



UK Ultimate Safeguarding Adults Policy and Procedures

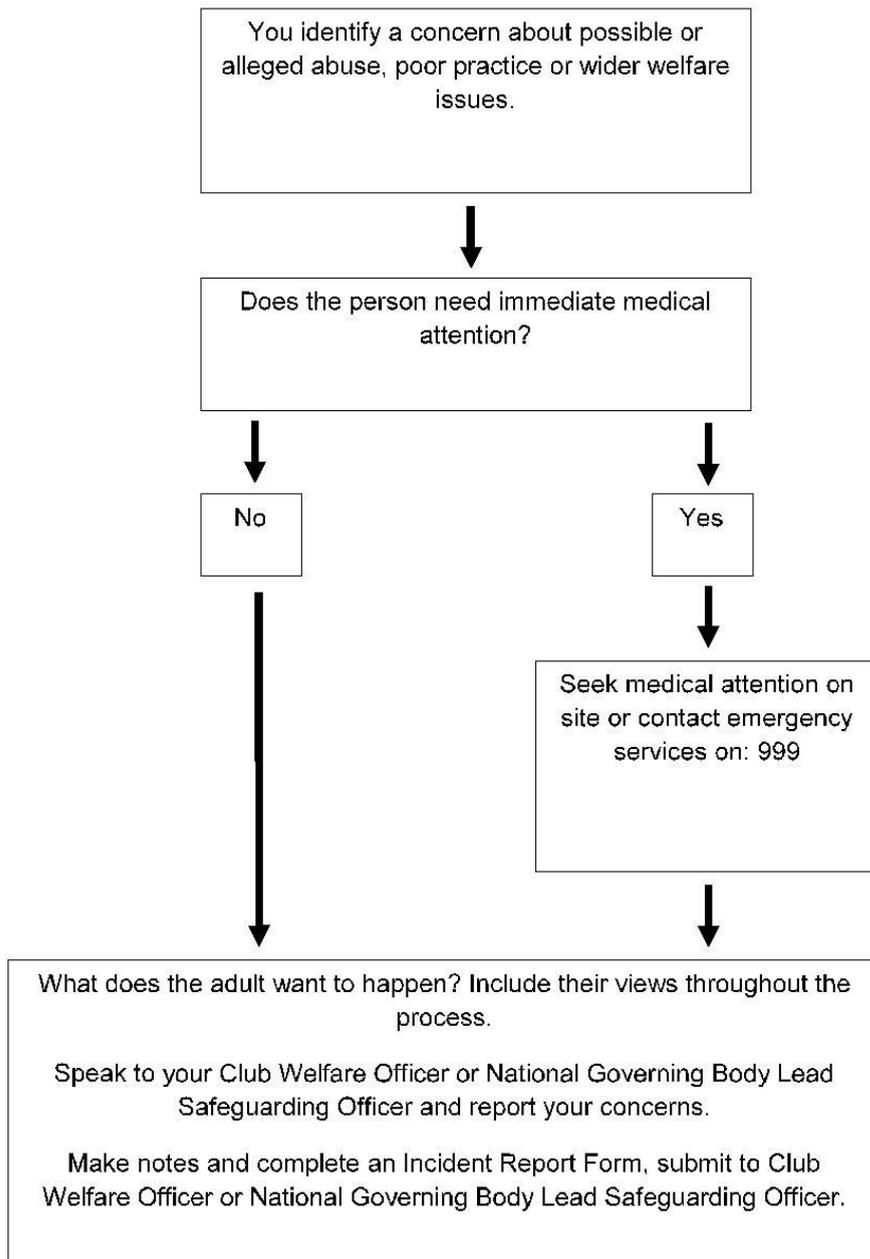
Adult Safeguarding at a glance

Do you have concerns about an adult?

Safeguarding is everyone's responsibility.

If you have concerns about an adult's safety and or wellbeing you must act on these.

It is not your responsibility to decide whether or not an adult has been abused. It is however your responsibility to act on any concerns.



UK Ultimate Safeguarding Adults Policy and Procedures

This document was approved in September 2018 and will be reviewed in three years or in the event of changes to legislation and guidance.

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Introduction

UK Ultimate (UKU) is the National Governing Body for the sport of Ultimate in Great Britain and Northern Ireland. As the National Governing Body, UK Ultimate is here to support, assist and encourage players and teams at all levels of the sport. We phrase this commitment as follows:

UK Ultimate works towards the goal that everyone should have an excellent experience of Ultimate in the UK. We intend to lead and support the UK's development into the World's leading Ultimate community. We will maintain and protect the Spirit of the Game as the underlying principle in everything we do.

