



# Islington Play Association

Adult-Safeguarding Policy

VERSION.2025

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# Safeguarding Policy for Islington Play Association

Date approved: 22/09/2025

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## 1. Purpose of the policy

**Islington Play Association (IPA)** is committed to safeguarding practices that help ensure the safety of adults at risk whilst taking part in our group activities and in the wider community.

The purpose of this document is to describe IPA safeguarding policies and procedures in order to protect adults at risk who might come into contact with our services and in wider community. Safeguarding is a term used to describe how people and organisations work together to protect individuals from abuse or neglect.

This safeguarding policy, and associated procedures, applies to all individuals involved in IPA, including: trustees, volunteers, and staff. The policy applies to all concerns about the safety of adults at risk while taking part in our group and the activities we run, or while in the wider community.

This Safeguarding Policy will be made available to all staff (including volunteers) of IPA. The Safeguarding Policy will be reviewed annually by the staff team and board of trustees.

It helps everyone involved in our organisation:

- Be aware of our legal responsibilities.
- understand the safeguarding risks in IPA
- know what to do if they have a concern about the wellbeing or welfare of any adult at risk that comes into contact with our group.

Similarly, staff and volunteers may encounter concerns about the safety and wellbeing of children. For more information about children's safeguarding, refer to IPA's Children's safeguarding policy [Organisational-Safeguarding-Policy\\_February.2025.pdf](#)

## 2. Code of conduct

When working with vulnerable adults we are acting in a position of trust. We recognise that keeping our group safe is everyone's responsibility, and we expect our volunteers, staff and trustees to behave according to the following values:

- All adults at risk have an equal right to protection from abuse and to be kept safe from harm regardless of their age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, and sexual orientation.
- We recognise some adults are additionally vulnerable because of the impact of previous experiences, their level of dependency, communication needs or other issues.
- We listen to and respect everyone in the group.
- We use language that is appropriate for age and ability, and not offensive or discriminatory.
- We encourage a culture of honesty, where everyone feels comfortable to point out attitudes or behaviours they do not like.
- We know it isn't always easy to be vocal about concerns – for ourselves or for other people.
- All allegations and suspicions of neglect and abuse will be taken seriously and responded to swiftly and appropriately.

This means when working with adults at risk, IPA will never:

- Promise to keep secrets – safeguarding relies on sharing concerns appropriately with other agencies.
- Allow suspicions or allegations of abuse or neglect to go unreported.
- Act in a way that is threatening, abusive or bullying.
- Jump to conclusions about others without checking facts.
- Enter into a sexual or intimate relationship with an adult at risk.

## 3. Legislation

**IPA** recognises that the local authority has the main legal duty to safeguard adults at risk, and we are committed to working with them and our local Safeguarding Adults Board.

This policy, and the practices within it, are based on the relevant legislation and government guidance, including:

- The Care Act 2014; and
- The Mental Capacity Act 2005 (which protects people's right to make their own decisions in any situation where they can do so).

We base our practices on the principles laid out in the Care Act 2014 i.e.

- Empowerment – People being supported and encouraged to make their own decisions and informed consent.
  - Prevention – It is better to act before harm occurs.
  - Proportionality – The least intrusive response appropriate to the risk presented.
  - Protection – Support and representation for those in greatest need.
  - Partnership – Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.
  - Accountability – Accountability and transparency in delivering safeguarding.
- 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>

## 4. Definitions

According to the Care Act 2014 (applicable in England):

An **adult at risk** is an individual aged 18 years and over who:

- has needs for care and support (whether the local authority is meeting any of those needs) AND.
- is experiencing, or at risk of, abuse or neglect, AND.
- 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.

**Abuse** is a violation of an individual's human and civil rights by another person or persons. It can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it. Any or all of the following types of abuse may be perpetrated as the result of deliberate intent, negligence, omission or ignorance. Often the perpetrator of abuse is known to the adult and may be in a position of trust and power.

The types of abuse we need to be aware of are :see also Appendix 1

- Physical
- Sexual
- Emotional/Psychological/Mental
- Neglect and acts of omission.
- Financial or material abuse
- Discriminatory
- Organisational / institutional
- Self-neglect
- Domestic abuse (including coercive control)
- Modern slavery

## 5. Recognising safeguarding concerns

There are many signs and indicators that may suggest someone is experiencing abuse or neglect. There may be other explanations too, but **IPA** will not ignore any of these signs if they are apparent.

