



# Safeguarding adults at risk

## Welsh Triathlon Procedures

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Approved By:	Paul Tanner – Chair of the Board	Date: 15 <sup>th</sup> January 2020

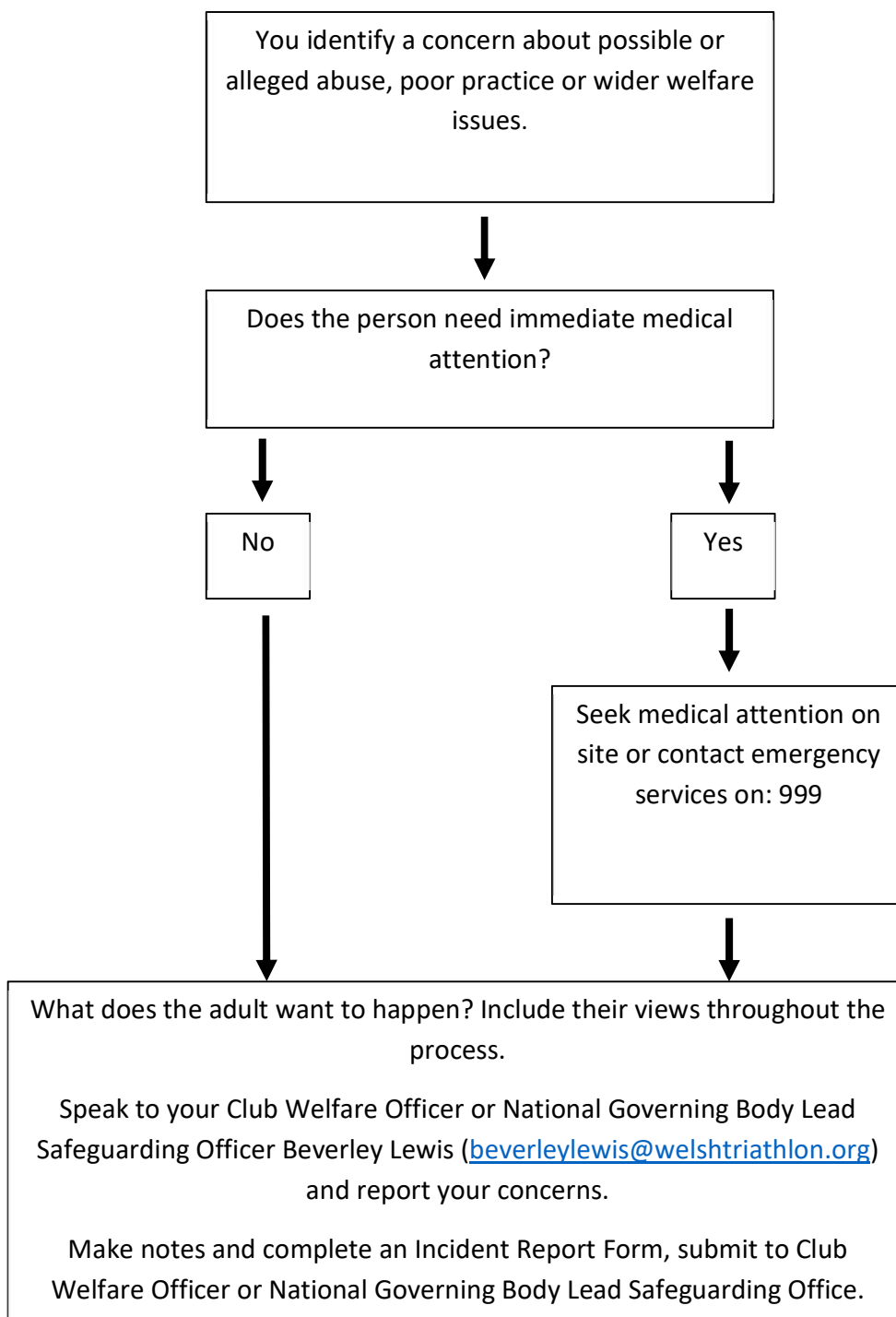
## Do you have concerns about an adult?

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.

A full Safeguarding Adults Flow chart can be found on page 9.



