MAYPOLE FOOTBALL CLUB's Safeguarding Policy and Procedures

Name of organisation: MAYPOLE FC

		Explanatory notes	Section content
Section hea	nding		
• Intro	duction	This section explains why the safeguarding policy is important to your organisation and what the policy aims to achieve.	MAYPOLE FC makes a positive contribution to a strong and safe community and recognises the right of every individual to stay safe.
		In order to fully explain why the policy is relevant to your organisation, you will need to list the types of activities that you carry out that will bring you into	MAYPOLE FC comes into contact with children and / or vulnerable adults through the following activities: Education
		contact with vulnerable groups e.g. delivery of services, involvement in residential activities, general contact. Bear in mind that if your principle clients are children, you still need to consider contact with adults and vice versa.	This policy seeks to ensure that MAYPOLE FC undertakes its responsibilities with regard to protection of children and / or vulnerable adults and will respond to concerns appropriately. The policy establishes a framework to support paid and unpaid staff in their practices and clarifies the organisation's expectations.
		Explanation of terms – regulated and controlled activities. Regulated activity can be defined as 'frequent contact' with a vulnerable person (once a month or more) or as 'intensive contact' (3 days or more within a 30 day period).	
		Controlled activity includes e.g. ancillary roles –such as caretakers where there may be contact with vulnerable groups. Also includes administrators or trustees who can access data on vulnerable people.	

• Definitions It als	section is optional and refers to the principal es of legislation governing the application of this cy.	 The principal pieces of legislation governing this policy are: Working together to safeguard Children 2010 The Children Act 1989
• Definitions It als		The Adoption and Children Act 2002:The Children act 2004
• Definitions It als		 Safeguarding Vulnerable Groups Act 2006 Care Standards Act 2000 Public Interest Disclosure Act 1998 The Police Act – CRB 1997 Mental Health Act 1983 NHS and Community Care Act 1990 Rehabilitation of Offenders Act 1974
	section defines the term safeguarding so defines the terms protection and abuse and two main groups covered by the policy.	Safeguarding is about embedding practices throughout the organisation to ensure the protection of children and / or vulnerable adults wherever possible. In contrast, child and adult protection is about responding to circumstances that arise. Abuse is a selfish act of oppression and injustice, exploitation and manipulation of power by those in a position of authority. This can be caused by those inflicting harm or those who fail to act to prevent harm. Abuse is not restricted to any socio-economic group, gender or culture. It can take a number of forms, including the following: Physical abuse Sexual abuse Emotional abuse Bullying Neglect Financial (or material) abuse

A child is under the age of 18 (as defined in the United Nations convention on the Rights of a Child). **Definition of Vulnerable Adults** A vulnerable adult is a person aged 18 years or over who may be unable to take care of themselves or protect themselves from harm or from being exploited. This **may** include a person who: Is elderly and frail Has a mental illness including dementia Has a physical or sensory disability Has a learning disability Has a severe physical illness Is a substance misuser Is homeless All staff(paid or unpaid) have responsibility to follow the guidance This section contains details of responsibilities at various levels of the organisation. The areas of laid out in this policy and related policies, and to pass on any Responsibilit responsibility are listed below. You will need to welfare concerns using the required procedures. allocate these to the most suitable person/ group We expect all staff (paid or unpaid) to promote good practice by within your organisation. It is best practice to have a being an excellent role model, contribute to discussions about named person with a lead responsibility for safeguarding and to positively involve people in developing safe safeguarding. This is usually a senior manager or practices. trustee who can have authority to make decisions. Key responsibilities at various levels are: Additional specific responsibilities The policy is in place and appropriate ually trustee responsibility) The policy is accessible (usually delegated to The Designated lead officer is ANTONY WILSON IT by trustees) This person's responsibilities are: CHILD Welfare Officer. The policy is implemented (usually delegated SMT or lead officer) The policy is monitored and reviewed ually delegated to SMT or lead officer) Liaison with and monitoring the Designated nior Manager work (usually by SMT or trustees)

- Sufficient resources (time and money) are peated to ensure that the policy can be effectively plemented (usually trustees through overall budget peess and SMT on allocation of those resources)
- Promoting the welfare of children and nerable adults (usually Designated Senior Manager)
- Ensure staff (paid and unpaid) have access appropriate training/information (usually the signated Senior Manager)
- Receive staff concerns about safeguarding d respond to all seriously, swiftly and appropriately sually Designated Senior Manager or SMT in their sence)
- Keep up to date with local arrangements for eguarding and CRB (usually Designated Senior inager)
- Develop and maintain effective links with evant agencies. [You may wish to list these- e.g. ough attendance at strategy meetings, initial case nferences, core groups. CAF meetings] (usually signated Senior Manager)
- Take forward concerns about responses sually Designated Senior Manager)

SMT can mean the most senior person paid or unpaid within your organisation. Support from trustees within smaller organisations is essential.

