

## VOLUME 2: PUBLIC FACING POLICIES

|                                                              |    |
|--------------------------------------------------------------|----|
| Booking, Cancellation & Payment for Day Care 21.1.2026 ..... | 2  |
| Privacy notice 21.1.2026 .....                               | 3  |
| Equality, Diversity and Inclusion 21.1.2026 .....            | 6  |
| Adult Safeguarding 21.1.2026 .....                           | 8  |
| Whistleblowing Policy & Procedures 21.1.2026 .....           | 19 |

|                        |                                                        |
|------------------------|--------------------------------------------------------|
|                        | Booking, Cancellation & Payment for Day Care 21.1.2026 |
| Policy Owner           | Primo Sule                                             |
| Date reviewed          | 27.10.2025                                             |
| Date approved by board | 21.1.2026                                              |
| Next review due by     | 20.1.2029                                              |

With a focus on creativity and wellbeing, Dementia Studio provides sessional day care for people living with dementia.

- A single day care session (10-1pm or 1-4pm) costs £40, including refreshments (not lunch).
- Carers wishing to join the session may do so for £5 to cover materials and refreshments.

### 1.0 BOOKING

Clients must book at least 48 hours before they plan to attend by email, telephone or online via the Dementia Studio website ([www.dementiastudio.org](http://www.dementiastudio.org)). Clients should ring 07543 534336 at any time to book and leave a message if the phone is not answered in person.

### 2.0 CANCELLATION

- Clients may cancel giving at least 48 hours' notice before the start of the booked session at no cost.
- Cancellation within 48 hours of the session may be charged £40 in lieu of notice.

### 3.0 PAYMENT TYPES

Dementia Studio accepts payment by bank transfer, card reader or cheque. We prefer not to use cash.

#### 3.1 Bank transfer (preferred)

To pay via bank transfer (BACS), payment should be sent to Dementia Studio's account before the session. The full name of the client should be used as the reference.

Account name (Co-operative Bank) Dementia Studio CIO

Account number 65874268      Sorting code 08 92 99

#### 3.2 Cheque payments

Cheques should be made out to: Dementia Studio CIO or Dementia Studio.

Cheque payments should be given to a colleague of Dementia Studio at the start of the session.

#### 3.3 Invoicing

Some clients may prefer to receive invoices. These are issued every 2 months (one month in arrears, one in advance). Payment for these invoices may be made as above by bank transfer or cheque.

|                        |                          |
|------------------------|--------------------------|
|                        | Privacy notice 21.1.2026 |
| Policy Owner           | Deb Kitson               |
| Date reviewed          | 1 11 2025                |
| Date approved by board | 21.1.2026                |
| Next review due by     | 20.1.2029                |

## 1.0 INTRODUCTION

Here at Dementia Studio, your privacy is important to us, and we want all our clients and carers to feel confident and comfortable with how any personal information you share with us will be looked after or used.

This Privacy Policy sets out how we collect, use and store your personal information.

Dementia Studio is a “data controller” for the purposes of the Data Protection Act 1998 and the EU General Data Protection Regulation 2016/679 (“Data Protection Law”). This means that we are responsible for, and control the processing of, your personal data.

## 2.0 PERSONAL DATA

Personal data is information that can be used to help identify an individual, such as a name, address, phone number or email address.

## 3.0 WHEN WE WILL COLLECT YOUR INFORMATION

Dementia Studio only collects personal data when you specifically provide it to us, for example, we collect information from you in the following ways:

- When you get in touch with us: e.g. if you ask us about our activities, register with us for a session, apply for a job or volunteering opportunity. This could be by phone, email, through our website or in person.
- When you interact with us through others: this could be if you make a donation through a third party and provide your consent for your personal information to be shared with us e.g. for the purpose of claiming Gift Aid.
- When you visit our website: we collect information to help us to understand how supporters use our site, and to make improvements. This information consists of your IP address, your browser (e.g. Chrome), when you visited and which pages you visited. We cannot use this information to find out further personal information about you.
- From other information that is available to the public: in order to tailor our communications with you to your interests we may collect information about you from publicly available sources.

