

**BRITISH DANCESPORT ASSOCIATION**

**HANDBOOK OF SAFEGUARDING POLICIES**

**(ENGLAND, WALES, AND NORTHERN IRELAND)**

Adopted October 2023

Last Updated October 2023

Next Review Date: December 2024

Signed by Chair of Board, Genevieve Gordon-Thomson:

A handwritten signature in black ink, appearing to be 'G. Gordon-Thomson', written in a cursive style.

17<sup>th</sup> October 2023

## Chapter 1 Introduction

- 1.1 Established as a registered company in 2023, the British DanceSport Association (“the Organisation” or “BDSA”) works collaboratively with young people and communities to deliver progression pathways aimed at ensuring young people are socially mobile and empowered to be independent, take control of their lives and achieve their full potential.
- 1.2 Members of the Organisation are bound by their membership to implement and operate under the guidance of this Safeguarding Policy and any advice received from the Designated Safeguarding Officer.
- 1.3 Our work is delivered under four strategic pillars: Leading collaborative change in dancesport, strengthening dancesport success in the sports industry, developing people through dance and building organisational excellence.
- 1.4 We are an equal opportunities organisation and do not discriminate on the grounds of gender, sexual orientation, marital or civil partner status, pregnancy or maternity, gender reassignment, race, colour, nationality, ethnic or national origin, religion or belief, disability or age or any personality trait.
- 1.5 The Safeguarding Policies in this Handbook are designed to ensure that we fulfil our obligations under applicable laws in England and Wales to athletes, participants, stakeholders and otherwise to protect the interests of those members of society who may be vulnerable to risks identified in applicable legislation.
- 1.6 The Safeguarding Policies and procedures set out in this handbook apply to all BDSA representatives unless otherwise indicated. They therefore apply to athletes, participants, teachers, coaches, volunteers, managers, officers, directors, employees, consultants, contractors, trainees, homeworkers, part-time and fixed-term employees, casual and agency representative (collectively referred to as “representatives” in this handbook). They do not form part of the terms of your membership or contract with us, which are provided to you separately. By applying for BDSA membership or contracting with the organisation you are agreeing to be bound by the rules contained within this handbook.

If you have a concern or want to report a safeguarding issue, or if you need help, contact our dedicated and confidential safeguarding support:

[besafe@bdsassociation.com](mailto:besafe@bdsassociation.com) or 0800 170 0555

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## Chapter 2 Safeguarding Children & Young Persons Policy

### Introduction

British DanceSport Association (“the Organisation”) acknowledges and accepts it has a responsibility for the wellbeing and safety of all children and young people who are members of the Organisation, under the Organisation’s care, or utilising the Organisation’s facilities. It is the duty of all adults representing and or members of the Organisation to safeguard the welfare of children and young people by creating an environment that protects them from harm.

The wellbeing of children and young people is paramount for all representatives and accordingly, they must make themselves aware of the Organisation’s Safeguarding Children and Young Persons Policy. Where appropriate, the following guidelines will be supplemented by in-service training and additional guidance.

### Rules & Regulations

The Organisation is subject to the rules and regulations set out in the 1989 and 2004 Children Act, Working Together to Safeguard Children (2018), and the London Child Protection Procedures (5<sup>th</sup> edition).

In Northern Ireland, this Safeguarding policy is based on guidelines and legislation outlined in the following documents:

- Code of Ethics and Good Practice for Children’s Sport, Sport Northern Ireland 2007.
- The Children (Northern Ireland) Order 1995.
- Our Duty to Care NI, DHSSPS 2012.
- Getting It Right, DHSSPS 2012.
- Co-operating to Safeguard Children DHSSPS 2003.
- Area Child Protection Committee – Regional Child Protection Policy 2005.
- Safeguarding Vulnerable Groups (NI) Order 2007.
- Protection of Freedoms Act 2012

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The Organisation is fully committed to ensuring that the best practice recommended by these bodies is employed throughout the Organisation and its activities.

The Organisation has a responsibility to maintain regular dialogue with the Local Safeguarding Children Boards in countries where it has members.

### **Definitions**

**“Child”** (collectively referred to as **“Children”**): anyone under the age of 14.

**“Young Person”** (collectively referred to as **“Young People”**): anyone between the ages of 14 and 18.

### **Aims & Key Principles**

**The aims of the Organisations Safeguarding Children Policy are:**

- To safeguard all children and young people who interact with the Organisation.
- To demonstrate best practice in safeguarding children.
- To develop a positive and pro-active welfare programme to enable all children and young people to participate in an enjoyable and safe environment.
- To promote high ethical and moral standards throughout the Organisation.

