

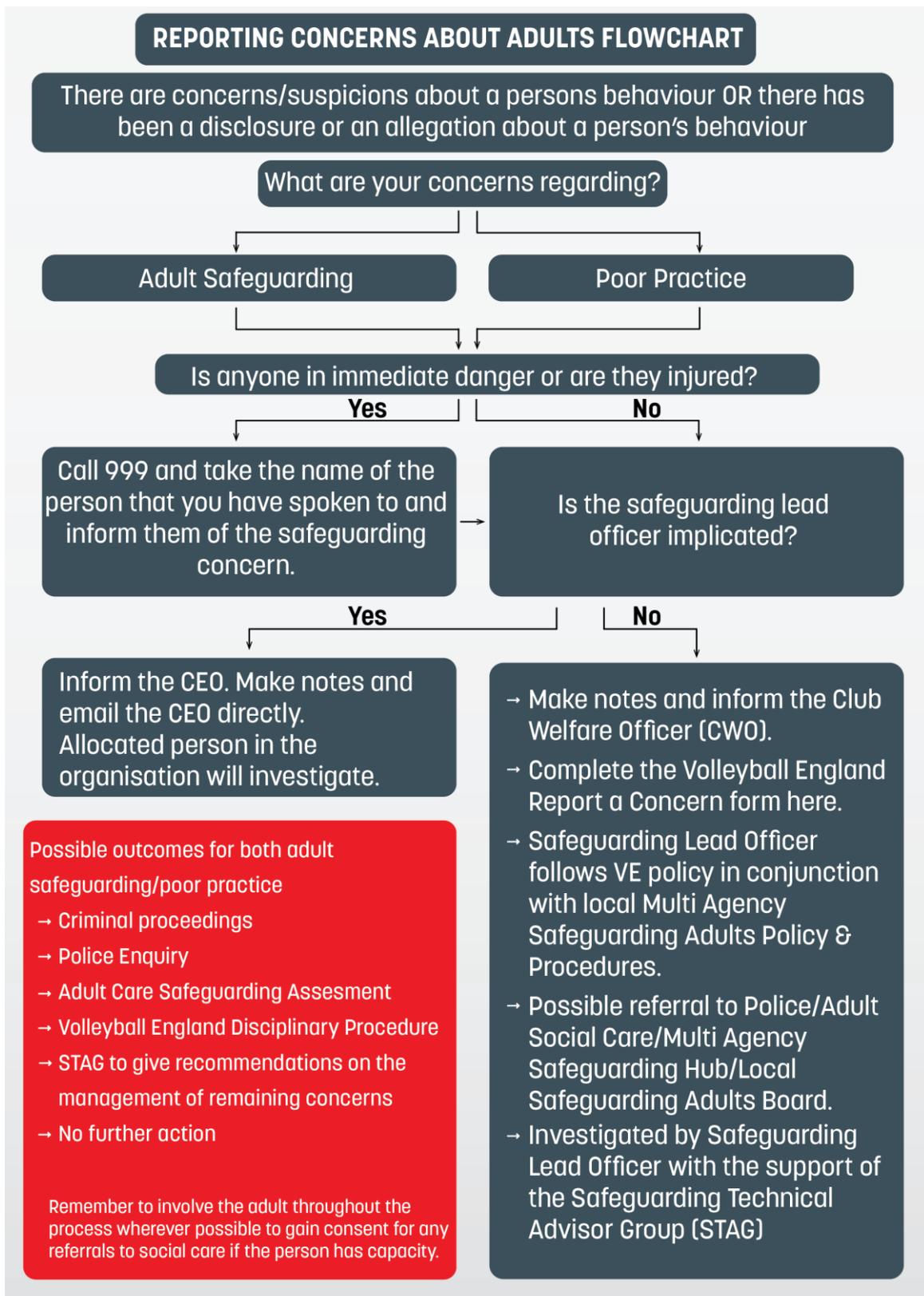
SAFEGUARDING ADULTS PROCEDURES & GUIDANCE