## 4.0 THE PERSONAL INFORMATION WE COLLECT

Personal information includes details such as your name, date of birth, email address, postal address,

telephone number, as well as information you provide in any communications between us. You will have given us this information whilst registering to attend a session.

We aim to ensure that our communications to you are relevant and timely. To enable us to do this, we may also analyse publicly available geographic, demographic and other information relating to you in order to better understand your interests and preferences.

## **5.0 WHY WE COLLECT YOUR INFORMATION**

We use your information to manage your engagement with us to provide you with a service.

## **6.0 HOW WE PROCESS YOUR INFORMATION**

We will process your personal data on the basis of your consent, and/or because we need to use it in order to fulfil a contract with you, and/or our legitimate interest.

Legitimate interest means that the reason that we are processing information is because there is a valid reason for Dementia Studio to do so. This could include to make improvements to our services, to manage relationships and to comply with relevant legislation. Whenever we process your personal information in this way, we ensure that we take into account your rights and interests. **We will never sell or swap your details.**

## **7.0 KEEPING YOUR INFORMATION SAFE**

We are committed to keeping your personal information – and the ways that we use it – safe and secure. We use a variety of security technologies and procedures to help protect your personal information from unauthorised access, use or disclosure. We are constantly improving our systems and processes to make sure that your data is protected and handled efficiently and safely.

## **8.0 KEEPING YOUR INFORMATION UP TO DATE AND HOW LONG WE KEEP IT FOR**

Where possible we keep our records up to date. We are more easily able to do this if you let us know when your details change. We only keep your personal data for as long as is reasonable and necessary for the relevant activity, which may be to fulfil statutory obligations.

If you request that we stop sending you marketing materials we will keep a record of your contact details and appropriate information to enable us to comply with your request not to be contacted by us.

## **9.0 YOUR RIGHTS**

Under certain circumstances, you have rights under data protection laws in relation to your personal data. These include the right to:

- Ask for a copy of the personal information we hold about you.
- Ask us to correct your personal data if there are any inaccuracies.
- Request the erasure of your personal data.

- Object to processing of your personal data.
- Request restriction of processing your personal data.
- Request transfer of your personal data.
- Right to withdraw consent.

We may need to request specific information from you to help us confirm your identity and ensure your right to access your personal data (or to exercise any of your other rights). This is a security measure to ensure that personal data is not disclosed to any person who has no right to receive it. We may also contact you to ask you for further information in relation to your request to speed up our response.

We try to respond to all legitimate requests within one month. Occasionally it may take us longer than a month if your request is particularly complex. In this case, we will notify you and keep you updated.

## **10.0 OPTING OUT**

You can update your choices or ask us to stop us sending you these communications at any time by contacting [admin@dementiastudio.org](mailto:admin@dementiastudio.org), or by phoning us on 07543 534 336.

## **11.0 RIGHT TO COMPLAIN**

If you are not happy about the way in which we are processing your personal information, please contact the Data Protection Officer (DPO) at [admin@dementiastudio.org](mailto:admin@dementiastudio.org), or by phoning us on 07543 534 336. The Trustee acting as DPO is Primo Sule.

You also have the right to make a complaint to the UK Information Commissioner's Office.

## **12.0 REVIEW PROCESS**

This Policy & associated Procedures will be reviewed every 3 years, or sooner if legislation or regulatory changes require an earlier review. Any amendments will be appropriately consulted on and signed off before being clearly communicated to colleagues.

|                        |                                             |
|------------------------|---------------------------------------------|
|                        | Equality, Diversity and Inclusion 21.1.2026 |
| Policy Owner           | Justine Schneider                           |
| Date reviewed          | 1 11 2025                                   |
| Date approved by board | 21.1.2026                                   |
| Next review date       | 20.1.2029                                   |

## 1.0 PURPOSE OF THIS POLICY

The Dementia Studio is committed to promoting equality and eliminating unfair discrimination from all aspects of its work. Our commitment to equality, diversity and inclusion underpins everything we do in the organisation. The Dementia Studio recognises its duties under all relevant legislation and includes Human Rights, the protected characteristics in the Equality Act 2010, related Codes of Practice and regulatory requirements.

