults at risk, and that they will report any concerns about an adult at risk or somebody else’s behaviour using the procedures laid down in this document.

2. There is a Designated Safeguarding Person (DSP) within the ISM who will be responsible for taking forward any action following an expression of concern and the lines of responsibility in respect of adults at risk are clear.

3. The Chief Executive of the ISM and, in his/her absence, the DSP, know how to make appropriate referrals to statutory agencies responsible for adults at risk.

4. Information relating to any allegation or disclosure must be clearly recorded as soon as possible, and there is a procedure setting out who should record information and the time-scales for passing it on.

5. The Care Act 2014 (‘the Act’) creates statutory obligations on local authorities to establish structures and procedures for dealing with adults considered to be at risk. One of the six key principles of safeguarding in the Act is prevention: it is better to act before harm occurs. This means that anyone who has concerns about an adult at risk should be made to understand that undertakings of confidentiality may not always be given to over-ride the need for adults at risk to be protected from harm.
6. This Safeguarding Adults at Risk policy will be referred to or included in recruitment, training and policy materials, where appropriate.

7. It is part of the ISM’s acceptance of its responsibility of duty of care towards adults at risk that ISM members and staff who encounter safeguarding concerns in the context of their work will be supported when they report their concerns in good faith.

3 Designated Safeguarding Person responsibilities

The ISM’s Designated Safeguarding Person (DSP) has the following responsibilities:

- to work in accordance with the ISM policy and procedures for safeguarding adults at risk;
- to ensure that the ISM policies and procedures for the safety and welfare of adults with whom it, or its members, has contact are satisfactorily followed by all ISM members, staff, ISM Council and volunteers;
- to take decisions, in conjunction with the Chief Executive, about the action needed when informed of a concern about an adult;
- to liaise as appropriate with other organisations and statutory authorities with regard to safeguarding incidents;
- to ensure appropriate records of safeguarding incidents are made, maintained and securely stored.

4 Identifying abuse

Abuse can take several forms:

- Physical abuse, including hitting, slapping, pushing, kicking, misuse of medication, restraint, or inappropriate sanctions;
- Sexual abuse, including rape and sexual assault or sexual acts to which the vulnerable adult has not consented, or could not consent or was pressured into consenting;
- Psychological abuse, including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks;
- Financial or material abuse, including theft, fraud, exploitation, pressure in connection with wills, property or inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits;
- Neglect and acts of omission, including ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating; and
• **Discriminatory** abuse, including racist, sexist, that based on a person’s disability, and other forms of harassment, slurs or similar treatment.

Multiple types of abuse against an adult at risk are not uncommon. Perpetrators of abuse can include parents, carers, workers, institutions or other service users.

5 **Guidance on responding to an allegation of abuse**

Information that gives rise to concern may come from various sources – observation, statements made by a vulnerable adult, by another member of the family, a friend, another ISM member, or other.

All concerns and allegations, whatever their origin, must be taken seriously and considered with an open mind which does not pre-judge the situation.

1. Remain calm and receptive.
2. Listen without interrupting.
3. Make it clear you are taking the person making the allegation seriously.
4. If it is difficult to understand what the person is saying, explain this and ask if they would mind saying it again.
5. Find an appropriate early opportunity to explain that it is likely that the information will need to be shared with others – do not promise confidentiality.
6. Ask questions for clarification only, and at all times avoid asking questions that suggest a particular answer.
7. Tell them what you will do next, and with whom the information will be shared (if this is in a formal establishment of some kind it will need to be the designated person within that establishment).
8. Make no judgment about what you have heard.
9. Record in writing what was said, using the individual’s own words as soon as possible.
10. Note the date, time, any names mentioned, to whom the information was given and ensure that the record is signed and dated.
11. Remember that whilst you may have been the first person encountering an allegation of abuse it is not your responsibility to decide whether abuse has occurred. That is a task for the professional safeguarding agencies, following a referral from the Designated Safeguarding Person in the organisation.

6 **How to report your concerns - reporting procedures for ISM members**

ISM members could have their suspicion or concern raised in a number of ways, the most likely of which are:

1. the conduct of another music professional or adult;
2. an individual “disclosing” abuse;
3. bruising or evidence of physical hurt;
4. unusual behaviour by an individual.

If an ISM member has such concerns they should report them immediately to the appropriate person in the organisation within which the concern has arisen (for example a care home, hospital, school, etc.). This principle applies regardless of whether the ISM member is working in an employed or self-employed capacity.

Where a concern arises independently of any organisation (for example where an ISM member has concerns about the welfare or safety of an individual who they teach privately, or someone connected to the household) the ISM member should immediately contact the ISM’s Designated Safeguarding Person by telephone (020 7313 9314) or email (mail to:dsp@ism.org) in the first instance. If an adult you are connected with has suffered a serious injury as a result of abuse, seek medical attention immediately and then inform your Local Authority Adults Social Care Department. If you have a concern out of ISM office hours, see if your local authority has a 24-hour helpline. You can also call the Care Quality Commission on 03000 616161 if you cannot get through to your local council.

ISM members are always able to contact the ISM’s Designated Safeguarding Person if they wish to discuss any safeguarding concerns, however they arise. ISM members must report to the ISM’s Designated Safeguarding Person immediately any concerns they may have about the conduct of another ISM member in relation to an adult at risk.

The most common examples of the types of concerns that must be reported immediately are:

- someone has behaved in a way that has harmed, or may have harmed, an adult at risk;
- someone has possibly committed a criminal offence against or related to an adult at risk; or
- someone has behaved towards an adult at risk in a way that indicates s/he is unsuitable to work with vulnerable adults.

The DSP will consider the concerns raised and refer them immediately to the Chief Executive. The Chief Executive will consider the matter and then, if appropriate, refer it to the Child Protection Committee/Safeguarding Committee for their immediate attention. If the Chief Executive is not available the DSP will undertake the role of referring the matter to the Child Protection/Safeguarding Committee. The Committee will then decide whether to report the matter to the Local Adults’ Safeguarding Board/Local Authority Safeguarding Officer (England & Wales), Local Authority Adult Protection Committee (Scotland) or Protection of Vulnerable Adults Designated Officer in the relevant Health Trust Area (Northern Ireland). Alternatively, after taking appropriate advice (which may include discussing the circumstances on a confidential basis with professional advisers), the Committee may decide either to deal with the matter internally or not to take any further action. If further information comes to light at a later stage which warrants a referral to the relevant local authority officer or board, the Committee will make this referral.
Reporting Procedure for ISM staff

ISM staff members do not, in the normal course of their duties, have direct contact with adults at risk. However, there may be circumstances in which concerns about the safety of an adult individual or about the conduct of an ISM member in relation to an individual are brought to the attention of an ISM staff member. Any such concerns must be reported immediately to the ISM’s DSP or to the Chief Executive. The DSP and/or the Chief Executive will then follow the procedure for considering child protection concerns set out at section 6 of this document.

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