**The key principles underpinning this policy are:**

The child’s and young person’s welfare must always be the paramount consideration.

All children and young people have a right to be protected from abuse regardless of their age, gender, disability, culture, language, racial origin, religious beliefs, or sexual identity.

All allegations of abuse will be taken seriously and responded to efficiently and appropriately in accordance with our policies and training.

To encourage parents and other members of the child or young person’s family to be involved in a relationship with the Organisation.

To ensure that coaches, parents, and other adults who encounter children and young people provide good role models of behaviour.

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## **Chapter 3 Safeguarding Children**

### **Safeguarding Children Programme**

The Organisation has an ongoing commitment to delivering a programme of activities which cover all areas of the organisation. The programme will regularly be reviewed and updated according to any needs that may be identified.

### **Designated Safeguarding Officers**

The Organisation has two Designated Safeguarding Officers (“DSO”) who have overall responsibility for the safeguarding of children and young persons at the Organisation and engaged in Organisation activities/programmes. These Officers have special responsibilities and are the focal point for safeguarding children and young persons in their nominated area.

Anybody with concern about a child or young person’s welfare should contact a Designated Safeguarding Officer for advice in the first instance (details can be found at the end of this policy).

### **Human Resources & Disclosure**

#### ***Recruitment***

As part of the Organisation’s recruitment and selection process, offers of work to positions which involve working with children and young persons are subject to a satisfactory Enhanced DBS / Access NI disclosure and appropriate references. See below and attached for details of the Organisation’s Access NI and DBS procedures.

#### ***Representative Training***

All representative working in direct contact with children and young persons shall be required to complete a workshop on Safeguarding Children and Young Persons. Details of those satisfactorily completing this course are retained by the Organisation.

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### **Work Experience**

The Organisation often offers work experience placements to young people. The Organisation has a central work experience scheme which provides forward planned and structured work experience placements. Whilst undertaking work for the Organisation, those on work experience will be given no unsupervised access to children and young persons.

### **Health and Safety**

BDSA Organisation's Health and Safety Policy gives guidance to those whose roles involve working with children and young persons. Where a child or young person is involved, a risk assessment must take account of their particular vulnerabilities. The risk assessment should set out what arrangements are in place for their care and supervision.

### **Representative Briefing**

A Representative Briefing Note is available on our website. Whenever possible the representative should avoid situations where they are in one-to-one contact with children or young people alone. When physical intervention is necessary to restore safety, restraint should not continue any longer than is absolutely necessary.

### **Disclosure and Barring Service / Access NI Checks**

BDSA uses the Disclosure and Barring Service (Formally the Criminal Records Bureau (CRB)) ("DBS") in England and Wales as well as the Access NI Service in Northern Ireland. The DBS / Access NI provides a disclosure service for organisations. Access NI and DBS disclosures enable employers to undertake more thorough recruitment and selection procedures for positions which involve working with Children.

## **Process for Criminal Records checking**

### **New Appointments**

All representatives who are offered a position which involves working, or coming into contact, with children and young persons will be required to complete a Self-Declaration Form and undertake a DBS Disclosure or Access NI Disclosure in line with our Safer Recruitment Policy. All offers of work are subject to the outcome of the screening process and where applicable, this is set out in the initial job advertisement and the applicant's offer of work. Until such time as a satisfactory Disclosure certificate has been received, the member or representative will not be left unsupervised with children and young persons.

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Should a positive Disclosure be received, a risk assessment will be carried out by the CSO or a Safeguarding Officer or management committee member, to assess the information contained within the Disclosure certificate. The member of representative may also be asked to attend an interview prior to a recruitment decision being made. All DBS/Access NI certificates are stored securely on the Organisation's share point system with restricted HR access.

### **New Appointments who already have a Disclosure / Access NI Certificate**

If a new member of representative has been DBS / Access NI checked by their previous employer, the Organisation may choose not to ask that person to undertake another check if the original Disclosure certificate is provided, is dated within six months of the worker's start date at the Organisation and for a similar role to that to which the person has been appointed.

### **Existing Representative**

Priority is being given to those who come into regular contact with children. All representatives who have one to one contact with children and young persons will be DBS/Access NI/Disclosure Scotland checked.

### **Temporary Representative and External Consultants**

All temporary representatives and external consultants sign a self-declaration form and will not have unsupervised access to children and young persons during their time with the Organisation or any associated event.