1.1 The Dementia Studio recognises that it has the power to reduce discrimination and the disadvantages that people experience by making its services more accessible and responsive to the needs of the communities with whom we work, and individuals using our services as customers, colleagues, contractors or consultants. We want our services and resources to be accessible regardless of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation or other individual characteristic which may unfairly affect a person's opportunities in life.

## 2.0 SCOPE

This policy applies equally in the following areas:

- Provision of and access to, all the Dementia Studio's services
- Recruitment, employment and training
- Volunteers, contractors and consultants
- Trustees

2.1 We recognise that our ability to meet diverse needs is improved by having a diverse workforce that generally reflects the local population, and which has the skills and understanding to achieve our service objectives. We are committed to valuing diversity in our workforce and training and developing colleagues within an organisational culture that promotes equality and inclusion.

2.2 The Dementia Studio is committed to and is working towards being an organisation that:

- Accepts that everyone has a right to their distinctive and diverse identities
- Has a workforce generally reflecting the population we serve
- Understands how valuing diversity can improve our ability to deliver better services, and so reduce disadvantage
- Provides services which are responsive to the diverse needs of different individuals and communities

- Provides all colleagues with the training and development they need
- Provides a supportive, open environment where all colleagues have the opportunity to reach their full potential

**2.3** The Dementia Studio believes that our colleagues, Trustees, volunteers, customers and stakeholders have an important part to play in making this happen. We are committed to listening to our customers and involving them in the development of our services which recognise and value their diversity.

### **3.0 OBLIGATIONS**

The Dementia Studio requires every colleague, volunteer and Trustee to recognise and discharge their own responsibility for contributing to the success of this policy.

### **4.0 BREACHES**

Colleagues, carers, guests or volunteers who feel that this policy has been breached they should report the matter to the Operational Manager or to a Trustee.

Adult Safeguarding 21.1.2026

Policy Owner Deborah Kitson

Date reviewed 15.03.2025

Date approved by board 21.1.2026

Next review due by 20.1.2026

## 1.0 Adult Safeguarding Policy

1.1 Dementia Studio CIO recognises our legal duty and responsibility under the Care Act 2014 to protect an adult's right to live in safety, free from abuse and neglect and is committed to protecting vulnerable people adults at risk from abuse and proactively upholds the human rights of its customers.

1.2 The purpose of this policy is to ensure that all members, volunteers and colleagues understand their responsibilities to safeguard adults at risk who use our service from any type of abuse. In addition, it will demonstrate to customers, supporters and citizens in contact with Dementia Studio provision where the organisational responsibilities lie for reporting allegations of adult abuse and how this should be carried out. This policy outlines what we will do to fulfil this duty and responsibility and includes procedures for our colleagues and volunteers (this includes Trustees throughout this document).

We will:

Ensure that all colleagues and volunteers are fully aware of their responsibilities in safeguarding the adults we work with, what to do if they have a concern, and how to work in a way which promotes the wellbeing of guests and carers.

Identify lead person(s) for adult safeguarding, who will act as the '*referrer(s)*' on behalf of the organisation. This will include making an informed decision about the appropriate action to take when a concern is raised, including making a referral to adult social care if there is evidence of a concern that a person may be at risk of abuse or neglect.

Actively co-operate with local authority Adult Social Care when they are undertaking any investigation into concerns raised.

Ensure that clients, their families and carers are informed about their right to be free from abuse and neglect, and what to do if they have a concern.

### Procedure

The following information and procedure is based on the Care Act 2014 and Nottingham and Nottinghamshire Multi-agency Adult Safeguarding Procedure and Guidance:

Depending upon the nature of particular services or the requirements of particular funders or partner agencies, the policy and procedures may need to be supplemented by additional content.

This policy will be reviewed every two years and recirculated to all colleagues and volunteers.

### Definitions

3.1 The Care Act 2014 defines our safeguarding responsibilities as follows:

Safeguarding duties apply where a local authority has reasonable cause to suspect that an adult in its area (whether or not ordinarily resident there):

Has needs for care and support (whether or not the authority is meeting any of those needs).



Is experiencing, or is at risk of, abuse or neglect, and

As a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it.

The adult's care and support needs should arise from or be related to a physical or mental impairment or illness. However, they do not need to meet the minimum eligibility criteria as set out in chapter 6 of the Care and Support Statutory Guidance, issued under the Care Act 2014.