In order to fulfil that commitment, UK Ultimate recognises that safeguarding is key to all relationships with children and adults. It is important that all reasonable steps are taken to ensure that best practice and procedures are followed. This document outlines the UK Ultimate policy and procedures for safeguarding adults.

1. UK Ultimate commitment to safeguarding adults

UK Ultimate is committed to creating and maintaining a safe and positive environment and accepts our responsibility to safeguard the welfare of all adults involved in UK Ultimate in accordance with the Care Act 2014.

UK Ultimate safeguarding adults policy and procedures apply to all individuals involved in Ultimate. There is an expectation that all affiliated clubs will adopt these.

UK Ultimate Ltd is committed to practice that safeguards adults from harm. Staff and volunteers who work for UK Ultimate Ltd will recognise and accept responsibilities for developing awareness, within the Ultimate community in the United Kingdom, of the issues that may cause adults harm.

All adults, regardless of age, ability or disability, gender, race, religion, ethnic origin, sexual orientation, marital or gender status have the right to be protected from abuse and poor practice and to participate in an enjoyable and safe environment.

UK Ultimate will seek to ensure that our sport is inclusive and make reasonable adjustments for any ability, disability or impairment, we will also commit to continuous development, monitoring and review.

The rights, dignity and worth of all adults will always be respected.

We recognise that ability and disability can change over time, such that some adults may be additionally vulnerable to abuse, for example those who have a dependency on others or have different communication needs.

We all have a shared responsibility to ensure the safety and well-being of all adults and will act appropriately and report concerns whether these concerns arise within UK Ultimate for example inappropriate behaviour of a coach, or in the wider community.

All allegations will be taken seriously and responded to quickly in line with UK Ultimate Safeguarding Adults Policy and Procedures.

UK Ultimate recognises the role and responsibilities of the statutory agencies in safeguarding adults and is committed to complying with the procedures of the Local Safeguarding Adults Boards.

2. Principles

The guidance given in the policy and procedures is based on the following principles: **The six principles of adult safeguarding**

The Care Act sets out the following principles that should underpin safeguarding of adults

Empowerment - People being supported and encouraged to make their own decisions and informed consent.

“I am asked what I want as the outcomes from the safeguarding process and these directly inform what happens.”

Prevention – It is better to take action before harm occurs.

“I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help.”

Proportionality – The least intrusive response appropriate to the risk presented.

“I am sure that the professionals will work in my interest, and they will only get involved as much as needed.”

Protection – Support and representation for those in greatest need.

“I get help and support to report abuse and neglect. I get help so that I am able to take part in the safeguarding process to the extent to which I want.”

Partnership – Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse

“I know that staff treat any personal and sensitive information in confidence, only sharing what is helpful and necessary. I am confident that professionals will work together and with me to get the best result for me.”

Accountability – Accountability and transparency in delivering safeguarding.

“I understand the role of everyone involved in my life and so do they.”

It is also important to consider:

Making Safeguarding personal

‘Making safeguarding personal’ means that adult safeguarding should be person led and outcome focussed. It engages the person in a conversation about how best to respond to their safeguarding situation in a way that enhances involvement, choice and control. As well as improving quality of life, well-being and safety.

Wherever possible discuss safeguarding concerns with the adult to get their view of what they would like to happen and keep them involved in the safeguarding process, seeking their consent to share information outside of the organisation where necessary.

Wellbeing Principle

The concept of wellbeing is threaded throughout the Care Act and it is one that is relevant to adult safeguarding in sport and activity. Wellbeing is different for each of us however the Act sets out broad categories that contribute to our sense of wellbeing. By keeping these themes in mind, we can all ensure that adult participants can take part in Ultimate Frisbee fully.

- Personal dignity (including treatment of the individual with respect)
- Physical and mental health and emotional wellbeing
- Protection from abuse and neglect
- Control by the individual over their day-to-day life (including over care and support provided and the way they are provided)
- Participation in work, education, training or recreation
- Social and economic wellbeing
- Domestic, family and personal domains
- Suitability of the individual's living accommodation
- The individual's contribution to society.

The Mental Capacity Act 2005 - states that every individual has the right to make their own decisions and provides the framework for this to happen.