### **Equal Opportunities**

The Organisation is committed to providing equal opportunities for all representatives, participants, athletes, and supporters. A copy of the Organisation's policy on equal opportunities can be obtained from the website.

### **Gifts & Favouritism**

Representatives should take care that they do not accept any gift that might be construed as a bribe by others or lead the giver to expect preferential treatment (see *Anti-Corruption and Bribery Policy* for further details).

The Organisation recognises that there are occasions when children, young persons, legal guardians, or parents wish to pass small tokens of appreciation to representatives, for example at a religious holiday time or as a "thank you", and this is acceptable. However, it is

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unacceptable to receive gifts on a regular basis or of any significant value. Representatives must report any gifts received and token gestures to the Welfare Committee within 48 hours of receipt. Appropriate documentation must be completed to satisfy HMRC and Companies House.

Similarly, it is not permitted for representatives to give personal gifts to children and young persons. This could be misinterpreted as a gesture either to bribe, or to single out the child or young person. It might also be perceived that a “favour” or inappropriate act of some kind is expected in return.

Any reward given to a child or young person must first be agreed with the BDSA’s Welfare Committee as part of a structured reward system and not based on favouritism. Ideally all children and young people should have the opportunity to receive the reward.

### **Use of images**

The Organisation applies the guidance on the use of images from guidelines issued by the Local Safeguarding Children Board:

- Parental consent for the taking of images of children and young persons, must be sought in writing at the start of the financial year or prior to the event or session. Parents/Carers/Guardians are responsible for informing the Organisation of any change of circumstances which may affect consent;
- Parents/Carers/Guardians will be informed of how the image will be used. The Organisation will not allow an image to be used for something other than that for which it was initially agreed;
- All children and young persons featured in Organisation publications will be appropriately dressed;
- Where possible, the image will focus on the activity taking place and not a specific child or young person;
- Where appropriate, images represent the broad range of people participating safely in the event;
- Designated Organisation photographers will undertake a DBS check and attend a Safeguarding Children and Young Persons workshop and in any case will be personally responsible for keeping up to date with the latest guidelines on the Use of Images policies from the Local Safeguarding Children Board;
- Organisation Identification will be worn at all times;
- Children and young persons who are under a court order will not have their images published in any Organisation document;

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- No images of children or young persons featured in Organisation publications will be accompanied by personal details such as their education school, dance school or home address or other protected information;
- Recordings of children and young persons for the purposes of legitimate coaching aids are only filmed by Organisation representatives or officials and are stored safely and securely at the school or Organisation's premises;
- Any instances of inappropriate images must be reported to a Safeguarding Officer(s). The Organisation does not put young peoples' profiles with images and personal information on its website.

## **Guidelines in the event of concern**

### **Highlighting Concern**

Although the Organisation is committed to doing the utmost to safeguard children and young persons from harm there may be occasions when concern is raised over the treatment of a child or young person. It is reasonably accepted that the Organisation may be the point of contact for someone who raises a concern over a child or young person in a programme that does not relate to a programme.

The process is simple:

If you have a concern or want to report a safeguarding issue or if you need help contact our dedicated and confidential safeguarding support [besafe@bdsassociation.com](mailto:besafe@bdsassociation.com) or 0800 170 0555.

“Child abuse” and “neglect” are generic terms encompassing all ill treatment of children and young persons as well as cases where the standard of care does not adequately support the child's health or development. Children and young persons may be abused or suffer neglect through the infliction of harm, or through the failure to act to prevent harm. Abuse can occur in a family or an institutional or community setting. The perpetrator may or may not be known to the child or young person and may be of the same or opposite sex or alternative gender. There is often a common misconception that only a certain type of person can abuse children and young persons, but this is simply not the case; abuse may take place in any setting, by someone of either sex, of any sexual orientation and of any age.

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## **Recognition – Signs of Abuse**

There are five main forms of abuse identified below, should you have any concern that abuse is occurring you should contact an Organisation Safeguarding Officer immediately using the email [besafe@bdsassociation.com](mailto:besafe@bdsassociation.com) or calling the dedicated phone number 07752287465.

**Physical Abuse:** may involve hitting, shaking, throwing, poisoning, burning, or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child or young person. A person might do this to seek the attention they get through having a sick child. Physical abuse can be caused through omission or the failure to act to protect.

**Sexual Abuse:** involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing, and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse may be perpetrated male and female adults or indeed other children.