Safeguarding is defined in the Care Act 2014 as:

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 wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action.

### **Terms used in this policy:**

The adult who safeguarding duties apply to will hereafter be referred to as the 'adult at risk' in these procedures.

The "alerter" is the person who has witnessed abuse or who suspects abuse or has had incidents of alleged abuse reported to them.

The person making a referral will thereafter be referred to as the "referrer(s)" in these procedures. Appendix Three lists the names of the people with this responsibility.

A guest is a person with dementia living in the community and attending Dementia Studio Broxtowe-provided activities.

A "Supporter" is a person who attends Dementia Studio Broxtowe activities and who is supporting or has supported a person living with dementia.

### **Categories of Abuse**

4.1 The Care Act 2014 recognises ten categories of abuse:

**Physical abuse** including hitting, slapping, and pushing, kicking, misuse of medication, restraint, or inappropriate sanctions.

**Domestic Violence** including psychological, physical, sexual, financial, emotional abuse and honour-based violence.

**Sexual abuse** including rape and sexual assault or sexual acts to which the adult at risk has not consented or is incapable of giving informed consent or was pressured into consenting. This may involve contact or non-contact abuse (e.g., touch, masturbation, being photographed, teasing, and inappropriate touching).

**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.

**Modern Slavery** encompasses slavery, human trafficking; forced labour and domestic servitude.

Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.

**Discriminatory abuse** including racist, sexist, that based on a person's disability, culture and other forms of harassment, slurs or similar treatment.

**Organisational abuse (previously known as institutional abuse)** Neglect and poor professional practice in care settings also need to be taken into account. It may take the form of isolated incidents of poor practice at one end of the spectrum, through to pervasive ill treatment or gross misconduct at the other. It can occur when the routines, systems, communications and norms of an institution compel individuals to sacrifice their preferred lifestyle and cultural diversity to the needs of that institution. Repeated instances of poor care may be an indication of more serious problems.

**Neglect and acts of omission** including ignoring medical or physical care needs, failure 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.

**Self-neglect** this covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding.

**More information, including some potential indicators of these types of abuse are available in the Nottingham and Nottinghamshire Adult Safeguarding Guidance:**

<http://www.nottinghamcity.gov.uk/ncaspb>

## **Preventing Abuse by Colleagues and Volunteers**

5.1 Dementia Studio Broxtowe has a commitment to be an open, positive, transparent and inclusive organisation. Dementia Studio will protect its customers and supporters from all forms of adult abuse by:

Undertaking recruitment checks and appropriate referencing for all volunteers and colleagues who have or might have direct access to customers and supporters.

The disclosure of a criminal record would not automatically result in an individual not being suitable for a position. Consideration should be taken in relation to the type of offence, age of the offence and overall offending history. However, we also understand that the involvement as a colleague, volunteer or Member of any individual barred from working with adults at risk (evidenced by DBS check) is a criminal offence.

Raising awareness of adult abuse procedures amongst all colleagues, volunteers, directors and committee members.

Recommending that colleagues, volunteers and Members undertake adult abuse and Safeguarding Adults at Risk (SAAR) training.

Working in partnership with other relevant agencies by sharing information in accordance with our confidentiality policy and the Care Act 2014.

Providing readily accessible channels for dealing with complaints by customers and others.

Dementia Studio will suspend volunteers, staff, Trustees, committee members or colleagues immediately, pending the outcome of all safeguarding inquiries.

Dementia Studio will dismiss colleagues and suspend volunteers, staff, Trustees or committee members if it is found that they are unsuitable for the position and/or if it is found that they have caused harm or abuse to a customer.

Dementia Studio will work in line with the Nottingham and Nottinghamshire Safeguarding of Adults at Risk Multiagency Policy.

For detailed Adult Safeguarding Multiagency procedures see: <http://www.nottinghamcity.gov.uk/ncaspb>

## **Responsibilities of Colleagues and Volunteers**

**6.1 All colleagues** (paid and volunteers, including committee members) involved with the adult at risk, **have a duty** to act immediately to inform the referrer(s) responsible for 'referring to the local authority' of any concerns that an adult at risk:

Has been abused or neglected; or

Is being abused or neglected; or

Is at risk of being abused or neglected.