## **Top Tips for Safeguarding Adults**

- Ensure the safety of the adult, if the adult needs immediate medical attention call the emergency services.
- Stay calm, don't panic, do not make any promises.
- You do not need consent to discuss a concern with your Safeguarding Lead (Amy Jenner: [amyjenner@welshtriathlon.org](mailto:amyjenner@welshtriathlon.org), 07587038156).
- If the concern needs to be referred to Adult Social Care this is when consent from the adult will need to be obtained.
- You do not have to be an expert in assessing capacity but try to follow the 5 principles of the Mental Capacity Act.
- Listen to what the adult has to say, reassure them, tell them what you will need to do.
- Be confidential, don't tell everyone.
- Ask the adult what they would like to happen, make sure their views, wishes and choices are listened to.
- Make sure you write down what you see, hear or are told separating fact from fiction. Including the date, time and location of the conversation

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## **Introduction**

Welsh Triathlon wishes everyone who participates in Triathlon to participate in a safe and fun environment and to be given the chance to experience the feelings of enjoyment, challenge and achievement that are inherent to the sport. Welsh Triathlon accepts our responsibility to safeguard the welfare of all adults involved in Triathlon, in accordance with Welsh legislation.

These guidelines have been produced by Welsh Triathlon to help our organisation enable “adults at risk” to enjoy all aspects of triathlon, in a safe environment. Policy and procedures apply to all individuals involved in Welsh Triathlon activities and those of Welsh Triathlon affiliated clubs and organisations. Welsh Triathlon will encourage and support partner organisations, including clubs, key partners and sponsors to adopt and demonstrate their commitment to the principles and practice of equality as set out in this safeguarding adult’s policy and procedures.

Although there are many similarities with safeguarding adults and children there are also some distinct differences. For this reason, Wales Triathlon has created a separate Safeguarding Adults Policy.

The Social Services Well Being (Wales) Act principles are:

- Pay attention to what people want.
- Remember people’s dignity.
- Think about each person. Think about their culture, beliefs and language.
- Support people to be part of decisions about their life.
- Expect adults to know what is best for themselves.
- Support adults to be as independent as possible

## **Policy Statement**

This policy applies to anyone aged 18 or over who has a physical or learning disability, mental illness or other health or social care need which causes them to be dependent on others for physical care and assistance and/or who may have difficulty communicating their needs and wishes and who is unable to safeguard themselves at all times as a result.

*It is the policy of Welsh Triathlon that adults at risk taking part in Triathlon should be safeguarded from physical, sexual, emotional or economic harm. Welsh Triathlon will take reasonable steps to ensure that, adults at risk participating in Welsh Triathlon activities do so in a safe environment. Everyone, irrespective of sex, age, disability, race, religion or belief, sexual orientation, pregnancy and maternity, marriage and civil partnership, gender reassignment or social status, have a legitimate expectation of taking part in Triathlon related activities free from discrimination and abuse.*

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.

The Welsh Triathlon actively seeks to:

- Create a safe and welcoming environment, both at events and training sessions, where participants can have fun and develop their skills and confidence.
- Respect the rights, dignity and worth of all adults
- Support and encourage permitted events, affiliated clubs and Triathlon teams to implement similar policies.
- Promote safeguarding adults as everyone's responsibility. 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 triathlon or in the wider community
- Lead by example with training and events that it organises being run to very high safety standards.
- Be prepared to review its ways of working to incorporate good practice.
- Ensure the principles of safeguarding adults are applied and embedded across the sport and organization.

This involves:

- All participants being treated with respect and their achievements be celebrated.
- Ensuring that our organisation is inclusive and make reasonable adjustments for any ability, disability or impairment, we will also commit to continuous development, monitoring and review.
- Appoint and train a designated Safeguarding Lead responsible for safeguarding adults in Triathlon in Wales
- Ensure that every club affiliating with Welsh Triathlon will have a Club Safeguarding/Welfare Officer who will be able to provide support and advice within the club environment, and ensure safeguarding duties are carried out when an adult meets the at risk definition
- All employees, contractors and volunteers being carefully recruited and selected.
- Responding swiftly and appropriately to all complaints and concerns about poor practise or suspected or actual abuse.
- Make safeguarding personal to the adult involved and take into account the adults views, wishes, beliefs and wants as part of the safeguarding process

This policy relates to all employees, contractors and volunteers who work with adults at risk in the course of their Welsh Triathlon role. It will be kept under periodic review. All relevant concerns, allegations, complaints and their outcome should be notified to the Welsh Triathlon Safeguarding Lead Officer (Amy Jenner: [amyjenner@welshtriathlon.org](mailto:amyjenner@welshtriathlon.org), 07587038156).