**Neglect:** is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to provide adequate food, clothing, and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate caregivers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

**Emotional/Mental Abuse:** is the persistent emotional maltreatment of a Child such as to cause severe and persistent adverse effects on the Child's emotional development. It may involve conveying to Children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the Child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on Children. These may include interactions that are beyond the Child's developmental capability, as well as overprotection and limitation of exploration and learning,

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or preventing the Child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including but not limited to cyber bullying), causing Children frequently to feel anxious, frightened or in danger, or the exploitation or corruption of Children. Some level of emotional abuse is involved in all types of maltreatment of a Child, though it may occur alone.

**Bullying:** is not always easy to define and can take many forms. The three main types are: physical, verbal, and emotional in person or via any communication platform.

The Organisation has a zero-tolerance approach to bullying and any reported incidents of bullying by a representative member to a Child, Child to representative member or Child to Child will be taken seriously and investigated by a Safeguarding Officer and, where necessary, the Organisation's Designated Safeguarding Lead.

**Sexting:** is when people share a sexual message and/or naked or semi-naked image, video, or text message or other message with another person. It can also be known as nude image sharing. Children and young people may consent to sending a nude image of themselves. They can also be forced into sharing images by their peers or adults online and in other circumstances. It is a criminal offence to create or share explicit images of a child, even if the person sharing is a child. If sexting is reported to the police, they will make a record but may decide not to take any formal action against the young person.

### **Responding to a report or suspicion (see Annex A)**

Where possible an Organisation Designated Safeguarding Lead should be contacted as early as possible; however, it is recognized that an individual may need to respond to a situation immediately. The following guidelines offer help and support in responding to abuse or a suspicion of abuse:

#### **Do:**

- treat any allegations extremely seriously and act at all times towards the child or young person as if you believe what they are saying, although do not directly say the words "I believe you";
- tell the child or young person they are right to tell you;
- reassure the child or young person that they are not to blame;
- be honest about your own position, who you must tell and why;
- tell the child or young person what you are doing and when; keep them up-to-date with what is happening;

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take further action (subject to the “Don’t” section below). Note that you may be the only person in a position to prevent future abuse;  
write down everything said and what was done (handwritten is preferable) and sign and date the notes contemporaneously. An Incident Report Form should be used where possible and, in any case, a referral must be made to the Organisation within 24 hours of the incident taking place. Notes must be made available to the designated person with parental responsibility (subject to the caveats under the “Don not” section below) and/or designated outside organisation supporting the incident as indicated by the designated organisation only;  
seek medical advice if necessary.

**Do not:**

- make promises you cannot keep;
- interrogate the child or young person. It is not your job to carry out an investigation. Questioning may contaminate or otherwise affect evidence. It is the responsibility of the Police and Children’s Social Care to investigate the matter;
- cast doubt on what the child or young person has told you, don’t interrupt or change the subject;
- say anything that makes the child or young person feel responsible for the abuse;
- inform parents/carers. The SO/CSO will make this decision based on whether there is suspicion of their involvement in any issues arising;
- repeat information to any member of representative or another other than as directed by the Safeguarding Officer and/or direct management of the Organisation.

***- Doing nothing is not an option; it is your responsibility to act in line with this policy -***

Make sure you tell an Organisation Designated Safeguarding Officer immediately; they will know how to follow this up and where to go for further advice.

**Recording allegations or suspicions**

The Designated Safeguarding Officer will immediately report any allegation to the local DSL, who will ask for a written factual statement from the person making the report. If an Incident Report Form has been completed a copy should be provided to the DSL.

Any statement made by the child or young person should be reported in their own words. These reports should be confined to facts. Any opinion, interpretation or judgment should be clearly stated as this stage.

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The Organisation will ensure that any child or young person concerned is immediately removed from any possible risk of harm.

Investigations into possible abuse will require careful management. In these cases, the DSL will first seek the advice of the Safeguarding Children Team, Children's Social Care, a Local Authority Designated Officer (LADO), or the Police in England or the Social Services Gateway Team in Northern Ireland, before setting up an internal inquiry and following their advice on informing the Child's parents. In any case of suspected abuse, as soon as the Local Authority, Social Services Gateway Team or the Police have been informed, the Organisation must provide a report to the Organisation's Board protecting anonymity where required at law.

Providing it is appropriate to do so the DSO will maintain constant dialogue with all parties involved with the allegation until such time as the matter has reached a reasonable outcome.