This duty is to 'raise the concern' with the referrer(s), who has/have the responsibility to make a referral. It **does not** include any investigation into the concerns.

See Appendix Three for the list of people who are referrer(s) for Dementia Studio. For responsibilities of the referrer(s) see Appendix One.

## **7.0 What to do if you have a concern**

**7.1** You may become aware of a concern in a number of ways:

The adult at risk tells you themselves

A member of public (e.g., carer, family member, friend) raises it with you

You may have directly observed something

**7.2** When you have a concern:

- Raise it immediately with one of the persons designated as the 'Referrer(s)' in your organisation. Do not discuss the concern with anybody else.
- If the concern implicates any of the referrers, raise the concerns with an independent Trustee.
- Ensure any immediate safety and welfare needs of the adult at risk are met.
- Make a clear written record of the concern, how it was raised, and any actions taken. (See template form – Appendix).
- Assure the person making the disclosure that you are taking them seriously.
- Listen carefully to what they are telling you, stay calm, get as clear a picture as you can.
- Avoid asking closed questions; use open ended questions, such as "what do you mean by...." or "can you tell me more about...."
- Keep questions to a minimum and only to clarify that the disclosure is a safeguarding concern.
- Make brief notes about what was said and what you saw as soon as possible afterwards, noting time, place and who spoke to you.
- Do not give promises of complete confidentiality.
- If it is appropriate, ask the adult at risk what they would like to happen as a result of you passing on the concern. However, you should explain that you have a duty to pass on your concerns to the

referrer(s) and that their concerns may be shared with others who could have a part to play in safeguarding them.

- Reassure them that they will be involved in decisions about what will happen.
- If they have specific communication needs, provide support and information in a way that is most appropriate to them.
- Do not be judgmental or jump to conclusions.
- Do not discuss the concern with the person alleged to have caused harm or anyone else (other than the referrer(s)) unless the immediate welfare of the adult at risk makes this unavoidable.
- See Section 9 for what to do if an allegation is made about a volunteer (including Trustees) or colleague of Dementia Studio.

**Any person may report a suspicion of abuse to social care irrespective of the opinion of other personnel. See Appendix Two for the contact details of the referral points.**

## **8.0 Support for Colleagues and Volunteers**

8.1 Colleagues and volunteers will be supported in these circumstances. If social care needs further involvement from colleagues or volunteers following a report of abuse, one of the referrer(s) and/or a director will discuss with the social care department the nature of their needs and how they might be met.

## **9.0 Allegation of Abuse Made Against a Colleague or Volunteer**

Colleagues and volunteers may be subject to abuse allegations. We will offer support in these circumstances, but any allegation will be reported to social care, and every assistance will be given in their investigation. Where appropriate, the disciplinary procedure may be implemented.

9.1 Where an allegation of abuse involves a colleague, volunteer or committee member as being the perpetrator, Dementia Studio will ensure that they are suspended from duties until a full inquiry has been carried out and an outcome reached.

9.2 If the outcome is founded, the individual will be dismissed and Dementia Studio will make a referral to the appropriate national safeguarding body.

## **10.0 Confidentiality**

10.1 Confidentiality is central to our work, and the attention of all colleagues and volunteers (including Members) is drawn to the Confidentiality Policy.

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## Appendices

### **Appendix One: Duties and Procedure for Referrer(s)**

Social services departments have been designated as the lead agencies with responsibility for coordinating a response to allegations or concerns of abuse.

The designated 'Referrer(s)' in the organisation has the responsibility of informing the appropriate adult social care referral points, as specified in Appendix Two:

**Referrer(s)** will work within the following timescales for reporting allegations or suspicions of abuse:

**Immediate** if the adult is at risk of serious physical harm, or a serious criminal act has taken place, and evidence will need to be kept safe. **Dial 999 if it's an emergency.**

**Within 24 Hours** if it relates to a specific incident which is, or may be still going on, or may happen again.

Ensure the immediate safety and welfare of the adult at risk and offer support to those involved.