An adult may confide (disclose) to a trustee, volunteer, or other member of **IPA** that they are experiencing abuse, inside or outside the activities of the group. Or someone else may notice signs in a particular individual. The signs we will look out for include:

- Unexplained bruises or injuries
- Belongings or money going missing from the person.
- The person no longer attending or enjoying **IPA** 's activities or responding to contact from other members of the group.
- A change in confidence or behaviour of a person e.g. if they are withdrawn and quiet around a particular person or people, when usually they are outgoing and confident.
- A change in appearance of the person e.g. losing or gaining weight, deterioration in personal hygiene or way of dressing.
- Someone else (e.g. a parent, carer, or family member) always speaking for the person and not allowing them to make their own choices.
- The person showing fear of, or not wanting to be around, a particular individual or group of people.

## 6. Responding to concerns

**IPA** has a designated safeguarding lead whose contact details are in section 11. For flow chart see Appendix 2.

**IPA** recognises that it can be difficult for many reasons to speak up if you think someone is being abused or neglected. However, we expect our volunteers, trustees, and staff to take action in response to any concerns. Our safeguarding lead will support the person raising the concerns, as well as the person being abused.

If anyone in the group notices any signs of abuse or neglect in another person, they should bring these concerns to the safeguarding lead.

If someone discloses to anyone else in the group that they are being abused, the response should be as follows:

- Always make sure the person speaking up feels they are being listened to and supported.
- Don't promise to keep information confidential between you and them.

- Tell the designated safeguarding lead about the concerns (unless the safeguarding lead is implicated in causing the harm or perpetrating the abuse. In this situation, information should be shared with a trusted committee member/trustee, and they will be responsible for taking further action instead of the safeguarding lead)
- Ask for the person's consent to share the information. If they refuse and you are still worried that they or someone else is at immediate risk of harm, you cannot wait for this consent. You must share this information with the safeguarding lead.
- Write a clear statement of what you have been told, seen, or heard.

The **designated safeguarding lead (DSL)** is responsible for taking further action once concerns have been raised with them. Throughout the process, the safeguarding lead will record all the information they are given, the actions they take, and why. The procedures they will follow are:

## 6.1 Initial assessment

As soon as information is shared with the safeguarding lead, they will make an initial assessment of the concern. They will, if possible, talk to the person reporting the concern and gather as much information as possible from them.

Key questions to ask:

- What type of concern has been reported? Different actions are required depending on what type of concern it is (see below)
- What action has already been taken?
- Is anyone else in the organisation affected by this situation (e.g. other volunteers or those you work with)? Are there any attitudes or emotions that you may have to be aware of?
- How might this concern affect what the organisation delivers in the short term?
- Who else might need to be informed?
- What other actions now need to be taken?

## 6.2 Immediate actions depending on what type of concern has been raised.

**(a) Emergency incidents:** this is when there's a life-threatening situation where there's imminent danger and harm to an adult, young person or child.

- Immediately contact the emergency services if they haven't been called already.
- Make sure the current situation is safe.
- Establish how others are coping – do they need any immediate support?
- Inform the senior people in the group

**(b) Protection concerns:** This is when an adult who you believe is unable to protect themselves is at current risk of, or has experienced, abuse or harm.

- If the person is in immediate danger, call the police.
- If they're not in immediate danger, you must contact the local authority safeguarding team within 24 hours and make a referral (contact details are in section 10).

- Be guided by the safeguarding team or police on any further actions required of you.

**(c) Allegations concerning staff or volunteers:** this is when someone has alleged that staff or volunteers from your organisation have harmed or abused an adult at risk.

- Contact the local authority safeguarding team as soon as possible within 24 hours.
- Be guided by them on any further actions required of you.

**(d) Welfare concerns:** This is when no one has been harmed in any way, but a person shows signs of being in need. It's when you have concerns for their health, wellbeing or safety if they don't get help.

- Within 7 days you, or someone in your organisation, should speak with the person. When it is appropriate you should also speak with their family or carer. You must explain your concerns and make sure they have the support they need.
- Depending on the conversation, the safeguarding lead may then also:
  - Help the person or their family access services or give them the information they need to do this themselves.
  - Speak to another professional who is already working with the person or family, such as a social worker, about their needs.

**(e) Concerns about other organisations:** This is a situation where the safeguarding concern is about another organisation, their staff, volunteers or the people they work with.

- As soon as possible within 24 hours contact the designated safeguarding lead of the organisation in question and pass on your concerns, if this has not already happened.
- In some circumstances you may decide to follow up with the organisation to confirm they have acted on the issue.
- If at any point you think the organisation has not acted and someone is at risk, you should contact the local safeguarding team yourself.