### **Specific information regarding allegations against members of Representative**

If the report involves an allegation about any member of the Organisation representative and the Organisation believes that the report may indicate that the member of representative in question has:

- behaved in a way that has harmed a child, or may have harmed a child;
- possibly committed a criminal offence against or related to a child; or
- behaved towards a child or children in a way that indicates he or she is unsuitable to work with children,

the DSO or Trustees shall immediately inform the LADO of the Council or the Social Services Gateway Team where the alleged incident took place so that he or she can consult with the Police and local authority children's social care colleagues or Social Services Gateway Team as appropriate. Where the DSO or Trustees are unsure as to whether the report meets the criteria stated above, the advice of the LADO / Social Services Gateway Team shall still be sought.

The member or representative and any other relevant person in question may be asked to write a brief report in respect of the allegation. This process will only be carried out after advice from the relevant external bodies and in consultation with the DSO or Board of Trustees. Provided that it does not contradict advice received from the LADO/ Social Services Gateway Team, any internal investigation will be carried out in line with the Organisation's Disciplinary Policy and either general or Grievance Procedures, as applicable.

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## **Confidentiality**

There is always tension and caution around issues of confidentiality. The advice for all representatives at BDSA is that no guarantee of confidentiality can be given to a child (although this does not necessarily mean that the parents/carers must be told).

A child or young person should never be pressured to give information or show physical marks unless they do so willingly. If they chose to show markings, two members of BDSA representation should be present, one of which should be a DSO.

There are actions which representatives must and are obliged to take once they are aware of a problem. Undertakings of confidentiality should not be given either to the person making the allegations or to the person being interviewed. A matter is confidential on a need-to-know basis, and nobody should have any reservations about referring any issue to an Organisation Safeguarding Officer. The key issue is that the welfare of the child or young person is protected.

## **Chapter 4 Resources**

### **DESIGNATED SAFEGUARDING OFFICERS**

Karen Hilton – Vice President, Welfare Director, and Designated Safeguarding Officer  
Genevieve Gordon-Thomson – Chair, and Designated Safeguarding Officer

### **Safeguarding Children Mobile:**

The Organisation's Senior Safeguarding contacts are Vice President Mrs Karen Hilton and Chair of the Board Mrs Genevieve Gordon-Thomson. The safeguarding committee can be contacted either by emailing [besafe@bdsassociation.com](mailto:besafe@bdsassociation.com) or phone 07752287465.

### **EXTERNAL RESOURCES**

**NSPCC HELPLINE: 0808 800 5000 / Textphone: 0800 056 0566**

**NSPCC SMS: 88858**

**In Northern Ireland:**

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[besafe@bdsassociation.com](mailto:besafe@bdsassociation.com) or 0800 170 0555

**PSNI Public Protection Unit: 028 9065 0222**

Ask for your local Public Protection Unit

**Sport Northern Ireland: 028 9038 1222**

**Child Protection in Sport Unit: 0203 222 4246**

Health and Social Care Trusts in NI - Each trust will have a Gateway team to deal with reports of abuse and also more local contacts for on-going professional liaison for advice on concerns.

Northern HSC Trust	Tel: 030 0123 4333 / Out of hours 028 9446 8833
South Eastern HSC Trust	Tel: 030 0100 0300 / Out of hours – 028 9056 5444
Southern HSC Trust	Tel: 080 0783 7745 / Out of hours – 028 3833 4444
Belfast HSC Trust	Tel: 028 9050 7000 / Out of hours – 028 9056 5444
Western HSC Trust	Tel: 028 7131 4090 / Out of hours – 028 7134 5171
Emergency (Out of Hours) Social Work 028 9504 9999	

**Information Sharing Guidance for Managers and Practitioners:**

<http://www.education.gov.uk/publications/standard/publicationdetail/page1/DCSF-00807-2008>

**Working Together to Safeguard Children:**

<http://www.education.gov.uk/publications/standard/publicationdetail/page1/DCSF-00305-2010>

**Safeguarding Board for Northern Ireland: 028 95 361810**

<https://www.safeguardingni.org/>

## **Chapter 5 Date and Review**

This policy was adopted in October 2023 and applicable to December 2024. It is under constant review and was last updated in October 2023 for application throughout 2023 and 2024. Revisions will be considered on an ongoing basis.

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## Chapter 6 Safeguarding Vulnerable Adults Policy

### Introduction

The BDSA (“**Organisation**”) acknowledges and accepts it has a responsibility for the wellbeing and safety of all vulnerable adults who are under the Organisation’s care or utilising the Organisation’s facilities. It is the duty of all adults working at the Organisation to safeguard the welfare of vulnerable adults by creating an environment that protects them from harm.