• Implementati Stages

Within organisations, it is inevitable that there will be other policies which link with the Safeguarding policy and this demonstrates how safeguarding is embedded within the organisation. Policies which may be listed are:

- Whistleblowing –ability to inform on other lff/ practices within the organisation
- Grievance and disciplinary procedures to

The scope of this Safeguarding Policy is broad ranging and in practice, it will be implemented via a range of policies and procedures within the organisation.

Safe recruitment

MAYPOLE FC) ensures safe recruitment through the following processes:

dress breaches of procedures/ policies

- Health and Safety policy, including lone rking procedures, mitigating risk to staff and clients
- Equal Opportunities policy— ensuring feguarding procedures are in line with this policy, in rticular around discriminatory abuse and ensuring that safeguarding policy and procedures are not criminatory
- Data protection (how records are stored and pess to those records)
- Confidentiality (or limited confidentiality licy) ensuring that service users are aware of your ty to disclose
- Staff induction
- Staff training

There are various aspects which should be more explicitly detailed within the Safeguarding Policy. These relate to:

Recruitment – the following good practice recruitment processes are taken from Gloucestershire Safeguarding Children Board.

- Providing the following safeguarding tement in recruitment adverts or application details – cruitment is done in line with safe recruitment actices.'
- Job or role descriptions for all roles involving ntact with children and / or vulnerable adults will ntain reference to safeguarding responsibilities.
- There are person specifications for roles ich contain a statement on core competency with ard to child/ vulnerable adult protection/ safeguarding.
- Shortlisting is based on formal application processes/forms and not on provision of CVs

Criminal Bureau Records Gap Management

The organisation commits resources to providing Criminal Bureau Records check on staff (paid or unpaid) whose roles involve contact with children and /or vulnerable adults.

In order to avoid CRB gaps, the organisation will Pay for a new DBS

In addition to checks on recruitment for roles involving contact with children/ vulnerable adults, for established staff the following processes.

Service delivery contracting and sub contracting.

- Interviews are conducted according to equal portunity principles and interview questions are based the relevant job description and person specification
- CRB checks will be conducted for specific es for all staff (paid or unpaid) working with children d vulnerable adults. Portable/ carry over CRB checks m another employer will not be deemed to be fficient. It is a criminal offence for individuals barred by ISA to work or apply to work with children or nerable adults in a wide range of posts.
- No formal job offers are made until after ecks for suitability are completed (including CRB and eferences). (You may wish to add in a qualifier about asures in place for exceptional and justifiable cumstances where employment/ role could mmence prior to CRB clearance).

Criminal Records Bureau checks

It is vital to avoid CRB gaps in the organisation and to have consistency in the way roles requiring CRB checks are identified. A typical method for avoiding CRB gaps would be to

'maintain and review a list of roles across the organisation which involve contact with children/ vulnerable adults'. (You may wish to state who will review and how often).

Organisations will ensure that their established staff and roles are regularly reviewed through e.g.

- A 3 year rolling programme of re-checking CRB's is in place for holders of all identified posts.
- Existing staff (paid or unpaid) who transfer from a role which does not require a CRB check to one which involves contact with children / vulnerable adults will be subject to a CRB check.

Service delivery contracting and sub contracting.

This section is relevant to organisations who may sub contract work, be sub contracted to provide services, or draw in sessional staff. A typical statement might be:

- 'There will be systematic checking of reguarding arrangements of partner organisations
- Safeguarding will be a fixed agenda item on partnership reporting meetings.
- Contracts and memorandums of agreement partnership delivery work will include clear minimum uirements, arrangements for safeguarding and non mpliance procedures'.

• Communicati straining and pport for staff

Induction: Typical ways to include safeguarding issues during induction include:

- Discussion of the Safeguarding Policy (and nfirmation of understanding)
- Discussion of other relevant policies
- Ensure familiarity with reporting processes, roles of line manager and Designated Senior inager (and who acts in their absence)
- Initial training on safeguarding including: safe rking practices, safe recruitment, understanding child tection and the alerter guide for adult safeguarding You may wish to refer to formally assessing new members of staff's competence in applying safe practices (e.g. during probation period)

Training:

You will need to list the types of refresh training for staff.