After receiving a safeguarding alert, the referrer(s) will:

Carry out initial information gathering recording all of the details given by the person reporting the allegations. However, **DO NOT FORMALLY INTERVIEW THE ALLEGED VICTIM**. Maintain detailed, factual and chronological records of all information gathered and actions taken (See the template form to record details (Appendix Four).

Decide whether a safeguarding referral to adult social care is required and make the referral to social care if required if you have reason to suspect that abuse may have occurred based upon the information gathered and the local multiagency policy or if you are in any doubt, make a referral to the relevant Adult Social Care Department.

If making a referral, seek the consent of the adult at risk. This should always be obtained unless there is an overriding public interest, or an issue of mental capacity. Refer to the multi-agency procedures and guidance for more information.

**N.B.** It is important to recognise that any person with mental capacity has the right to make their own decisions; even if this may not be regarded as in their best interests.

Ask the adult at risk what outcome they want from any actions taken.

The referrer(s) needs to inform the Manager of Dementia Studio Centre (The Studio) if a safeguarding alert has been raised that involves a volunteer, colleague or Member.

The Manager will be made aware if a safeguarding relates to a customer, even if a referral is not made, but will not be given any details.

### **Making a Safeguarding Report:**

After receiving a safeguarding alert, the referrer(s) may report this to the Adult Services Department or Adult Protection Unit.

When making a telephone referral to the Adult Services Department, or Adult Protection Unit, explain that you want to make a 'Safeguarding Adults Referral'.

You will be asked to provide your name and contact details.

You will then be asked to provide details of the allegation, you must ensure that the information you share is factual based upon the information you have, never make any assumptions.

Once the referral is complete, you must document this on your records and include the time the referral was made, who you spoke with and any other relevant information.

Following on from this, the Investigating Officer from the Adult Services team will make a decision as to whether a Safeguarding assessment is required, and you should be informed by the end of the following day.

Safeguarding assessments will usually involve a Safeguarding inquiry and an assessment of the need for health and social care provision.

Not all safeguarding referrals will result in a safeguarding assessment and inquiry. The outcome however may be that other forms of inquiries are more appropriate such as; Disciplinary or Complaints.

### **Further Steps**

The alleged victim will be informed in writing at the earliest possible point of the actions that have been taken by Dementia Studio.

We will follow the guidance of the investigating officer and investigating organisation in relation to the appropriate disclosure of information to any other third party including other colleagues and voluntary organisations where the person responsible for abuse is involved.

## **Appendix Two: Adult Social Care Referral Points**

### **Nottingham City Council**

Health and Care Point – 0300 300 33 33

(Opening times; Monday - Thursday 8.30am – 5.00pm, Friday 8.30am – 4.30pm)

### **Nottinghamshire County Council**

Multi-Agency Safeguarding Hub (MASH) – 0300 500 80 90 (professionals only)

(Opening times; Monday - Thursday 8.30am – 5.00pm, Friday 8.30am – 4.30pm)

Completing the online form at [www.safeguardingadultsnotts.org](http://www.safeguardingadultsnotts.org) (professionals only) (Anytime)

**Nottinghamshire Customer Service Centre** – 0300 500 80 80 (members of public)

(Opening times; Monday – Friday 8.00am – 8.00pm, Saturday 8.00am)

## **Appendix Three: Name of Referrers for Dementia Studio activities**

Deborah Kitson, Trustee, [deb.kitson@hotmail.co.uk](mailto:deb.kitson@hotmail.co.uk)

Justine Schneider, Trustee, [justine@dementiastudio.co.uk](mailto:justine@dementiastudio.co.uk)