The wellbeing of vulnerable adults is a paramount consideration and responsibility for all representative, and accordingly, they must make themselves aware of the Organisation’s Safeguarding Vulnerable Adults Policy. Where appropriate, the following guidelines will be supplemented by in-service training and additional guidance.

The practices and procedures within this policy are based on the principles contained within UK legislation and government guidance and have been developed to complement the Safeguarding Adults Board’s policy and procedures, and take the following into consideration:

- Adult Safeguarding: Prevention and Protection in Partnership (July 2015)
- Adult Safeguarding Operational Procedures (Sept 2016).
- The Protection of Freedoms Act 2012
- Family Homes and Domestic Violence (NI) Order 1998
- The Safeguarding Vulnerable Groups (NI) Order 2007
- The Sexual Offences (Northern Ireland) Order 2008
- The Human Rights Act 1998
- The Data Protection Act 1994 and 1998
- The Disability Discrimination Act 1995
- Justice Act (Northern Ireland) 2015

### Aims, Key Principles and Responsibilities

**The aims of the Organisation’s Safeguarding Vulnerable Adults Policy are:**

- To safeguard all vulnerable adults who interact with the Organisation.
- To demonstrate best practice in safeguarding vulnerable adults.

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- To develop a positive and pro-active welfare programme to enable all vulnerable adults to participate in an enjoyable and safe environment.
- To ensure representative are aware of this policy and are adequately trained.
- To promote high ethical standards throughout the Organisation.

**The key principles underpinning this policy are:**

The vulnerable adult’s welfare must always be the paramount consideration;  
 All vulnerable adults have a right to be protected from abuse regardless of their age, gender, disability, culture, language, racial origin, religious beliefs or sexual identity;  
 All allegations of abuse will be taken seriously and responded to efficiently and appropriately;  
 To encourage carers and relevant members of the vulnerable adult’s support structure to be involved in a relationship with the Organisation;  
 To ensure that coaches, parents, and other adults who encounter vulnerable adults provide good role models of behaviour.

**Our Responsibilities:**

- To notify the appropriate agencies if abuse is identified or suspected (see below “*To Refer or not to Refer*”);
- To support and where possible secure the safety of individuals and ensure that all referrals to services have full information in relation to identified risk and vulnerability;
- To DBS check employees that have access to or work with Vulnerable Adults;
- To promote the principles and good practice to other voluntary organisations.

**Definitions**

**“Vulnerable Adult”:** a person over the age of 16 who is or may need community care services by reason of mental or other disability, age, or illness and who is or may be unable to take care of him/herself or unable to protect him/herself against significant harm or exploitation. [See further section ‘*Defining Vulnerability*’ below].

**“Abuse”:** the “...harming of a person usually by someone who is in a position of power, trust, or authority over that individual. The harm may be physical, psychological, or emotional or it may be directed at exploiting the vulnerability of the victim in more subtle ways (for example, through denying access to people who can come to the aid of the victim, or through misuse or

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misappropriation of his or her financial resources). The threat or use of punishment is also a form of abuse. In many cases, it is a criminal offence...”<sup>1</sup>

## Chapter 7 Defining Vulnerability

(1) In addition to the defined terms above, Regulations<sup>2</sup> define a ‘**vulnerable adult**’ as a person aged 18 or over who is receiving Services of a type listed below and in consequence of a Condition of a type listed in paragraph (3) below has a Disability of a type listed in paragraph (4) below;

(2) In addition, the BDSA seek to identify any competitor or dance partner as a potential ‘vulnerable adult’ due to the nature of balance of power in a sporting context.

(2) The Services are:

- a) Accommodation and nursing or personal care in a care home;
- b) Personal care or nursing or support to live independently in his/her own home;
- c) Any services provided by an independent hospital, independent clinic, independent medical agency, or NHS body;
- d) Social care services;
- e) Any services provided in an establishment catering for a person with learning difficulties.

(3) The Conditions are:

- a) A learning or physical disability;
- b) A physical or mental illness, chronic or otherwise, including an addiction to alcohol or drugs;
- c) A reduction in physical or mental capacity.

(4) The Disabilities are:

- a) A dependency upon others in the performance of, or a requirement for assistance in the performance of, basic physical functions;
- b) Severe impairment in the ability to communicate with others;
- c) Impairment in a person’s ability to protect him/herself from assault, abuse, or neglect.

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<sup>1</sup> Centre for Policy on Ageing (1996)

<sup>2</sup> The Police Act 1997 (Enhanced Criminal Record Certificates) (Protection of Vulnerable Adults) Regulations 2000

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## **Types of Abuse**

### **Physical abuse**

- Bodily assaults resulting in injuries e.g. hitting, slapping, pushing, kicking, misuse of medication, restraint, or inappropriate sanctions.
- Bodily impairment e.g. malnutrition, dehydration, failure to thrive.
- Medical/healthcare maltreatment.