Sources of training could also be included e.g. training listed in www.gscb.org.uk (from the option 'I

MAYPOLE FC commits resources for induction, training of staff (paid and unpaid), effective communications and support mechanisms in relation to Safeguarding

Inductionwill include Safeguarding workshops

Training

All staff who, through their role, are in contact with children and /or vulnerable adults will have access to safeguarding training at an appropriate level. Sources and types of training will include:

Communications and discussion of safeguarding issues Commitment to the following communication methods will ensure effective communication of safeguarding issues and practice:

Support

We recognise that involvement in situations where there is risk or actual harm can be stressful for staff concerned. The mechanisms in place to support staff include:

work with children and young people').

For those working with adults try links to training specifically for voluntary, independent and private sectors from :

<u>www.gloucestershire.gov.uk</u>(follow the links to the training Community and Adult Care Directorate Adult Training pages (or telephone 01452 583672)).

Communications – typical mechanisms for enabling effective discussion of safeguarding issues between staff will vary according to size of the organisation but might include safeguarding as a regular agenda item across:

- team meetings
- SMT meetings
- Board meetings
- One to one meetings (formal or informal),
- clinical supervision

Other aspects to highlight in the communications section might be

- Participation in multi agency safeguarding ocedures and meetings in order to be involved in child/ ult protection procedures
- Participation in joint client visits
- Involvement in the CAF process
- Provision of a clear and effective reporting occurre which encourages reporting of concerns.
- Encouraging open discussion (e.g. during pervision and team meetings) to identify and barriers reporting so that they can be addressed.
- Inclusion of safeguarding as a discussion ampt during supervision meetings/ appraisals to courage reflection
 - Some organisations will have a safeguarding

resentatives team. If so it should be referred to in this ction.

How staff are reminded about policies and pcedures (refresh sessions etc)

Support – typical support mechanisms would include:

- Debriefing support for paid and unpaid staff that they can reflect on the issues they have dealt h.
- Seeking further support as appropriate e.g. pess to counselling.
- Staff who have initiated protection concerns I be contacted by line manager /DSM within a certain escale e.g. 1 week).

Professional undaries

This section covers aspects such as relationships with clients and the areas will be dependent on the type of work carried out with vulnerable people. Typical areas to include and suggested rules are as follows:

- Giving and receiving gifts from clients: A
 typical statement would be '(Insert name of
 organisation) does not allow paid or unpaid staff
 to give gifts to or receive gifts from clients.
 However gifts may be provided by the
 organisation as part of a planned activity'.
- Staff contact with user groups. A typical statement would be: 'Personal relationships between a member of staff (paid or unpaid) and a client who is a current service user is prohibited. This includes relationships through social networking sites such as facebook and

Professional boundaries are what define the limits of a relationship between a support worker and a client. They are a set of standards we agree to uphold that allows this necessary and often close relationship to exist while ensuring the correct detachment is kept in place.

MAYPOLE FC expects staff to protect the professional integrity of themselves and the organisation.

The following professional boundaries must be adhered to:

If the professional boundaries and/or policies are breached this could result in disciplinary procedures or enactment of the allegation management procedures

bebo.

It is also prohibited to enter into a personal relationship with a person who has been a service user over the past 12 months.'

You may also wish to include statements about the following:

- Use of abusive language
- Response to inappropriate behaviour / guage
- Use of punishment or chastisement
- Passing on service users' personal contact tails
- Degree of accessibility to service users (e.g. providing personal contact details)
- Taking family members to a client's home
- Selling to or buying items from a service user
- Accepting responsibility for any valuables on half of a client
- Accepting money as a gift/ Borrowing money m or lending money to service users
- Personal relationships with a third party ated to or known to service users
- Accepting gifts/ rewards or hospitality from panisation as an inducement for either doing/ not ing something in their official capacity
- Cautious or avoidance of personal contact h clients

You should also refer to other relevant policies which provide guidance e.g. Code of conduct, e-safety, computer misuse.