## **Guidance and legislation**

The practices and procedures within this policy are based on the principles contained within the UK and legislation and Government Guidance and have been developed to complement the Safeguarding Adults Boards policy and procedures, and consider the following (appendix 5):

- Wales - Social Services and Well Being Act 2014
- England - 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
- England and Wales - Mental Capacity Act 2005
- Sexual Offences Act 1956 & 2003
- The Human Rights Act 1998
- The General Data Protection Regulation 2018

## **Wellbeing Principle**

The concept of 'wellbeing' is threaded throughout English and Welsh legislation and is related to the personal dignity, support and inclusion of all. The Wellbeing Principles include:

- Physical and mental health and emotional well-being
- Protection from abuse and neglect
- Education, training and recreation
- Domestic, family and personal relationships
- Contribution made to society
- Securing rights and entitlements
- Social and economic well-being
- Suitability of living accommodation
- Control over day to day life
- Participation in work

## **Making Safeguarding Personal Guide 2014**

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.

Making Safeguarding Personal seeks to achieve:

- A personalised approach that enables safeguarding to be done with, not to, people
- Practice that focuses on achieving meaningful improvement to people's circumstances rather than just on 'investigation' and 'conclusion'
- An approach that utilises skills rather than just 'putting people through a process'
- An approach that enables everyone in the safeguarding process to know what difference has been made

What this means in practice is that adults should be more involved in the safeguarding process. 'Making safeguarding personal' means that adult safeguarding should be person led and outcome focussed. Their views, wishes, feelings and beliefs must be taken into account when decisions are made. 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.

The principles of the Mental Capacity Act 2005 (MCA) state that every individual has the right to make their own decisions and provides the framework for this to happen. 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. 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, there are key issues that should be considered when abuse or neglect are suspected, and there should be clear guidelines regarding this.

### **Capacity and decision making**

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. People should be given information in formats that they understand to be able to make decisions. See Appendix 1 for more information.

### **Adult at risk of abuse or neglect definition**

Safeguarding legislation has moved away from the term 'vulnerable adult', instead using the term 'adult at risk'. This term illustrates that it is the circumstances that people with care and support needs are in that causes them to be at risk of abuse or neglect.

Wales (Social Services and Well Being Act 2014)

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

- A. is experiencing or is at risk of abuse or neglect,
- B. has needs for care and support (whether or not the authority is meeting any of those needs) and



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

Although many of the good practice guidelines and principles to be followed when safeguarding children also apply to adults, there is a key difference. In the case of a child, there is a clear duty to act if we suspect that the child has been harmed or is at risk of harm. In the case of an adult, the starting assumption must always be that an adult has the capacity to make a decision and has the right to do so unless it can be established that they lack capacity.

### **Types of Abuse and Neglect**

Abuse is a violation of an individual's human and civil rights by another person or persons. There are different types and patterns of abuse and neglect and different circumstances in which they may take place. Wales categories of adult abuse and harm as follows;

#### **Categories of Abuse / Harm**

- Physical
- Sexual
- Psychological
- Neglect
- Financial

There are additional definitions which, whilst not included in the legislation, are also relevant these are;

- Cyber Bullying
- Forced Marriage
- Hate Crime
- Radicalisation

For more information see Appendix 2.