SECTION 2 – SAFEGUARDING ADULT PROCEDURES

1. REPORTING PROCEDURES

- 1.1 An important consideration for all members, volunteers and staff within Volleyball England is that all concerns about adults should be reported. It is not the responsibility of individuals to determine whether abuse has taken place, but it their responsibility to follow these procedures to report concerns.
- 1.2 Concerns can come from a variety of sources; observations of changes in behaviour, observations of an incident, reports by the adult themselves or someone else about a concern.
- 1.3 If you have concerns about the welfare of an adult, you should follow the following procedures:
 - Find out as much as you need to determine whether this is a concern.
 - If there is an immediate risk, call 999 and keep a record of the person you spoke to.
 - Complete the [Safeguarding Report a Concern Form](#).
 - Inform the Club Welfare Officer. The Club Welfare Officer will inform parents, spouse or carers of the concerns unless this would pose a risk to the adult. The Club Welfare Officer will liaise with the Regional and/or [Volleyball England Safeguarding Lead Officer](#) about next steps.
- 1.4 If an adult tells you about a concern, listen to them and let them know that you will need to report this concern in order to keep them safe. Do not promise to keep secrets. Only ask questions that assist you to reporting the concern to the Volleyball England Safeguarding Officer. Reassure the adult that they have done the right thing in talking to you.
- 1.5 Volleyball England will fully support anyone who, in good faith and where they have reasonable grounds for doing so, reports concern about a safeguarding concern related to a colleague, even if that concern is proved to be unfounded.
- 1.6 If you would like to discuss any concerns, please contact the [Volleyball England Safeguarding Lead Officer](#).

REPORTING CONCERNS ABOUT AN ADULT - FLOWCHART



1.8 Remember:

- Take notes so that you can fill in the relevant paperwork.
- It is not your responsibility to decide or investigate if abuse has occurred.
- It is your responsibility to take action, however slight your concern.
- Make a factual record of the events, using the [Safeguarding Incident Referral Form](#) and forward a copy of the form (including any action taken or additional information) to the Club Welfare Officer / Regional or Volleyball England Safeguarding Lead Officer as soon as possible.

2. WHISTLEBLOWING

- 2.1 It's important that everyone within Volleyball England has the confidence to come forward to speak or act if they are unhappy with anything. Whistleblowing occurs when a person raises a concern about dangerous or illegal activity, or any wrongdoing within their sports organisation. All such concerns will follow the Volleyball England [Whistleblowing Policy](#). When concerns are regarding the behaviour of an adult towards an adult these will be managed according to Volleyball England's Safeguarding Adults Policy.
- 2.2 All information received and discussed will be treated in confidence and only shared with those individuals who will be able to manage and resolve the situation in accordance with Volleyball England's Information Sharing Guidance. Individuals can raise a matter of concern without fear of victimisation, subsequent discrimination, or disadvantage. This policy is intended to encourage and enable individuals to raise serious concerns within Volleyball England and blow the whistle, rather than overlook the concern.
- 2.3 Volleyball England will do its utmost to protect the identity of the whistleblower when they raise a concern and do not want their name to be disclosed. However, it must be appreciated that the investigation process may reveal the source of the information and a statement by the whistleblower may be required as part of the evidence. They will be given prior notice of this and a chance to discuss the consequences. Volleyball England will not tolerate any harassment or victimisation (including informal pressure) towards whistleblowers and will take appropriate action to protect individuals when they raise a concern in good faith.
- 2.4 Volleyball England encourages the whistleblower to put their name to the allegation. Concerns expressed anonymously are much less powerful and may not provide all the relevant information. However, all reports will be considered at the discretion of the Case Management Group based on the seriousness of the issues raised, the credibility of the concern and the likelihood of confirming the allegation from attributable sources or factual records.
- 2.5 If an individual makes an allegation in good faith, but it is not confirmed by the investigation, no action will be taken against them. If, however, it is established that they have made malicious or frivolous allegations, or for personal gain, disciplinary action may be taken against them. In such cases, Volleyball England's disciplinary procedures will apply.

- 2.6 Individuals should raise the concern in the first instance with the Volleyball England Lead Safeguarding Officer by using the [reporting a concern form](#).
- 2.7 Although the whistleblower is not expected to prove the truth of an allegation, they will need to demonstrate to the Lead Safeguarding Officer that there are sufficient grounds for their concern.
- 2.8 If your concern is regarding the Lead Safeguarding Officer, you should refer the matter to the Volleyball England Chief Executive Officer.
- 2.9 If you do not want, or feel unable to report the concern to Volleyball England, you should contact your Local Authority whistleblowing advice line.

3. COMPLAINTS

- 3.1 All members, staff and volunteers, both adult and children, are entitled to make complaints to Volleyball England. Complaints are distinguished from “whistleblowing” as they can be made by those inside and outside Volleyball. Complaints can be made by adults, young people and children by following the [Volleyball England complaints procedures](#). If you have a concern about an adult at risk, please use these Safeguarding Adults Procedures.

SECTION 3 – GUIDANCE DOCUMENTS

1. THE SIX PRINCIPLES IN RELATION TO ADULTS AT RISK

1.1 The Care Act 2014 is the current legislation that sets out the six principles which underpin all adult safeguarding work:

- Empowerment: People being supported and encouraged to make their own decisions and informed consent.
- Prevention: It is better to take action 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.