3. Guidance and Legislation

The practices and procedures within this policy are based on the principles contained within the UK legislation and Government Guidance and have been developed to complement the Safeguarding Adults Boards policy and procedures, and take the following into consideration:

- The Care Act 2014
- The Protection of Freedoms Act 2012
- Domestic Violence, Crime and Victims (Amendment) Act 2012
- The Equality Act 2010
- The Safeguarding Vulnerable Groups Act 2006
- Mental Capacity Act 2005
- Sexual Offences Act 2003
- The Human Rights Act 1998
- The Data Protection Act 1994 and 1998

See appendix 2 for a more guidance and information on;
Making Safeguarding personal
Capacity – Guidance on Making Decisions
Consent and Information Sharing

4. Definitions

Adult at Risk is a person aged 18 or over who:

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

and;

- Is experiencing, or is 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.

Adult in need of care and support is determined by a range of factors including personal characteristics, factors associated with their situation or environment and social factors.

Naturally, a person's disability or frailty does not mean that they will inevitably experience harm or abuse.

In the context of safeguarding adults, the likelihood of an adult in need of care and support experiencing harm or abuse should be determined by considering a range of social, environmental and clinical factors, not merely because they may be defined by one or more of the above descriptors.

In recent years there has been a marked shift away from using the term 'vulnerable' to describe adults potentially at risk from harm or abuse.

Abuse is a violation of an individual's human and civil rights by another person or persons. See section 5 for further explanations.

Adult is anyone aged 18 or over.

Adult safeguarding is protecting a person's right to live in safety, free from abuse and neglect.

Capacity refers to the ability to make a specific decision at a particular time, for example when under considerable stress. The starting assumption must always be that a person has the capacity to make a decision unless it can be established that they lack capacity (MCA 2005). (For more information on the MCA see Appendix 2)

DSO - Designated Safeguarding Officer

'Making Safeguarding Personal' (MSP) – an approach to safeguarding adults that develops a safeguarding culture focused on the personalised outcomes desired by people with care and support needs who may have been abused.

5. Types of Abuse and Neglect

Definitions from the Care Act 2014

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. This could be a player whose appearance becomes unkempt, does not wear suitable sports kit and has a deterioration in hygiene.

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. This could be a participant in a team who has been missing from practice sessions and is not responding to reminders from team members or coaches.

Domestic Abuse – including psychological, physical, sexual, financial and emotional abuse. It also includes so called 'honour' based violence, FGM and Forced Marriage. You may notice a power imbalance between a participant and a family member. For example a participant may be looking quiet and withdrawn when their brother comes to collect them from sessions, in contrast to their personal assistant whom they greet with a smile.

Discriminatory – discrimination is abuse which centres on a difference or perceived difference particularly with respect to race, gender or disability or any of the protected characteristics of the Equality Act. This could be the harassing of a club member because they are or are perceived to be transgender

Organisational Abuse – including neglect and poor care practice within an institution or specific care setting such as a hospital or 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. For example this could be training without a necessary break.

Physical Abuse – includes hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate sanctions. This could be a coach intentionally striking an athlete.

Sexual Abuse – including rape, indecent exposure, sexual harassment, inappropriate looking or 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. This could be a fellow athlete who sends unwanted sexually explicit text messages to an adult with mental health issues they are training alongside.

Financial or Material Abuse – including theft, fraud, internet scamming, coercion in relation to an adult’s financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits. This could be someone taking equipment from an athlete.

Neglect - 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. This could be a coach not ensuring athletes have access to water.

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. This could be an athlete threatening another athlete with physical harm and persistently blaming them for poor performance. It also includes bullying.

Not included in the Care Act 2014 but also relevant:

Cyber Bullying - cyber bullying occurs when someone repeatedly makes fun of another person online or repeatedly picks on another person through emails or text messages, or uses online forums with the intention of harming, damaging, humiliating or isolating another person. It can be used to carry out many different types of bullying (such as racist bullying, homophobic bullying, or bullying related to special educational needs and disabilities) but instead of the perpetrator carrying out the bullying face-to-face, they use technology as a means to do it.

Forced Marriage - forced marriage is a term used to describe a marriage in which one or both of the parties are married without their consent or against their will. A forced marriage differs from an arranged marriage, in which both parties consent to the assistance of a third party in identifying a spouse. The Anti-social Behaviour, Crime and Policing Act 2014 make it a criminal offence to force someone to marry.

Mate Crime - a 'mate crime' as defined by the Safety Net Project is 'when vulnerable people are befriended by members of the community who go on to exploit and take advantage of them. It may not be an illegal act but still has a negative effect on the individual.' Mate Crime is carried out by someone the adult knows and often happens in private. In recent years there have been a number of Serious Case Reviews relating to people with a learning disability who were murdered or seriously harmed by people who purported to be their friend.