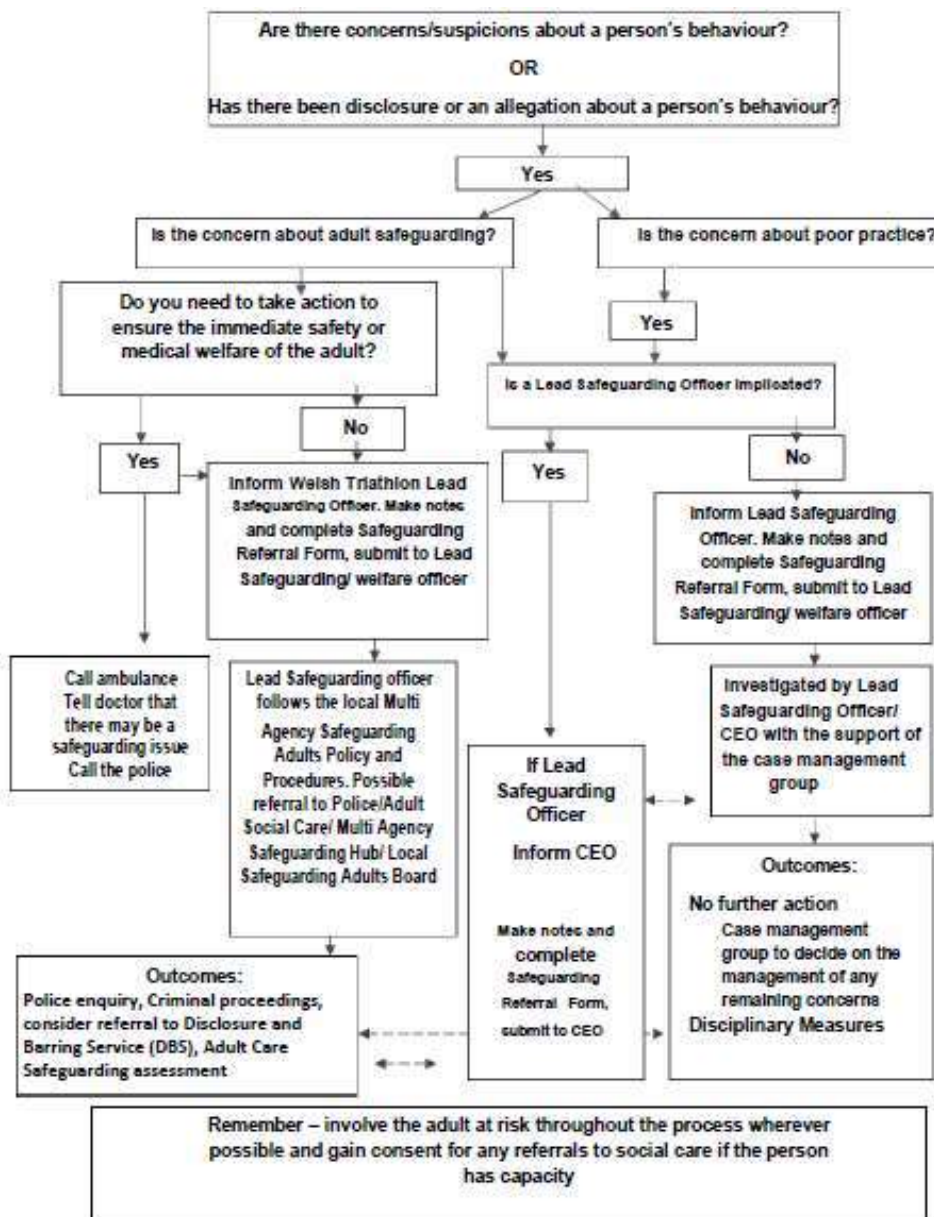
### **Signs and indicators of abuse and neglect**

Abuse can take place in any context. Abuse may be inflicted by anyone. Participant, member, staff, volunteer or coach may suspect that an adult 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.
- The person has belongings or money going missing.

- The person is not attending / no longer enjoying their sessions. You may notice that a participant in a team has been missing from practise sessions and is not responding to reminders from team members or coaches.
- Someone losing or gaining weight / an unkempt appearance. This could be a participant 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.
- They may self-harm.
- They may have a fear of a particular group of people or individual.
- They may tell you / another person they are being abused – i.e. a disclosure.
- Harassment of a participant because they are or are perceived to have protected characteristics.
- Not meeting the needs of the participant. E.g. training without a necessary break.
- A coach intentionally striking an athlete.
- A participant who sends unwanted sexually explicit text messages to an adult with learning disabilities they are training alongside.
- A participant threatening another participant with physical harm and persistently blaming them for poor performance.

**Safeguarding Adults Flowchart: Dealing with Concerns, Suspicions or Disclosure**



## **What to do if you have a concern or someone raises concerns with you.**

In particular, you must:

- **Recognise** – Be able to identify abuse and neglect and raise a concern
- **Respond** – Reassure the individual, tell them what you will need to do, ask them what they want to happen
- **Refer** – Contact your Safeguarding Lead if either you **recognise** or suspect abuse and neglect, or you are **responding** to an allegation from or about an adult at risk
- **Record** – Who, what, where, when – make sure you write down what you see, hear or are told separating fact from fiction. Keep your record safe and maintain confidentiality

### **Recognise**

What should I be recognising?

- General concerns about an adult's welfare
- Concerns relating to a safeguarding incident e.g. poor practice or abuse.
- Concerns, suspicions, or allegations of misconduct
- Code of conduct breach
- Allegations of abuse by or against any adult

If you suspect that an adult at risk may have been the subject of any form of abuse or neglect, the allegation must be referred as soon as possible. Only ask questions to confirm that you need to refer the matter to someone else. If the person has difficulty communicating, ask them if they would like someone there to assist or interpret, but do not assume that they want their regular carer present.

If you have concerns about an adult, you have a duty to report these to your Safeguarding Lead. You do not need consent to discuss a concern with your Safeguarding Lead. Thinking about making safeguarding personal, it's good practice to have a conversation with the adult and inform them you are concerned and will pass this onto the Safeguarding Lead.