| Section A-Details of the person you are concerned about: (Mandatory)                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                        |        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------|--------|
| Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | Age / Date of Birth:   |        |
| Home Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | Male                   | Female |
| Post code:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | Telephone/ Mobile:     |        |
| Current location of person if different from above.                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | NHS Identification No: |        |
| GP Name.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | GP Address.            |        |
| Has the concern been raised to any other organisation; e.g. Police, CQC. If yes, please specify or state no.                                                                                                                                                                                                                                                                                                                                                                                                   |  |                        |        |
| <p><b>The Care Act 2014 (S.42) mandates the Local Authority to make safeguarding enquiries if the following three conditions are met.</b></p> <p>Is the adult in need of care and support (whether or not the authority is meeting any of those needs)?</p> <p>Yes      No</p> <p>Is the adult experiencing, or at risk of abuse or neglect?</p> <p>Yes      No</p> <p>As a result of those needs are they unable to protect themselves against the abuse or neglect or the risk of it?</p> <p>Yes      No</p> |  |                        |        |
| <b><u>Mental Capacity. (Mandatory section)</u></b>                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                        |        |
| Does the person you are concerned about give their consent to the referral?                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                        |        |
| Yes. <input type="checkbox"/> (see a) below) No. <input type="checkbox"/> (see b) below)                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                        |        |
| <b><u>a) If yes, person to sign below:</u></b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                        |        |
| I agree that the information detailed below can be shared with the local authority, police and partner agencies in order to help with this safeguarding enquiry.                                                                                                                                                                                                                                                                                                                                               |  |                        |        |
| Signed:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | Printed Name:          |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | Date:                  |        |



**b) If the person is not able or not required to give their consent to this form please state reasons below.**

Please give reasons for any decisions to refer without the persons consent, *for example; other people are at risk of abuse, a person's mental capacity is questionable - this should also be documented in the client's notes.*

**Signed (person raising concern):**

**Printed Name:**

**Date:**

**Type of Abuse** tick all that apply: ✓

- ☐ Physical      ☐ Sexual      ☐ Financial      ☐ Neglect      ☐ Self neglect      ☐ Organisational  
☐ Discriminatory   ☐ Psychological      ☐ Domestic Abuse      ☐ Other – please detail  
☐ Modern day slavery

**Section B- Details of Concern/ Suspected Abuse. (Mandatory)**

Please describe as fully as possible: include how it came to your attention, time(s), dates(s) and location(s) of alleged incident(s) and names of witnesses (if known). Detail any injuries and complete a body map if necessary.

**Action taken to protect the victim;** details of any measures taken to secure the victim's immediate safety for example, enhanced protection plan, admitted to hospital or respite care etc.

**Has the risk management framework been applied to the concern?**

☐ Yes, Please state the risk score ..... ☐ No.....

**Section C-Details of person suspected or alleged to have caused/allowed the abuse (if known)**

|                                           |                      |  |        |
|-------------------------------------------|----------------------|--|--------|
| Name:                                     | Age / Date of Birth: |  |        |
| Home Address:                             | Male                 |  | Female |
| Postcode:                                 | Ethnicity:           |  |        |
| Telephone/ Mobile:                        | NHS ID               |  |        |
| Current Location if different from above: |                      |  |        |

**Relationship of person alleged to have caused the abuse to the Adult at Risk you are concerned about: ✓**

- ☐ Husband/Wife/Partner    ☐ Son/Daughter    ☐ Friend/Neighbour    ☐ Other Resident    ☐ Stranger  
☐ Professional/ paid care    ☐ Volunteer    ☐ Carer    ☐ Other - detail:

Are you concerned that other adults or children are at risk from the person suspected of causing or allowing the abuse?    ☐ Yes (give reasons)    ☐ No    ☐ Don't Know

Does the person suspected of causing the abuse provide care to the victim or any other person?  
☐ Yes    ☐ No    ☐ Don't Know

Is the person suspected of causing the abuse aware of the allegation?  
☐ Yes    ☐ No    ☐ Don't Know

**Section D- Your Details – i.e. the person raising this concern (Mandatory)**

|            |                     |
|------------|---------------------|
| Name:      | Job Title:          |
| Address:   | Telephone / Mobile: |
| Post code: | Email:              |
| Signature  | Date:               |
|            |                     |

|                        |                                              |
|------------------------|----------------------------------------------|
|                        | Whistleblowing Policy & Procedures 21.1.2026 |
| Policy Owner           | Deborah Kitson                               |
| Date reviewed          |                                              |
| Date approved by board | 21.1.2026                                    |
| Next review due by     | 20.1.2029                                    |

## 1.0 INTRODUCTION

It is important that any fraud, misconduct or wrongdoing by staff or others working on behalf of Dementia Studio is reported and properly dealt with. We require all individuals to raise any concerns that they may have about the conduct of others in Dementia Studio or the way in which the organisation is run. This policy sets out the way in which individuals may raise any concerns that they have and how those concerns will be dealt with.