### **Sexual abuse**

- Rape, incest, acts of indecency, sexual assault.
- Sexual harassment or sexual acts to which the vulnerable adult has not consented or could not consent or was pressured into consenting.
- Sexual abuse might also include exposure to pornographic materials, being made to witness sexual acts and encompasses sexual harassment and non-contact abuse.

### **Psychological/emotional abuse includes:**

- Including threats of harm, controlling, intimidation, coercion, harassment, verbal abuse, enforced isolation or withdrawal from services or supportive networks.
- Humiliation.
- Bullying, shouting, swearing.

### **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.

### **Financial or material**

- Including theft, fraud.
- Exploitation, pressure in connection with wills, property or inheritance or financial matters, or the misuse or misappropriation of property, possessions, or benefits.

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## **Discriminatory**

- Including racist, sexist, or based on a person's disability, and other forms of harassment, slurs, or similar treatment.

Note: Multiple forms of abuse may occur in an ongoing relationship or abusive Service setting to one person, or to more than one person at a time, making it important to look beyond single incidents or breaches in standards, to underlying dynamics and patterns of harm. Any or all of these types of abuse may be perpetrated as the result of deliberate intent and targeting of vulnerable people, negligence, or ignorance.

## **Responding to a report or suspicion**

The priority should always be to ensure the safety and protection of vulnerable adults. To this end it is the responsibility of all representative to act on any suspicion or evidence of abuse or neglect and to pass on their concerns to a responsible person or agency.

Where possible an Organisation Designated Safeguarding Lead should be contacted as early as possible; however, it is recognized that an individual may need to respond to a situation immediately. The following guidelines offer help and support in responding to abuse or a suspicion of abuse:

### **Do:**

- take urgent action in situations of immediate danger, by calling the relevant emergency services (e.g. Police, ambulance);
- always treat any allegations extremely seriously and act towards the Vulnerable Adult as if you believe what they are saying, although do not directly say the words "I believe you";
- listen carefully to the Vulnerable Adult and reassure them that they are right to tell you;
- reassure the Vulnerable Adult that they are not to blame;
- be honest about your own position, who you must tell and why;
- tell the Vulnerable Adult what you are doing and when; keep them up-to-date with what is happening;
- take further action (subject to the "Don't" section below). Note that you may be the only person in a position to prevent future abuse;
- write down everything said and what was done (handwritten is preferable) and sign and date the notes contemporaneously. An Incident Report Form should be used where

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possible and, in any case, a referral must be made to the Organisation within 24 hours of the incident taking place;  
seek medical advice if necessary.

**Do not:**

- make promises you cannot keep;
- interrogate the Vulnerable Adult. It is not your job to carry out an investigation. Questioning may contaminate or otherwise affect evidence. It is the responsibility of the Police to investigate matters;
- cast doubt on what the Vulnerable Adult has told you;
- interrupt or change the subject;
- say anything that makes the Vulnerable Adult feel responsible for the abuse;
- inform relevant carers. The SO will make this decision based on whether there is suspicion of their involvement in any issues arising;
- repeat information to any member of representative or another other than as directed by the Safeguarding Officer and/or direct management of the Organisation.

***- Doing nothing is not an option; it is your responsibility to act within the guidelines of the policy -***

Make sure you tell an Organisation Safeguarding Officer (DSO) immediately; they will know how to follow this up and where to go for further advice.

## **Confidentiality**

There is always tension and caution around issues of confidentiality. The advice for all representative at the Organisation is that no guarantee of confidentiality can be given to a vulnerable adult (although this does not necessarily mean that the carers must be told).

Issues of confidentiality must be clarified early on. For example, representative must make it clear that they will have to discuss the concerns with their supervisor.

Where a vulnerable adult expresses a wish for concerns not to be pursued then this should be respected wherever possible. However, decisions about whether to respect these wishes must have regard to the level of risk to the vulnerable adult and others, and their capacity to understand the decision in question. In some circumstances the vulnerable adult's wishes may be overridden in favour of objective considerations of safety.

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Decisions to override the vulnerable adult's wish not to take the matter further should if possible be the product of discussion with appropriate line management (see further section on 'To Refer or not to Refer').

A vulnerable adult should never be pressured to give information or show physical marks unless they do so willingly. If they chose to show marks that are in discussion, two members of representative should be present.