If the concern needs to be referred to Adult Social Care this is when consent from the adult will be obtained. However, you can get advice from Social Care without giving details, don't let the issue of consent get in the way of getting advice (Appendix 4)

A complaint, concern or allegation may come from a number of sources: the adult at risk, their carers or, someone else within your organisation. It may involve the behaviour of one of your volunteers or employees or something that has happened to the person outside the sport. Adults at risk may confide in someone they trust, in a place where they feel at ease.

An allegation may range from mild verbal bullying to physical or sexual abuse. If you are concerned that an adult may be being abused, it is NOT your responsibility to investigate further BUT it is your responsibility to act on your concerns.

## **Respond**

If you receive a disclosure relating to an adult's welfare or wellbeing the key things you should do are:

- Stay calm – ensure that the person is safe and feels safe
- Avoid showing your emotions if you are upset, disgusted or in disbelief of what you are being told
- Ensure that the adult feels safe and is not in danger
- Not to make assumptions or judgments about what you are being told
- Show and tell the person that you are taking what he/she says seriously
- Reassure the person and stress that he/she is not to blame
- Be careful about physical contact, it may not be what the person wants
- Make a note of what the person has said using their own words as soon as practicable. Complete an Incident Form and submit to the Lead Safeguarding or Welfare Officer
- Be honest, explain that you will have to tell someone else to help stop the alleged abuse
- Remember to make safeguarding personal. Obtain the adult's view of what they would like to happen
- 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 your Lead Safeguarding or Welfare Officer and others on a need to know basis.
- If the matter is urgent and relates to the immediate safety of an adult at risk then contact the emergency services immediately.

You should never:

- Confront the alleged abuser
- Rush into actions that may be inappropriate
- Make promises you cannot keep (eg. you won't tell anyone)
- Ask questions unless you are clarifying information.
- Ask leading question.
- Take sole responsibility. Consult someone else (ideally the designated Lead Safeguarding or Welfare Officer or the person in charge or someone you can trust) so that you can begin to protect the adult at risk and gain support for yourself.

You may be upset about what the person has said or you may worry about the consequences of your actions. However, one thing is certain – you cannot ignore it. Professionals involved in

taking decisions about adults at risk must take all of the circumstances into account and act in the individual's best interests. You are not expected to be able to take such decisions.

### **Refer**

It is important to remember that it is not your responsibility to decide whether or not an adult has been abused; this should be left to professionals to consider the information and conduct enquiries. It is, however, your responsibility to act on any concerns. If you have a concern about an adult at risk within a Welsh triathlon setting you should refer to the flowchart on page 11.

If you are concerned someone is in immediate danger, contact the police on 999 straight away. Where you suspect that a crime is being committed, you must involve the police.

If you have concerns and/or you are told about the possible or alleged abuse, poor practice or wider welfare issues you must report this to your Lead Safeguarding or Welfare Officer.

Although everyone has a role to play in ensuring that participants are safe, it is recommended that a designated individual has specific responsibility for implementing your policy, and acts as the point of contact to receive information and advice from the Triathlon. We recommend the use of the term 'Welfare Officer'. This may be but does not have to be, the same person who undertakes that role in relation to children.

Ideally, it should be someone with relevant knowledge and experience, who is perceived as being approachable by both adults at risk and their carers. They don't need to be an expert – that is the role of Adult Social Care Services.

When raising your concern with the Lead Safeguarding or Welfare Officer, remember to 'make 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 of what actions you intend to take.

### **Record**

Make a note of what the person has said, or you have witnessed, using his or her own words as soon as practicable, Welsh Triathlon has a recording template (Appendix 3) for you to use which sets out all the information you need to include. Describe the circumstances in which the disclosure came about. Take care to distinguish between fact, observation, allegation and opinion. It is important that the information you have is accurate.

A complaint, concern or allegation may come from a number of sources: the adult at risk, their carers or, someone else within your organisation. It may involve the behaviour of one of your volunteers or employees or something that has happened to the person outside the sport. Adults at risk may confide in someone they trust, in a place where they feel at ease.

All information must be treated as confidential and only shared with those who need to know. If the allegation or suspicion concerns someone within your club, only the person's carers, the club's Welfare/Safeguarding Officer, the person in charge of the organisation (unless any of them

are the subject of the allegation), the relevant authorities and the Welsh Triathlon Lead Safeguarding Officer should be informed. If the alleged abuse took place outside the sport, Adult Social Care will decide who else needs to be informed. It should not be discussed by anyone within the organisation other than those who received or initiated the allegation and, if different, the person in charge.

If there is an allegation or concern about an adult at risk who has the capacity, their consent must be obtained before any referral is made, unless others are at risk of harm. No information should be given to the adult's family or carers without their consent. If the adult does not have the capacity and is unable to give consent, a referral may be made and their family or carers informed, provided that they are involved in the individual's life and are not implicated in the allegation.