Radicalisation - the aim of radicalisation is to attract people to their reasoning, inspire new recruits and embed their extreme views and persuade vulnerable individuals of the legitimacy of their cause. This may be direct through a relationship, or through social media.

Non - recent abuse

Non-recent abuse (also known as historical abuse) is an allegation of neglect, physical, sexual or emotional abuse made by or on behalf of someone who is now 18 years or over, relating to an incident which took place when the alleged victim was under 18 years old.

6. Signs and indicators of abuse and neglect

Abuse can take place in any context and by all manner of perpetrator. Abuse may be inflicted by anyone in the club who an athlete comes into contact with. Or club members, workers, volunteers or coaches may suspect that an athlete is being abused or neglected outside of the club setting.

There are many signs and indicators that may suggest someone is being abused or neglected, these include but are not limited to:

- Unexplained bruises or injuries – or lack of medical attention when an injury is present.
- Person has belongings or money going missing.
- Person is not attending / no longer enjoying their sessions.
- Someone losing or gaining weight / an unkempt appearance.
- A change in the behaviour or confidence of a person
- They may self-harm.
- They may have a fear of a particular group or individual.
- They may tell you / another person they are being abused or that they have been abused– i.e. a disclosure.

7. Taking action - what to do if you have a concern or someone raises concerns with you?

You may become aware that abuse or poor practice is taking place, suspect abuse or poor practice may be occurring or be told about something that may be abuse or poor practice. You must follow the procedures outlined in the flowchart in section 9.

- It is not your responsibility to decide whether or not an adult has been abused. It is however everyone's responsibility to respond to and report concerns.
- Report your concerns to your club welfare officer, or if they are not available or the concern is related to them, a UK Ultimate Designated Safeguarding Officer (DSO).
- If you are concerned someone is in immediate danger, contact the police immediately by calling 999. Then follow up with your club welfare officer (CWO).
- If the CWO or UK Ultimate DSO is not available and you want to talk through an issue, contact your Adult Social Care Team who will give advice and support. Then follow up with your welfare officer.
- If the concerns are about a welfare officer of a club or another organisation, contact a national UK Ultimate DSO directly.
- When raising your concern with the Club Welfare Officer or Lead Safeguarding Officer, remember Making Safeguarding Personal. It is good practice to seek the adult's views on what they would like to happen next and to inform the adult you will be passing on your concern and
- It is important when considering your concern that you also ensure that keep the person informed about any decisions and action taken about them and always consider their needs and wishes.

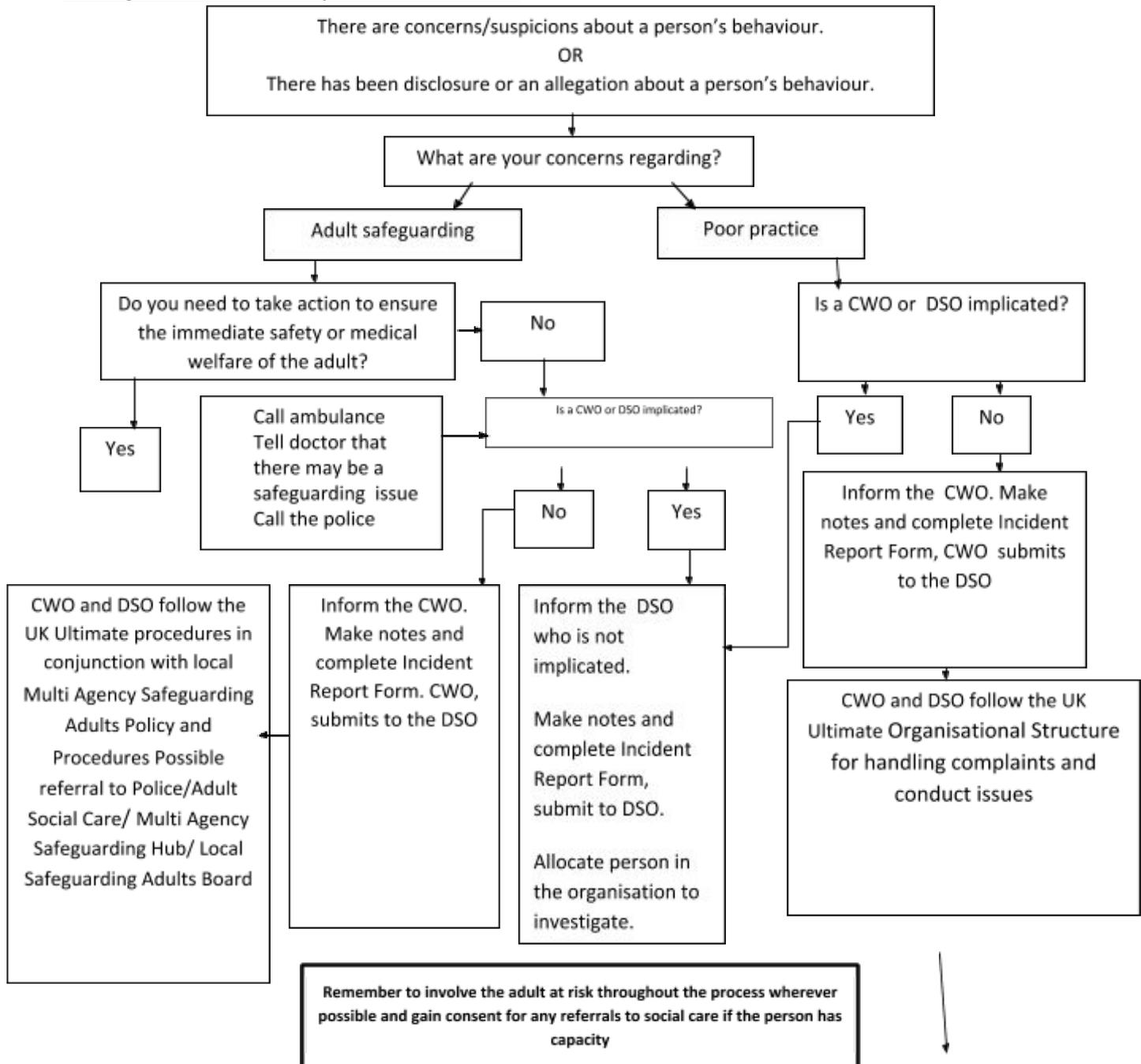
8. How to Record a Concern or a Disclosure