1.2 Key Points:

- There is a **legal duty on Local Authorities** to provide support to ‘adults at risk’.
- **Adults at risk** are defined in legislation and Safeguarding Adults Policy.
- The safeguarding legislation applies **to all forms of abuse** that harm a person’s well-being.
- The law provides a framework for good practice in safeguarding that makes the overall **well-being** of the adult at risk a priority of any intervention.
- The law in all four home nations emphasises the importance of **person-centred safeguarding**, (referred to as ‘**Making Safeguarding Personal**’ in England).
- The law provides a framework for making decisions on behalf of adults who can’t make decisions for themselves (**Mental Capacity**).
- The law provides a framework for sports organisations to **share concerns** they have about adults at risk with the local authority.
- The law provides a framework for all organisations to **share information and cooperate** to protect adults at risk.

2. ABUSE

2.1 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.

- 2.2 There are different types and patterns of abuse and different circumstances in which they may take place. The 10 following types of abuse are:
- Physical abuse
 - Domestic violence or abuse
 - Sexual abuse
 - Psychological or emotional abuse
 - Financial or material abuse
 - Modern slavery
 - Discriminatory abuse
 - Organisational or institutional abuse
 - Neglect or acts of omission
 - Self-neglect
- 2.3 Abuse can take place in any relationship and there are many contexts in which abuse might take place, e.g. Institutional abuse, Domestic Abuse, Forced Marriage, Human Trafficking, Modern Slavery, Sexual Exploitation, County Lines, Radicalisation, Hate Crime, Mate Crime, Cyber bullying, Scams.
- 2.4 Abuse outside sport could be carried out by:
- A spouse, partner, or family member.
 - Neighbours or residents.
 - Friends, acquaintances, or strangers.
 - People who deliberately exploit adults they perceive as vulnerable.
 - Paid staff, professionals or volunteers providing care and support.
- 2.5 Abuse can take place within a sporting context and the person causing harm might be any other person. For example: a member of staff, a coach, a volunteer, a participant, or a fan.
- 2.6 Some examples of abuse within sport include:
- Harassment of a participant because of their (perceived) disability or other protected characteristics.
 - Not meeting the needs of the participant e.g., training without a necessary break.
 - A coach intentionally striking an athlete
 - One elite participant controlling another athlete with threats of withdrawal from their partnership
 - An official who sends unwanted sexually explicit text messages to a participant with learning disabilities.
 - A participant threatens another participant with physical harm and persistently blames them for poor performance.
- 2.7 Often the perpetrator is known to the adult and may be in a position of trust and/or power.

3. SIGNS AND INDICATORS OF ABUSE

- 3.1 An adult may confide to a member of staff, coach, volunteer, or another participant that they are experiencing abuse inside or outside of the organisation's setting. Similarly, others may suspect that this is the case.
- 3.2 There are many signs and indicators that may suggest someone is being abused or neglected. There may be other explanations, but they should not be ignored. The signs and symptoms 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. You may notice that a participant in a team has been missing from practice sessions and is not responding to reminders from team members or coaches.
 - Someone losing or gaining weight / an unkempt appearance. This could be a player whose appearance becomes unkempt, does not wear suitable sports kit and there is a deterioration in hygiene.
 - A change in the behaviour or confidence of a person. 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.
 - Self-harm.
 - A fear of a particular group of people or individual.
 - A parent/carer always speaks for the person and doesn't allow them to make their own choices.
 - They may tell you / another person they are being abused – i.e., a disclosure.

4. WELL-BEING PRINCIPLE

The success of sport, in terms of helping people achieve their potential, making the most of existing talent, and attracting new people to sport relies on putting people – their safety, well-being and welfare – at the centre of what sport does.

Duty of Care in Sport Independent Report to Government Baroness Tanni Grey-Thompson DBE, DL.

- 4.1 The concept of 'well-being' is threaded throughout UK legislation and is part of the Law about how health and social care is provided. Our well-being includes our mental and physical health, our relationships, our connection with our communities and our contribution to society.
- 4.2 Being able to live free from abuse and neglect is a key element of well-being.
- 4.3 We recognise that not all issues will meet the threshold of 'significant risk of harm' and that local support may be the most effective way of helping the individual. We can assist with identifying and supporting the Adult at Risk by

raising levels of awareness and acting as a sign posting service to resources and organisations which provide support. [Click here for information on Well-being.](#)

5. MAKING SAFEGUARDING PERSONAL

- 5.1 Making safeguarding personal is the concept that adult safeguarding should be person led and outcome focused. 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.
- 5.2 Volleyball England work to support adults to achieve the outcomes they want for themselves. The adult's views, wishes, feelings and beliefs must be considered when decisions are made about how to support them to be safe. There may be many ways to prevent further harm. Working with the person will mean that actions taken help them to find the solution that is right for them. Treating people with respect, enhancing their dignity, and supporting their ability to make decisions also helps promote people's sense of self-worth and supports recovery from abuse.
- 5.3 If someone has difficulty making their views and wishes known, then they can be supported or represented by an advocate. This might be a safe family member or friend of their choice or a professional advocate.