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 Lead Safeguarding or Welfare Officer

### **Guidance for Clubs**

If your club or organisation regularly provides training or activities for adults at risk, it is strongly recommended that you adopt a policy and some straightforward procedures to put the policy into practice.

There are several good reasons for doing this:

- to safeguard "adults at risk", both at training sessions and club activities
- to assure "adults at risk", and their carers where relevant, that they are safe when taking part in activities at your club /organisation
- to raise awareness amongst all your members, volunteers or employees so that they know what to do if they are concerned about an individual, whether the concern relates to their welfare at your site, or to something happening outside that environment that the individual discloses to someone they trust in your organisation
- to protect volunteers and staff by giving them some practical, common-sense guidelines to avoid placing themselves in situations where they are open to allegations which could seriously damage their and carers lives
- to protect the organisation, by showing that you have taken 'all reasonable steps' to provide a safe environment.

Everyone in the organisation should be aware of the policy and have access to the supporting procedures, and those working with adults at risk must be familiar with the procedures.

If your club does not adopt its own policy (e.g. because there is no regular attendance of adults at risk at club activities), where it is anticipated that volunteers or staff will come into contact with adults at risk you should ensure that those volunteers and staff are aware of the Welsh Triathlon policy.

## **Designated Person**

Although everyone has a role to play in ensuring that participants are safe, it is recommended that a designated individual has specific responsibility for implementing your policy, and acts as the point of contact to receive information and advice from the Welsh Triathlon. We recommend the use of the term 'Welfare Officer'. This may be but does not have to be, the same person who undertakes that role in relation to children.

Ideally, it should be someone with relevant knowledge and experience, who is perceived as being approachable by both adults at risk and their carers. They don't need to be an expert – that is the role of Adult Social Care Services.

The designated person's general terms of reference could include:

- Maintaining an up to date policy and procedures, compatible with the Welsh Triathlon Triathlons.
- Ensuring that relevant staff and/or volunteers are aware of and follow the procedures, including implementing safe recruitment procedures.
- Advising the management committee on safeguarding issues.
- Maintaining contact details for local Adult Social Care Services.

If there is a concern, the designated person would:

- Be the first point of contact for any concerns or allegations from adults at risk, carers or others, ensuring that confidentiality is maintained in all cases.
- Decide on the appropriate action to be taken, in line with the organisation's procedures and conjunction with the person in charge (Chairman etc).
- Keep the Welsh Triathlon informed as necessary according to the procedure below.

Everyone in the organisation should know who the Welfare Officer is and how to contact them.

## **Useful Contacts**

Welsh Triathlon Lead Safeguarding Officer: 07587038156 [amyjenner@welshtriathlon.org](mailto:amyjenner@welshtriathlon.org)

Triathlon England Lead Safeguarding Officer: 01509 226159 [lindahaywood@britishtriathlon.org](mailto:lindahaywood@britishtriathlon.org)

Triathlon Scotland Lead Safeguarding Office: 07545 697 841 [janescott@triathlonscotland.org](mailto:janescott@triathlonscotland.org)

## **Social Care Services**

Your local phone book or the website for your County Council or unitary local authority will list numbers for Adult Services, generally with separate numbers for Adult Social Care and the Emergency Duty Team (out of hours service).

## **CPSU - Child Protection in Sport Unit**



The Child Protection in Sport Unit (CPSU) is a partnership between the **NSPCC, Sport England, Sport Northern Ireland** and **Sport Wales**. Helping to keep children in sport safe.

Tel: **0116 366 5626**

### **Ann Craft Trust**

A national organisation working with staff in the statutory, voluntary and independent sectors in the interests of people with learning disabilities who may be at risk from abuse.

Tel: 0115 9515 400 Website: [www.anncrafttrust.org](http://www.anncrafttrust.org)

### **Mencap Direct**

Tel: 0808 808 1111

E-mail: [help@mencap.org.uk](mailto:help@mencap.org.uk)

Website: [www.mencap.org.uk](http://www.mencap.org.uk)

### **Action on Elder Abuse helpline**

Tel: 0808 808 8141

Website: [www.elderabuse.org.uk](http://www.elderabuse.org.uk)

### **MIND – mental health charity**

Tel: 0300 123 3393

Text: 86463 E-mail:

[info@mind.org.uk](mailto:info@mind.org.uk)

Website: [www.mind.org.uk](http://www.mind.org.uk)

**Office for Disability Issues:** <https://www.gov.uk/government/organisations/office-for-disability-issues>

**The Samaritans** - Telephone: 08457 909090

**Victim Support** - Telephone: 08453 03090

## **Appendix 1 - Capacity – Guidance on Making Decisions**

England and Wales share the Mental Capacity Act of 2005. The Act applies to people over the age of 16 years.