- Make a note of the concerns or what the person has said, using his or her own words as soon as practicable. Complete an Incident Form and submit to the CWO

- As long as it does not increase the risk to the individual, you should explain to them that it is your duty to share your concern with your CWO
- The CWO will then forward to the DSO for advice, guidance and support in managing the concern
- Remember to make safeguarding personal. Discuss your safeguarding concerns with the adult, obtain their view of what they would like to happen, but inform them it's your duty to pass on your concerns to your lead safeguarding or welfare officer.
- Describe the circumstances in which the concern or disclosure came about and the adult's view of the concern.
- Take care to distinguish between fact, observation, allegation and opinion. It is important that the information you have is accurate.
- Be mindful of the need to be confidential at all times, this information must only be shared with the CWO and DSO and others on a need to know basis.
- If the matter is urgent and relates to the immediate safety of an adult then contact the emergency services immediately.

9. Safeguarding Adults Flowchart

Dealing with Concerns, Suspicions or Disclosure



Possible outcomes:

Criminal proceedings

- Police enquiry
- Adult Care Safeguarding Assessment
- Disciplinary Measures
- Case management group to decide on the management of any remaining concerns
- No further action

10. Roles and responsibilities of UK Ultimate

To ensure that UK Ultimate has the required capacity to carry out our safeguarding, UK Ultimate is committed to having the following in place:

- Two Designated Safeguarding Officers (DSOs) who are appropriately trained and have appropriate experience to manage the safeguarding responsibilities for UK Ultimate. This role will produce and disseminate appropriate guidance and resources to support this policy and procedures. A complete role description can be provided.
- A clear line of accountability within UK Ultimate for work on promoting the welfare of adults.
- A 'safeguarding champion' at Board level will be appointed.
- An internal safeguarding steering group will meet regularly, consisting of operational staff to review and manage the safeguarding responsibilities of UK Ultimate. This will be chaired by a Designated Safeguarding Officer.
- Disciplinary procedures for dealing with allegations of poor practice against members of staff and volunteers. A disciplinary panel will be formed as required for a given incident, if appropriate and should a threshold be met.
- Arrangements in place to work effectively with other organisations to safeguard and promote the welfare of adults, including arrangements for sharing information.
- Appropriate whistle blowing procedures and an open and inclusive culture that enables safeguarding, equality and diversity issues are addressed.
- A safeguarding adults training plan

11. Good practice

It can be difficult to distinguish poor practice from abuse, whether intentional or accidental.

It is not the responsibility of any individual involved in the sport to make judgements regarding whether or not abuse is taking place, however, everyone has the responsibility to recognise and identify poor practice and potential abuse, and act on this if they have concerns.