**(f) Responding to historic or non-recent concerns:** You may become aware or be told about a concern from an adult relating to an incident which took place in the past, including when they were a child. Historical allegations of abuse should be taken as seriously as contemporary allegations.

- Remember that it's never too late to report abuse. An individual can make a formal complaint to the police about non-recent abuse, ideally in the geographic area in which the abuse is reported to have taken place.
- Establish if the person alleged to have caused the harm works with children or adults at risk. Try to find out their recent or current whereabouts and any contact they have with children or adults at risk. A referral should be made to social services, with the consent of the person who experienced the abuse if possible.
- Consider what consent the person has given for information to be shared. How, when and to whom they share this information should usually be with their consent.
- Signpost the person who experienced the abuse to relevant support groups that can help them.

**(g) Supporting those who share a concern with you:** Your primary concern should be the best interests of the person who is at risk of harm. However, the person sharing this concern with you may also be distressed by the situation, even if they are reporting on behalf of

someone else. Everyone can respond to worries about another differently. If someone has previously experienced trauma, they can find it especially upsetting.

- Thank them for bringing this concern to your attention and that they have fulfilled their key responsibility
- Explain that you will now take responsibility in leading management of this concern and any contact with statutory agencies
- Highlight that there may be limited updates that you have or can give them on the situation; that does not mean that it was not important for them to share their concern
- Remind them of the importance of confidentiality and not sharing this information further
- Ensure they have your contact details in case they think of anything else they have not yet shared that they think may be relevant
- Discuss with them what additional support they may require. Consider contacting them later to check in on how they are doing

(H) Refer

In making a decision whether to refer or not, the designated safeguarding lead should take into account:

- (1) the adult's wishes and preferred outcome
- (2) whether the adult has mental capacity to make an informed decision about their own and others' safety
- (3) the safety or wellbeing of children or other adults with care and support needs
- (4) whether there is a person in a position of trust involved
- (5) whether a crime has been committed

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

- o the police if a crime has been committed and/or
- o Islington's Access & Advice Team (part of adult social services) for possible safeguarding enquiry
- o relevant regulatory bodies such as Care Quality Commission, Ofsted, Charities commission
- o service commissioning teams
- o family/relatives as appropriate (seek advice from adult social services)

The designated safeguarding lead should keep a record of the reasons for referring the concern or reasons for not referring.

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

As soon as Adult Social Services becomes involved, a 4-stage safeguarding adults process is followed. For more information about this 4-stage safeguarding adults process, refer to the London Safeguarding Adults Procedures.

## 7. Keeping records

**IPA** recognises that it is vital to record and store details about any safeguarding concerns that arise. We will record information, even if the concerns have not been shared with the police or the local authority safeguarding team. These records are extremely sensitive and will be kept in a locked cabinet or drawer (if hard copy) and/or password protected and stored on a computer with protection against hackers and viruses (if electronic).

It is the responsibility of the designated safeguarding lead to ensure that the following information is recorded about every safeguarding concern:

- The date and time of the incident/disclosure/concern
- The date and time of the report
- The name and role of the person to whom the concern was originally reported and their contact details
- The name and role of the person making the report (if this is different to the above) and their contact details
- The names of all parties who were involved in the incident, including any witnesses
- The name and any other relevant information about the adult who is the subject of the concern (including information about their care and support needs)
- What was said or done and by whom
- Any action taken to look into the matter
- Any further action taken (such as a referral being made)
- The reasons why the organisation decided not to refer those concerns to a statutory agency (if relevant)

Each record will be signed and dated by the person making the report.

### **(H)Prevent**

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 staff 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>

## 8. Confidentiality, consent and information sharing

Timely information sharing is key to keeping people safe and responding appropriately to concerns about their welfare. In general, **IPA** expects all committee members, volunteers and staff to maintain confidentiality and act in accordance with the UK General Data Protection Regulations (GDPR). [Data-Protection-Policy-2025.pdf](#)

We will share information within the group (e.g. with other volunteers) in situations where this is necessary in order to deal effectively with safeguarding concerns or to provide continuity of support. We will share information with other organisations in order to keep a person safe.

Whenever confidential information is shared, we will follow the principles below. We will:

- Have a clear and legitimate purpose.
- Keep clear records of why we chose to share the information.
- Ensure we are not putting the person at risk by sharing information.
- Be as factual as possible.
- Seek consent. If the adult refuses consent, we may share information **only** if:
  - We think they are at serious risk of harm or abuse, including harming themselves.
  - Information indicates that a serious crime has been or is going to be committed.
  - We think the person lacks the mental capacity to decide for themselves and we believe it would be in the individual's best interests.
  - We are required by law e.g. if we suspect FGM, forced marriage, or a possible terrorist threat.