The issue of capacity or decision making is a key one in safeguarding adults across all legislature. 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

The various legislation sets out the principles for working with adults who lack capacity to make decisions. 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.

Good practice states that every individual has the right to make their own decisions and legislation provides the framework for this to happen.

The legislation is designed to ensure that people have the support they need to make as many decisions as possible. The legislation also protects people who need family, friends or paid support staff to make decisions for them because they lack capacity to make specific decisions.

Any intervention in the affairs of an adult should:

- benefit the adult
- take account of the adult's wishes, so far as these can be ascertained
- take account of the views of relevant others, as far as it is reasonable and practical to do so
- restrict the adult's freedom as little as possible while still achieving the desired benefit

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 or to make an informed and measured decision.

The legislation recognises that capacity is decision-specific, so no one will be labelled as entirely lacking capacity. The legislation 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 better, consider the following five points:

- 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.
- 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.
- 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.
- 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.
- 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 based on a person's age, appearance, condition or behaviour.

As an organisation, 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 principles of the legislation, so you must be prepared to address this.

\*The Mental Capacity Act in England and Wales is currently under review and the legislation and process are likely to change. It is recommended that a review of policy/procedures to take this into account is carried out in 2020.

## **Appendix 2 - About Abuse and Neglect**

*Definitions:* To assist working through and understanding this policy several key definitions need to be explained:

*Adults at risk?* 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. Vulnerable is believed to be a disempowering term.

All of us could be defined as 'at risk' at certain times, for example when undergoing medical treatment. From a safeguarding point of view, the term Adults at risk applies to those who have health or social care needs (irrespective of whether those needs are being met by social care) and who are unable to safeguard themselves at all times as a result. There are also adults who are at risk due to a specific circumstance they may find themselves in, for example: domestic abuse, forced marriage, sexual or commercial or financial exploitation.

In a sporting context, clubs and event organisers may work with:

- people who have a physical disability, whether from birth or acquired through injury, illness or advancing age, ranging from those who can train and compete independently but need some assistance in transition, to those who depend on others for physical care and support
- people who are blind or visually impaired, who may need to be guided around a course or at training
- people who are deaf or hearing impaired, whose needs are largely connected to communication and inclusion
- people who have learning disabilities or who for some other reason (e.g. brain injury, dementia) may not have the capacity to make independent decisions or to assess risk.

Although many of the good practice guidelines and principles to be followed when safeguarding children also apply to adults, there is a key difference. In the case of a child, there is a clear duty to act if we suspect that the child has been harmed or is at risk of harm. In the case of an adult, the **starting assumption must always be that an adult has the capacity to make a decision and has the right to do so unless it can be established that they lack capacity.**

**Abuse** is a violation of an individual's human and civil rights by another person or persons.

**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 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).

### **Types of Abuse and Neglect**

This is not intended to be an exhaustive list but an illustrative guide as to the sort of behaviour or issue which could give rise to a safeguarding concern.

1. **Physical Abuse** – includes hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate sanctions. This could be a coach intentionally striking an athlete.
2. **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 a learning-disabled adult they are training alongside.
3. **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 with dementia.
4. **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. In a Triathlon, this could be a coach not ensuring athletes have access to water.
5. **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. In Triathlon, this could be an athlete threatening another athlete with physical harm and persistently blaming them for poor performance.

Not included in the Care Act 2014 but also relevant:

6. **Cyber Bullying** – cyberbullying 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.

7. **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.
8. **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.
9. **Radicalisation** - Radicalisation aims 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.

### **Appendix 3 – Referral 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 the adult at risk	
Name of adult	
Address	
Date of Birth	
Age if the 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 the 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 if know (leave blank if uncertain)		
Physical	Psychological	Financial
Sexual	Discriminatory	Organisational/ 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)?		

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Section 5 – 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

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Section 5B - Have you discussed your concerns with anyone else? E.g. carer/ partner/ spouse/ family member.

What are their views?

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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?	
Signed:	
Date:	

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 Welsh Triathlon?

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 4 - Consent and Information Sharing**

Although we want to make safeguarding personal there are some circumstances when we need to take action without an adult's consent.

Sometimes an adult at risk may not want you to act on your concerns or their disclosure.

This may be because they are scared or fearful of the repercussions from you taking action.

It may also be because they are not aware abuse is taking place or have the mental capacity to make an informed decision and understand to remain in their current situation is unsafe.