6. MENTAL CAPACITY AND DECISION MAKING

- 6.1 We make many decisions every day, often without realising, it is easy to take this ability for granted. The Mental Capacity Act 2005 (MCA) assumes that all people over the age of 16 have the ability to make their own decisions, unless it has been proved that they can't. It also gives us the right to make any decision that we need to make and gives us the right to make our own decisions even if others consider them to be unwise.
- 6.2 To make a decision we need to:
 - Understand information.
 - Remember it for long enough.
 - Think about the information.
 - Communicate our decision.
- 6.3 A person's ability to do this may be affected by things such as learning disability, dementia, mental health needs, acquired brain injury and physical ill health.
- 6.4 Most adults have the ability to make their own decisions given the right support however, some adults with care and support needs have the experience of other people making decisions about them and for them.
- 6.4 Mental capacity refers to the ability to make a decision at the time that decision is needed. A person's mental capacity can change. If it is safe/possible to wait

until they are able to be involved in decision making or to make the decision themselves.

6.5 Here are some examples on how the timing of a question can affect a 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.

6.6 Mental Capacity is important for safeguarding for several reasons. Not being allowed to make decisions one is capable of making is abuse.

6.7 Mental Capacity must also be considered when we believe abuse might be taking place. It is important to make sure an 'adult at risk' has choices in the actions taken to safeguard them, including whether or not, they want other people informed about what has happened, however, in some situations the adult may not have the mental capacity to understand the choice or to tell you, their views.

Remember:

- We can only make decisions for other people if they cannot do that for themselves at the time the decision is needed.
- If the decision can wait, wait – e.g., to get help to help the person make their decision or until they can make it themselves.
- If we have to make a decision for someone else, then we must make the decision in their best interests (for their benefit) and consider what we know about their preferences and wishes.
- If the action we are taking to keep people safe will restrict them then we must think of the way to do that which restricts to their freedom and rights as little as possible.

6.8 It is good practice to get as much information about the person as possible. If a person who has a lot of difficulty making their own decisions is thought to be being abused or neglected you will need to refer the situation to the Local Authority, and this should result in health or social care professionals making an assessment of mental capacity and/or getting the person the support, they need to make decisions.

6.9 There may be times when a sporting organisation needs to make decisions on behalf of an individual in an emergency. Decisions taken in order to safeguard an adult who cannot make the decision for themselves could include:

- Sharing information about safeguarding concerns with people that can help protect them.
- Stopping them being in contact with the person causing harm.

7. MULTI-AGENCY WORKING

- 7.1 Safeguarding adults' legislation gives the lead role for adult safeguarding to the Local Authority. However, it is recognised that safeguarding can involve a wide range of organisations.
- 7.2 Volleyball England may need to cooperate with the Local Authority and the Police including to:
- Provide more information about the concern you have raised.
 - Provide a safe venue for the adult to meet with other professionals e.g., Police/Social Workers/Advocates.
 - Attend safeguarding meetings.
 - Coordinate internal investigations (e.g., complaints, disciplinary) with investigations by the police or other agencies.
 - Share information about the outcomes of internal investigations.
 - Provide a safe environment for the adult to continue their sporting activity/ their role in the organisation.

8. DEFINITIONS AND TYPES OF HARM

8.1 Definitions:

- **Adult** is anyone aged 18 or over.
- **Adult at Risk** is a person aged 18 or over who is in need of care and support regardless of whether they are receiving them, and because of those needs are unable to protect themselves against abuse or neglect. 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 safeguarding** is protecting a person's right to live in safety, free from abuse and neglect.
- **Capacity** refers to the ability to make a 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 (Mental Capacity Act 2005).
- **Harm:** Damage done to a person's well-being.

8.2 Types of harm:

The Care Act 2014 recognises 10 categories of abuse that may be experienced by adults.

- **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.
- **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:** 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.
- **Organisational:** This includes 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 on-going 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:** This includes hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate sanctions.
- **Sexual** This includes 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.
- **Financial or material:** This includes 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.
- **Neglect/Acts of omission:** This includes ignoring medical or physical care needs, failing 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.
- **Emotional or psychological:** This includes threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or support.

8.3 Not included in the Care Act 2014 but also relevant to safeguarding adults in sport and physical activity:

- **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:** This 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' 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.