## 9. Recruiting and training staff


**IPA** employees, workers and volunteers that work with adults at risk will be given an induction which covers the safeguarding policy and procedures of the group. They will be trained in: our code of conduct; definitions of abuse and harm; recognising signs of abuse; and how to respond to concerns and disclosures. All staff will know who the designated safeguarding lead is, and that they should go to them with any concerns.

The designated safeguarding lead will be offered further training to ensure they are clear about their role, and what action to take in response to different concerns.

We will apply for Disclosure and Barring Service (DBS) checks for all staff for whom we are legally required to do so.

## 10. Reviewing policy and procedures

This policy and its procedures will be reviewed every 2 years.

Review Date	17/09/2025
Reviewed By	Wendy Jeeves
Signature	
Next Review Date	17/09/2027
File Location	IPA\IPA Team Site - IPA\IPA\2025\Safeguarding Policies

## 11. Key contacts

### IPA 's Designated Safeguarding Lead

Name: Wendy Jeeves  
Contact details: 07498 321 736  
[wendy@islingtonplay.org.uk](mailto:wendy@islingtonplay.org.uk)

Joy Abegunde  
Contact details: 07506 3380802  
[Joy@islingtonplay.org.uk](mailto:Joy@islingtonplay.org.uk)

If your concern relates to an adult at risk of harm or abuse, please contact our Access & Advice Service (first point of contact for adult social services) on 027 527 2299 or email [access.service@islington.gov.uk](mailto:access.service@islington.gov.uk)

### Useful links

Care act- <http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted>

London Safeguarding adults policy and procedures- <http://londonadass.org.uk/wp-content/uploads/2015/02/LONDON-MULTI-AGENCY-ADULT-SAFEGUARDING-POLICY-AND-PROCEDURES.pdf>

Safer recruitment-

<http://www.islingtonscb.org.uk/SiteCollectionDocuments/Safer%20recruitment%20-%20safeguarding%20children%20and%20adults%205%20August%2013.pdf>

Carer and support statutory guidance-

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/506202/23902777\\_Care\\_Act\\_Book.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/506202/23902777_Care_Act_Book.pdf)

Prevent-

<https://www.gov.uk/government/publications/prevent-duty-guidance>

Information sharing-

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

Voluntary organisations (including volunteers) who support adults with care and support needs can access the basic awareness safeguarding adults training provided by Islington Council. Free on-line training is also available.

See: <https://www.islington.gov.uk/social-care-and-health/support-for-professionals/courses-for-professionals>

## Appendix 1

Who is an adult at risk?

An adult at risk (sometimes referred to as 'vulnerable adult') is someone who: has care and support needs, whether or not these are being met; is experiencing, or at risk of experiencing, abuse or neglect, and who is unable to protect themselves due to their care and support needs.

Types of abuse

The Statutory Guidance to the Care Act 2014 identifies 10 categories of abuse:

Self-neglect

This covers a wide range of behaviour such as neglecting to care for one's personal hygiene, health or surroundings and includes behaviours such as hoarding.

Modern slavery

This encompasses slavery, human trafficking, forced labour, and domestic servitude.

Domestic abuse

This includes psychological, physical, sexual, financial, and emotional abuse perpetrated by anyone within a person's family. It also includes so called 'honour' based violence.

#### Discriminatory abuse

Discrimination is abuse which centres on a difference or perceived difference particularly with respect to race, gender, disability, or any other of the protected characteristics of the Equality Act.

#### Organisational abuse

This includes neglect and poor care practice within an institution or specific care setting such as a hospital or a care home, for example, or in relation to care provided in one's own home. This may range from one-off incidents to ongoing ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.

#### Physical abuse

This includes hitting, slapping, pushing, kicking, misuse of medication, restraint, or inappropriate sanctions.

#### Sexual abuse

This includes rape, indecent exposure, sexual harassment, inappropriate looking in touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting.

#### Financial or material abuse

This includes theft, fraud, internet scamming, or the misuse or misappropriation of property, possessions or benefits. It also includes coercion in relation to an adult's financial affairs or arrangements, for example in connection with wills, property, inheritance, or financial transactions.

#### Neglect and acts of omission

This includes ignoring medical or physical care needs, failing to provide access to appropriate health, social care or educational services, and the withholding of the necessities of life, such as medication, adequate nutrition, and heating.

#### Emotional or psychological abuse

This includes threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation, or withdrawal from services or supportive networks.

## Appendix 2

### Safeguarding procedure