There are actions which representative must and are obliged to take once representative in their capacity as representatives of the Organisation become aware of a problem. Undertakings of confidentiality should not be given either to the person making the allegations or to the person being interviewed. A matter is confidential on a need-to-know basis, and nobody should have any reservations about referring any issue to an Organisation Safeguarding Officer. The key issue is that the welfare of the Vulnerable Adult is protected.

### **Discussion and Decision-making**

Information must be shared with your manager wherever possible on the same day as the matter arising, who must approve any actions to be taken and any documentation or correspondence being sent out.

If the Manager is not available, then any concerns should be discussed with the Chief Executive Officer.

### **To Refer or not to Refer**

**The decision to refer or not to refer should be made by the line manager and the Head of the Organisation must be informed.**

When considering the decision as to whether to refer elsewhere (e.g. to Police, Social Services, National Care Standards Commission, HSC Trust Adult Safeguarding Gateway Team, or Regulation & Quality Improvement Authority (RQIA)) the following should be taken into account:

- The wishes of the vulnerable adult, & their right to self-determination;
- The mental capacity of the vulnerable adult;
- Known indicators of abuse;
- Definitions of abuse;
- Level of risk to the vulnerable adult;
- The seriousness/effect of the abuse;
- Level of risk to others;
- The effect of the abuse on others;

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- Whether a criminal offence has been committed;
- Whether other statutory obligations have been breached (e.g. NCSC); The need for others to know;
- The ability of others (e.g. Police, Social Services) to make a positive contribution to the situation.

### **Mental Capacity & Consent**

The consent of the vulnerable adult must be obtained except where:

- The vulnerable adult lacks the mental capacity to decide, and a risk assessment indicates that referral would be in their best interests;
- Others may be at risk; or
- A crime has been committed.

### **To whom to Refer or Report Concerns**

It is expected that reports/referrals may be made to the following:

- Relevant hospital Social Services team if vulnerable adult is in hospital;
- Community Mental Health Team or the local HSC Trust Adult Safeguarding Gateway Team in Northern Ireland, where the vulnerable adult has an ongoing mental health need;
- National Care Standards Commission in England or RQIA in Northern Ireland, where there are issues relating to standards and regulations in care homes and domiciliary care agencies;
- Hospital Trusts/Primary Care Trusts where there is a complaint of abuse by a member of representative;
- The Police or PSNI in Northern Ireland, if there is an emergency where delay may result in serious harm to the vulnerable adult or if the abuse may constitute a crime.

### **DESIGNATED SAFEGUARDING OFFICERS**

Karen Hilton – Vice President, Welfare Director, and Designated Safeguarding Officer  
Genevieve Gordon-Thomson – Chair, and Designated Senior Safeguarding Officer

### **Safeguarding Mobile:**

The Organisation's Senior Safeguarding contacts are Vice President Mrs Karen Hilton and Chair of the Board Mrs Genevieve Gordon-Thomson. The safeguarding committee can be contacted either by emailing [besafe@bdsassociation.com](mailto:besafe@bdsassociation.com) or phone 07752287465.

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**Information, if known, which will be required when making a referral or report:**

- Details of alleged victim – name, address, age, gender, ethnic background including principle language spoken, details of any disability;
- Details of GP and any known medication;
- Whether the individual is aware of and has consented to the referral/report;
- The mental capacity of the individual (are there any concerns/doubts about this?)
- If appropriate, advise agency on preferred/advised method or environment when approaching the alleged victim or perpetrator;

Also, any relevant information, for example:

- Reasons for concerns and therefore this referral;
- Details of how these concerns came to light;
- Specific information relating to these concerns;
- Details of any arrangements which have already been made for the protection of the vulnerable adult or any immediate action taken;
- Details of anyone else to whom this referral has also been made;
- Details of the alleged perpetrator and if they are a vulnerable adult;
- Details of alleged abuse and information about suspicions;
- Details of any other background information;
- An impression of potential seriousness of the situation;
- Details of any other professional involved;
- Details of carers and any significant family members, neighbours, friends.

**Information passed on must be relevant, necessary, and up to date.**

**Date and Review**

This policy was adopted in October 2023 and applicable to December 2024. It is under constant review and was last updated in October 2023 for application throughout to December 2024. Revisions will be considered on an ongoing basis. Notifications of amendments will be made available.

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**DECLARATION:** I have read and understood the Handbook of Safeguarding Policies herein and agree to work to the expected standards.

**Name:**.....

**Signature:**.....

**Date:**.....

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