Sharing information with the right people is central to good practise in safeguarding adults.

You should not keep safeguarding concerns about adults at risk to yourself. Explain to the adult that you must pass the concern on to your Safeguarding Lead, as you have a duty of care.

You should reassure the adult that they will be fully included in what happens.

It is appropriate to report concerns without an adult's consent when:

- You have reason to believe the adult's health and or wellbeing will be adversely affected by ongoing harm.
- Other people are or maybe, at risk from the person causing harm, including children.
- It is necessary to prevent a crime, or a serious crime has been committed.
- Sharing the information could prevent crime and help to stop the abuse.
- The adult may be under duress or being coerced.
- The alleged abuser has care and support needs and may also be at risk.

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 emergencies. If 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 adult's 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 adult's 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 adult's 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 a 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 seven Golden Rules should always be followed.

- Seek advice if in any doubt
- Be transparent - The Data Protection Act 2018 (DPA) is not a barrier to sharing information but to ensure that personal information is shared appropriately; except in circumstances whereby doing so places the person at significant risk of harm.
- Consider the public interest - Base all decisions to share information on the safety and well-being of that person or others who may be affected by their actions.
- 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.
- Keep a record - Record your decision and reasons to share or not share information.
- 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.
- Remember the purpose of the Data Protection Act 2018 (DPA) is to ensure personal information is shared appropriately, except in circumstances whereby doing so may place the person or others at significant harm.

## **Appendix 5 - Legislation and Government Initiatives**

### **Wales - Social Services and Well Being Act 2014**

[http://www.legislation.gov.uk/anaw/2014/4/pdfs/anaw\\_20140004\\_en.pdf](http://www.legislation.gov.uk/anaw/2014/4/pdfs/anaw_20140004_en.pdf)

Reforms and integrates social services law-making provisions for improving well-being outcomes for people who need care and support. Requiring coordination and partnership by public authorities to improve wellbeing. It replaces No Secrets and puts adult safeguarding on a statutory footing.

### **England - 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.

### **Protection of Freedoms Act 2012**

<http://www.legislation.gov.uk/ukpga/2012/9/contents/enacted>

Brought about a wide range of measures, regarding numerous areas of law. Notably changes to the vetting and barring system to create the Disclosure and Barring Service.

### **Domestic Violence, Crime and Victims (Amendment) Act 2012**

<http://www.legislation.gov.uk/ukpga/2012/4/contents/enacted>

Creates an offence of causing or allowing the death or serious harm of a child or adult at risk for those within the household.

### **Equality Act 2010**

<https://www.legislation.gov.uk/ukpga/2010/15/contents>

The Act legally protects people from discrimination in the workplace and wider society. It replaced previous anti-discrimination laws with a single Act, making the law easier to understand and strengthening protection in some situations.

### **England & Wales - 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](http://www.dca.gov.uk)

### **Sexual Offences Act 1956**

<https://www.legislation.gov.uk/ukpga/Eliz2/4-5/69/contents>

This Act consolidated the law relating to sexual offences committed between 1957 and 2004. It was mostly repealed by the Sexual Offences Act of 2003 below, but sections 33 to 37 still survive.

### **Sexual Offences Act 2003**

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

The Sexual Offences Act introduced a number of new offences concerning adults at risk and children. [www.opsi.gov.uk](http://www.opsi.gov.uk)

### **Human Rights Act 1998**

<https://www.legislation.gov.uk/ukpga/1998/42/contents>

Designed to incorporate into UK law the rights contained in the European Convention on Human Rights. The Act makes a remedy for breach of a Convention right available in UK courts, without the need to go to the European Court. In particular, the Act makes it unlawful for any public body to act in a way which is incompatible with the Convention unless the wording of any other primary legislation provides no other choice.

### **Data Protection Act 2018 (including General Data Protection Regulations) 2018 Act -**

<http://www.legislation.gov.uk/ukpga/2018/12/contents/enacted>

**GDPR** - <https://eur-lex.europa.eu/legalcontent/EN/TXT/PDF/?uri=CELEX:32016R0679&from=EN>  
the original 1998 DPA was superseded in May 2018. The new Act supplements the General Data Protection Regulation (GDPR), which came into effect later the same month. The Act is designed to protect personal data stored on computers or on paper, regulating the collection, storage, and use. The Act provides individuals with the legal rights to control information about themselves.

### **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](http://www.opsi.gov.uk)

### **Deprivation of Liberty Safeguards**

<https://www.gov.uk/government/collections/dh-mental-capacity-act-2005deprivation-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 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](http://www.gov.uk/dbs-update-service)

**Making Safeguarding Personal Guide 2014**

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