UK Ultimate expects that coaches of adult athletes:

- Adopt and endorse the UK Ultimate Coaches Codes of Conduct.
- Adopt and endorse the policy and procedures set out in this document
- Have an understanding of safeguarding adults and keeping up with best practice
- Respect the developmental stage of each athlete and not risk sacrificing their welfare in a desire for team or personal achievement.
- Have completed a course in basic awareness in working with and safeguarding Adults.

12. Relevant Policies and Procedures

This policy should be read in conjunction with the following UK Ultimate policies:

- Whistle Blowing
- Safeguarding in UK Ultimate Organisation and Processes
- Conduct and Complaints Policy
- Safeguarding and Child Protection Policy
- Safeguarding in UK Ultimate - Ultimate Clubs
- Code of Conduct for UK Ultimate Coaches

13. Further Information

Policies, procedures and supporting information are sent to every club. They are also available on <https://www.ukultimate.com/safeguarding>

Contacting UK Ultimate

UK Ultimate has national designated safeguarding officers who help clubs to deal with cases of misconduct, poor practice and abuse. They are a point of contact for any concerned club members, club welfare officers or club committee.

Contact UK Ultimate: 0844 804 5949 admin@ukultimate.com

Our Designated Safeguarding Officers are:

Joe Wyatt, Director, UK Ultimate

Simon Hill, Director, UK Ultimate

This is not a 24 hour number. If you have an emergency please contact the emergency services and inform UK Ultimate via the incident form.

External Help:

You can receive support on any aspect of adult safeguarding from the Ann Craft Trust - they are funded by Sport England to help sport and activity organisations:

Website: www.anncrafttrust.org

Email: Ann-Craft-Trust@nottingham.ac.uk Telephone: 0115 951 5400

Victim Support - supporting people affected by crime, including non-recent abuse

Website: www.victimsupport.org.uk Telephone: 08 08 16 89 111

Appendix 1

Safeguarding Adults Incident form

To be completed as fully as possible if you have concerns regarding an adult. It is important to inform the adult about your concerns and that you have a duty to pass the information onto the safeguarding officer. The safeguarding officer will then look at the information and start to plan a course of action, in conjunction with yourself, the adult involved and if necessary social care or other relevant organisations.

Section 1 – details of adult at risk	
Name of adult	
Address	
Date of Birth	
Age if date of birth not known	
GP practice (if known)	
Contact number	
Section 2 – your details	
Name	
Contact phone number(s)	
Email address	
Line manager or alternative contact	
Name of organisation / club	
Your Role in organisation	
Section 3 – details of Concern	
Detail what you have seen/been told/other that makes you believe the adult at risk is being abused or is at risk of abuse (include dates/times/evidence from records/photos etc.)	

Section 4 - Abuse type(s) – please tick as many as you feel may apply		
Physical	Psychological	Financial
Sexual	Discriminatory	Organisational (formerly institutional)
Neglect	Hate incident/crime	Mate Crime
Internet abuse	Modern slavery	Female genital Mutilation (FGM)
Forced Marriage	Domestic abuse	Radicalisation
Self-Neglect		
Section 5 - Have you discussed your concerns with the adult? What are their views, what outcomes have they stated they want (if any)?		
Section 5A – Reasons for not discussing with the adult		
Adult lacks capacity		
Adult unable to communicate their views		
Discussion would increase the risk		
State why the risks would increase		

Section 5B - Have you discussed your concerns with anyone else? E.g. carer/ parent. What are their views?

Section 6 – What action have you taken /agreed with the adult to reduce the risks?	
Information passed to Safeguarding Officer, confirm details:	Referral to Social Care Confirm details:
Contact with the police Confirm details:	Referral to other agency – please confirm details:
Other – please state what	
No action agreed – state why	
Section 7 – Risk to others	
Are any other adults at risk Yes/No – delete as appropriate	
If yes state why and what actions have been taken to address these?	
Are any children at risk Yes/No Delete as appropriate	

If yes state why and what actions have been taken to address these?

OFFICE USE ONLY

Section 8 – sharing the concerns (To be completed by Lead Safeguarding Officer)

Details of your contact with the adult at risk. Have they consented to information being shared outside of UKU?

Details of contact with the Social Care Team where the adult at risk lives – advice can be still sought without giving personal details if you do not have consent for a referral

Details of any other agencies contacted

Details of the outcome of this concern

Appendix 2

Guidance and information

Making Safeguarding Personal

There has been a cultural shift towards Making Safeguarding Personal within the safeguarding process. This is a move from prioritising outcomes demanded by bureaucratic systems. The safeguarding process used to involve gathering a detailed account of what happened and determining who did what to whom. Now the outcomes are defined by the person at the centre of the safeguarding process.