1.1 The Public Interest Disclosure Act 1998 amended the Employment Rights Act 1996 to provide protection for employees who raise legitimate concerns about specified matters in the public interest. These are called "qualifying disclosures". A qualifying disclosure is one made by an employee who has a reasonable belief that

- a criminal offence;
- a miscarriage of justice;
- an act creating risk to health and safety;
- an act causing damage to the environment;
- a breach of any other legal obligation; or
- concealment of any of the above; is being, has been, or is likely to be, committed. It is not necessary for you to have proof that such an act is being, has been, or is likely to be, committed - a reasonable belief is sufficient. You have no responsibility for investigating the matter - it is the charity's responsibility to ensure that an investigation takes place.

If you make a protected disclosure you have the right not to be dismissed, subjected to any other detriment, or victimised, because you have made a disclosure. We encourage you to raise your concerns under this procedure in the first instance.

## 2.0 PRINCIPLES

- Everyone should be aware of the importance of preventing and eliminating wrongdoing at work. Staff and others working on behalf of the charity should be watchful for illegal or unethical conduct and report anything of that nature that they become aware of.
- Any matter raised under this procedure will be investigated thoroughly, promptly and confidentially, and the outcome of the investigation reported back to the person who raised the issue.
- No employee or other person working on behalf of Dementia Studio will be victimised for raising a matter under this procedure. This means that the continued employment and opportunities for future promotion or training of the worker will not be prejudiced because they have raised a legitimate concern.
- Victimisation of an individual for raising a qualified disclosure will be a disciplinary offence.

- If misconduct is discovered as a result of any investigation under this procedure our disciplinary procedure will be used, in addition to any appropriate external measures.
- Maliciously making a false allegation is a disciplinary offence.
- An instruction to cover up wrongdoing is itself a disciplinary offence. If told not to raise or pursue any concern, even by a person in authority such as a manager, you should not agree to remain silent. You should report the matter to a Trustee.

### **3.0 PROCEDURE**

This procedure is for disclosures about matters other than a breach of your own contract of employment, which should be raised via the Grievance Procedure.

#### **Stage 1:**

In the first instance, any concerns should be raised with a Trustee, who will arrange an investigation of the matter. The investigation may involve you and other individuals involved giving a written statement. Any investigation will be carried out in accordance with the principles set out above. Your statement will be taken into account, and you will be asked to comment on any additional evidence obtained. The Director will take any necessary action, including reporting the matter to the Chair of the Board of Trustees. The Director will also invoke any disciplinary action required. On conclusion of any investigation, you will be told the outcome and what Dementia Studio has done, or proposes to do, about it. If no action is to be taken, the reason for this will be explained.

#### **Stage 2:**

If you are concerned that a Trustee is involved in the wrongdoing, has failed to make a proper investigation or has failed to report the outcome of the investigations to the relevant person, you should escalate the matter to a Trustee other than the person concerned. The Trustee will arrange for a review of the investigation to be carried out, make any necessary enquiries and make their own report to the Board.

#### **Stage 3:**

If on conclusion of stages 1 and 2 you reasonably believe that the appropriate action has not been taken, you should report the matter to the relevant body. This includes:

- HM Revenue & Customs
- The Health and Safety Executive
- The Environment Agency
- The Serious Fraud Office
- The Charity Commission
- The Pensions Regulator
- The Information Commissioner
- The Financial Conduct Authority

You can find the full list in The Public Interest Disclosure (Prescribed Persons) Order 2014:

<https://www.gov.uk/government/publications/blowing-the-whistle-list-of-prescribed-people-and-bodies--2>

### **4.0 DATA PROTECTION**

When an individual makes a disclosure, we will process any personal data collected in accordance with our data protection policy. Data collected from the point at which the individual makes the report is held

securely and accessed by, and disclosed to, individuals only for the purposes of dealing with the disclosure.

## **5.0 REVIEW PROCESS**

This Policy & associated Procedures will be reviewed every year, or sooner if legislation or regulatory changes require an earlier review. Any amendments will be appropriately consulted on and signed off before being clearly communicated to colleagues.