There should be a statement about declaring actual or potential interests (e.g. discussing them with line

		,
	manager or Designated Senior Manager). If you have a Conflict of Interests Policy in place, refer to this document.	
• Reporting	The simplest way to communicate your process is via a simple flow chart/ bullet point list. You can adjust the one shown below to demonstrate your processes.	The process outlined below details the stages involved in raising and reporting safeguarding concerns at MAYPOLE FC
	Communicate your concerns with your immediate manager	
	Seek medical attention for the vulnerable person if needed	
	Discuss with parents of child Or with vulnerable person. Obtain permission to make referral if safe and appropriate	
	if needed seek advice from the Children and Families helpdesk or Adults helpdesk	
	Complete the Local Authority Safeguarding Vulnerable Groups Incident Report Form if required and submit to the local authority within 24 hours of making a contact	
	Ensure that feedback from the Local Authority is received and their response recorded	

The local authority has a process for reporting and this must be adopted. Organisations will be expected to complete the local authorities initial contact form when informing them of a concern about a child. The use of this form and compliance with the policy will be mandatory and must be built into your policy. Information on reporting concerns will be found at www.qscb.org.uk

If the immediate manager is implicated, then refer to their line manager or peer.

Allegations Inagement

There should be a stated process for dealing with allegations against any professional or volunteer working for any organisation. There is an established allegations management procedure for working with children in Gloucestershire which can be viewed on www.gscb.org.uk

The simplest process would be:

First step: Any member of staff (paid or unpaid) from (insert name of organisation) is required to report any concerns in the first instance to their line manager/ safeguarding manager/ peer. [You may refer to making a written record at this stage e.g. 'A written record of the concern will be completed by (insert - the individual /line manager/ safeguarding manager/ peer)].

Second step- contact local authority for advice. In Gloucestershire this can be done via (for children) the Safeguarding Children Services Local Authority Designated Officer (LADO) 09452 426994, or (for

MAYPOLE FC recognises its duty to report concerns or allegations against its staff (paid or unpaid) within the organisation or by a professional from another organisation.

The process for raising and dealing with allegations is as follows:

- 1, Note it all down.
- 2. Report it, to your welfare officer or Safeguarding officer

MAYPOLE FC recognises its legal duty to report any concerns about unsafe practice by any of its paid or unpaid staff to the Independent Safeguarding Authority (ISA), according to the ISA referral guidance document http://www.isa-gov.org.uk/PDF/ISA%20Referral%20Guidance%20%20V2009-02.pdf

	adults) the Adult Helpdesk 01452 426868 Third step – follow the advice provided	
	Third step – follow the advice provided	
	Some organisations may prefer to include the full local authority process. For children, this can be sourced as a flow chart from www.gscb.org.uk	
• Monitoring	The safeguarding aspects which would typically be monitored would include: Safe recruitment practices CRB checks undertaken References applied for new staff Records made and kept of supervision sions Training – register/ record of staff training on ld/ vulnerable adult protection Monitoring whether concerns are being orted and actioned Checking that policies are up to date and evant Reviewing the current reporting procedure in ce Presence and action of Designated senior mager responsible for Safeguarding is in post The use of the Competency Framework available through the local VCS GSCB representative- go to www.gloshub.org.uk to find the contact details of the representative - is a good monitoring tool to assess the organisation's competency in	The organisation will monitor the following Safeguarding aspects:
Managing	This section refers to measures in place to ensure that information is managed and accurately and	Information will be gathered, recorded and stored in accordance with the following policies, Data protection

	confidentially recorded.	All staff must be aware that they have a professional duty to share information with other agencies in order to safeguard children and vulnerable adults. The public interest in safeguarding children and vulnerable adults may override confidentiality interests. However, information will be shared on a need to know basis only, as judged
		by the Designated Senior Manager. All staff must be aware that they cannot promise service users or their families/ carers that they will keep secrets.
Conflict solution and mplaints	If working with children there is a specific policy and procedure for conflict resolution which you can refer to. This section also refers to how people may make complaints to your organisation (following the established complaints procedures)	MAYPOLE FC is aware of the GSCB policy on resolution of professional disagreements in work relating to the safety of children / Escalation Policy (at www.gscb.org.uk) and if necessary this will be taken forward by ANTONY WILSON Conflicts in respect of safety of vulnerable adults will be taken forward by ANTONY WILSON via the GCC Community and Adult Care Directorate
Communicati and reviewing the licy	Some organisations make it clear to service users what its duty is – eg a statement to customers about safeguarding arrangements may be produced and displayed on the website. There may be an agreement with each client or a pack produced for clients which explain the safeguarding arrangements. The Complaints Policy/Procedure could be referred to which outlines how clients can make complaint about the service. This section also states the review period for the policy. Reviewing simply means looking at the policy, checking it is still appropriate and making changes as necessary. Reviewing once a year is good practice but the policy should also be reviewed if there are changes in circumstances or legal	

requirements.	