The safeguarding process places a stronger emphasis on achieving satisfactory outcomes that take into account the individual choices and requirements of everyone involved.

“What good is it making someone safer if it merely makes them miserable?” – Lord Justice Mundy, “What Price Dignity?” (2010)

What this means in practice is that adults should be more involved in the safeguarding process. Their views, wishes, feelings and beliefs must be taken into account when decisions are made.

The Care Act 2014 builds on the concept, stating that “We all have different preferences, histories, circumstances and lifestyles so it is unhelpful to prescribe a process that must be followed whenever a concern is raised.”

However, the Act is also clear that there are key issues that should be taken into account when abuse or neglect are suspected, and that there should be clear guidelines regarding this.

<https://www.local.gov.uk/topics/social-care-health-and-integration/adult-social-care/making-safeguarding-personal>

Capacity – Guidance on Making Decisions

The issue of capacity or decision making is a key one in safeguarding adults. It is useful for organisations to have an overview of the concept of capacity.

We make many decisions every day, often without realising. We make so many decisions that it’s easy to take this ability for granted.

But some people are only able to make some decisions, and a small number of people cannot make any decisions. Being unable to make a decision is called “lacking capacity”.

To make a decision we need to:

- Understand information
- Remember it for long enough
- Think about the information
- Communicate our decision

A person’s ability to do this may be affected by things like learning disability, dementia, mental health needs, acquired brain injury, and physical ill health.

The Mental Capacity Act 2005 (MCA) states that every individual has the right to make their own decisions and provides the framework for this to happen.

The MCA is about making sure that people over the age of 16 have the support they need to make as many decisions as possible.

The MCA also protects people who need family, friends, or paid support staff to make decisions for them because they lack capacity to make specific decisions.

Our ability to make decisions can change over the course of a day.

Here are some examples that demonstrate how the timing of a question can affect the response:

- A person with epilepsy may not be able to make a decision following a seizure.
- Someone who is anxious may not be able to make a decision at that point.
- A person may not be able to respond as quickly if they have just taken some medication that causes fatigue.

In each of these examples, it may appear as though the person cannot make a decision. But later in the day, presented with the same decision, they may be able to at least be involved.

The MCA recognises that capacity is decision-specific, so no one will be labelled as entirely lacking capacity. The MCA also recognises that decisions can be about big life-changing events, such as where to live, but equally about small events, such as what to wear on a cold day.

To help you to understand the MCA, consider the following five points:

1. Assume that people are able to make decisions, unless it is shown that they are not. If you have concerns about a person's level of understanding, you should check this with them, and if applicable, with the people supporting them.
2. Give people as much support as they need to make decisions. You may be involved in this – you might need to think about the way you communicate or provide information, and you may be asked your opinion.
3. People have the right to make unwise decisions. The important thing is that they understand the implications. If they understand the implications, consider how risks might be minimised.
4. If someone is not able to make a decision, then the person helping them must only make decisions in their "best interests". This means that the decision must be what is best for the person, not for anyone else. If someone was making a decision on your behalf, you would want it to reflect the decision you would make if you were able to.
5. Find the least restrictive way of doing what needs to be done.

Remember:

- You should not discriminate or make assumptions about someone's ability to make decisions, and you should not pre-empt a best-interest's decision merely on the basis of a person's age, appearance, condition, or behaviour.
- When it comes to decision-making, you could be involved in a minor way, or asked to provide more detail. The way you provide information might influence a person's ultimate decision. A person may be receiving support that is not in-line with the MCA, so you must be prepared to address this.

Consent and Information Sharing

Workers and volunteers within sports and physical activity organisations should always share safeguarding concerns in line with their organisation's policy, usually with their safeguarding lead or welfare officer in the first instance, except in emergency situations. As long as it does not increase the risk to the individual, the worker or volunteer should explain to them that it is their duty to share their concern with their safeguarding lead or welfare officer.

The safeguarding lead or welfare officer will then consider the situation and plan the actions that need to be taken, in conjunction with the adult at risk and in line with the organisation's policy and procedures and local safeguarding adults board policy and procedures.

To make an adult safeguarding referral you need to call the local safeguarding adults team. This may be part of a MASH (*Multi-Agency Safeguarding Hub*). A conversation can be had with the safeguarding adults team without disclosing the identity of the person in the first instance. If it is thought that a referral needs to be made to the safeguarding adults team, consent should be sought where possible from the adult at risk.

Individuals may not give their consent to the sharing of safeguarding information with the safeguarding adult's team for a number of reasons. Reassurance, appropriate support and revisiting the issues at another time may help to change their view on whether it is best to share information.

If they still do not consent, then their wishes should usually be respected. However, there are circumstances where information can be shared without consent such as when the adult does not have the capacity to consent, it is in the public interest because it may affect other people or a serious crime has been committed. This should always be discussed with your safeguarding lead and the local authority safeguarding adults team.

If someone does not want you to share information outside of the organisation or you do not have consent to share the information, ask yourself the following questions:

- Is the adult placing themselves at further risk of harm?
- Is someone else likely to get hurt?
- Has a criminal offence occurred? This includes: theft or burglary of items, physical abuse, sexual abuse, forced to give extra money for lessons (financial abuse) or harassment.
- Is there suspicion that a crime has occurred?

If the answer to any of the questions above is 'yes' - then you can share without consent and need to share the information.

When sharing information there are seven Golden Rules that should always be followed.

1. Seek advice if in any doubt
2. Be transparent - The Data Protection Act (DPA) is not a barrier to sharing information but to ensure that personal information is shared appropriately; except in circumstances where by doing so places the person at significant risk of harm.
3. Consider the public interest - Base all decisions to share information on the safety and well-being of that person or others that may be affected by their actions.

4. Share with consent where appropriate - Where possible, respond to the wishes of those who do not consent to share confidential information. You may still share information without consent, if this is in the public interest.
5. Keep a record - Record your decision and reasons to share or not share information.
6. Accurate, necessary, proportionate, relevant and secure - Ensure all information shared is accurate, up-to-date; necessary and share with only those who need to have it.
7. Remember the purpose of the Data Protection Act (DPA) is to ensure personal information is shared appropriately, except in circumstances where by doing so may place the person or others at significant harm.

Appendix 3

Legislation and Government Initiatives

Sexual Offences Act 2003

<http://www.legislation.gov.uk/ukpga/2003/42/contents>

The Sexual Offences Act introduced a number of new offences concerning vulnerable adults and children. www.opsi.gov.uk

Mental Capacity Act 2005

<http://www.legislation.gov.uk/ukpga/2005/9/introduction>

Its general principle is that everybody has capacity unless it is proved otherwise, that they should be supported to make their own decisions, that anything done for or on behalf of people without capacity must be in their best interests and there should be least restrictive intervention.

www.dca.gov.uk

Safeguarding Vulnerable Groups Act 2006

<http://www.legislation.gov.uk/ukpga/2006/47/contents>

Introduced the new Vetting and Barring Scheme and the role of the Independent Safeguarding Authority. The Act places a statutory duty on all those working with vulnerable groups to register and undergo an advanced vetting process with criminal sanctions for non-compliance.

www.opsi.gov.uk

Deprivation of Liberty Safeguards

<https://www.gov.uk/government/collections/dh-mental-capacity-act-2005-deprivation-of-liberty-safeguards>

Introduced into the Mental Capacity Act 2005 and came into force in April 2009. Designed to provide appropriate safeguards for vulnerable people who have a mental disorder and lack the capacity to consent to the arrangements made for their care or treatment, and who may be deprived of their liberty in their best interests in order to protect them from harm.

Disclosure & Barring Service 2013

<https://www.gov.uk/government/organisations/disclosure-and-barring-service/about>

Criminal record checks: guidance for employers - How employers or organisations can request criminal records checks on potential employees from the Disclosure and Barring Service (DBS).

www.gov.uk/dbs-update-service

The Care Act 2014 – statutory guidance

<http://www.legislation.gov.uk/ukpga/2014/23/introduction/enacted>

The Care Act introduces new responsibilities for local authorities. It also has major implications for adult care and support providers, people who use services, carers and advocates. It replaces No Secrets and puts adult safeguarding on a statutory footing.

Making Safeguarding Personal Guide 2014

<http://www.local.gov.uk/documents/10180/5852661/Making+Safeguarding+Personal+-+Guide+2014/4213d016-2732-40d4-bbc0-d0d8639ef0df>

This guide is intended to support councils and their partners to develop outcomes-focused, person-centred safeguarding practice.

Appendix 4

Useful Contacts

(to be completed with relevant details/information for your organisation/club)

Local Authority Safeguarding Lead (if policy is used by a CSP (County Sports Partnership) or club)

Name:

Email:

Telephone:

Police contact

Name:

Email:

Telephone:

Ann Craft Trust - Safeguarding Adults in Sport and Activity:

Website: www.anncrafttrust.org

Email: Ann-Craft-Trust@nottingham.ac.uk

Telephone: 0115 951 5400