



# **AFC BOURNEMOUTH SAFEGUARDING ADULTS AT RISK POLICY**



**Prepared by:**

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**Approved by:**

A handwritten signature in black ink that reads 'Jim Frevola'.

Jim Frevola, President of Business

July 2023

AFC Bournemouth will review this policy annually, when legislation changes or following any learning outcomes from safeguarding incidents, concerns, or allegations.

**Review Date:** July 2024

Version – V9



## Foreword from the Board

**AFC Bournemouth is fully committed to ensuring the safety and well-being of all individuals and communities with whom we interact, and therefore our aim is for the golden thread of safeguarding to be woven through every element of the club's work.**

**Through the application of this policy, we acknowledge our duty of care to safeguard and promote the welfare of children, young people, and adults at risk.**

**All staff, players and volunteers are expected to share our commitment and to support in creating a safe and positive environment for everybody and a culture of safeguarding vigilance across our club. In turn, the club will provide support, learning and development and relevant information to staff.**

A handwritten signature in black ink, appearing to read "Jim Frevola".

**JIM FREVOLA**



## **INTRODUCTION:**

AFC Bournemouth is committed to creating a culture where safeguarding responsibilities and procedures for raising concerns are widely understood and embedded in our values. We are fully committed to seeking to provide a safe environment for everyone involved with the Club.

## **Our Safeguarding Vision:**

AFC Bournemouth strives to ensure that everyone in our care or attending our activities feels safe, protected, and free from the risk of harm.

The Club takes its safeguarding responsibilities very seriously and we are committed to creating a safe and positive environment for everyone.

## **Our Safeguarding Values:**

Safeguarding is woven through our practices, and we aspire to create a culture within the club where all involved feel:

**Trusted** - We will promote good safeguarding practice and ensure it is widely understood, openly discussed and where all staff recognise their role they play in keeping children, other vulnerable people, themselves, and their colleagues safe from harm.

**Protected** - We will provide an environment where persons who engage with the club do so in the knowledge that they will have a positive and rewarding experience.

**Supported** - We will respect and support everyone and everything we encounter giving everyone the opportunity to develop and strive to improve.

**Heard** - We aim to create a culture that gives everyone a voice and takes account of their rights and wishes and enables the club to strengthen its safeguarding arrangements.

## **POLICY STATEMENT:**

AFC Bournemouth acknowledges and accepts it has a responsibility to create opportunities for adults at risk to participate in a broad spectrum of activities at the club at the same time as creating a safer culture for those participants ensuring that they are protected from harm.

AFC Bournemouth is governed by the rules and regulations set out in the Care Act 2014, the FA Safeguarding Children & Vulnerable Adults guidance and Premier League regulations and safeguarding standards.

The club is fully committed to ensuring that the best practice recommended by these bodies is employed throughout and has a responsibility to maintain regular dialogue and work in partnership with the Bournemouth, Christchurch and Poole Safeguarding Adults Board.



## **Scope:**

This policy and procedure relate to safeguarding adults at risk to ensure best practice in safeguarding is promoted and adhered to. Any safeguarding concerns regarding Children will fall under the AFC Bournemouth 'Safeguarding children' Policy.

This policy applies to all staff members of the business, including full time, part time, casual or pieceworker as well as any Consultants and Volunteers who work within the parameters of those at-risk groups of staff, customers or clients. All staff members, Consultants and Volunteers are required to adhere to this policy.

For the avoidance of doubt, when using the term 'club' in the policy document, this includes AFC Bournemouth Club, The Academy and The Community Sports Trust (CST).

It applies to all locations owned and operated by the Club including at locations hired to provide Club activities.

Failure to comply with this policy may be treated as misconduct and be dealt with under our Disciplinary Procedure and if a breach amounts to gross misconduct this may result in dismissal, possibly criminal prosecution and reporting of any incident to the appropriate regulatory or investigative body.

The well-being of all adults at risk is paramount for all staff and accordingly, they must read and fully understand this policy. Where appropriate, the following guidelines will be supplemented by in service training and additional guidance.

## **AIMS & KEY PRINCIPLES:**

The Safeguarding Adults at Risk policy will identify the measures that are to be taken to keep adults at risk safe, to protect them and not expose them to danger or risk and to prevent harm occurring to them.

Where proactive and preventative work has failed or where harm has occurred by acts of coercion or omission and where the adult at risk has not been able to safeguard themselves, the policy sets out the club's procedures for dealing with any such issues.

### **The aims of AFC Bournemouth's Safeguarding Adults at Risk Policy are:**

- To develop a safe and welcoming environment for adults at risk involved in Club-led activities ensuring they are free from abuse and the fear of abuse in all its forms
- To cultivate a culture where safeguarding practice is widely understood, openly discussed and where the workforce recognises the role they play in keeping adults at risk, themselves and colleagues, safe from harm.
- To promote a clear system that supports constant vigilance, prevention and early intervention in safeguarding matters and where necessary prompt and thorough action in response to any reported concerns or incidents.
- To apply legislation, government policy and guidance, and football governing body regulations, policy and guidance where applicable.
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### **The key principles underpinning this policy are:**



- All adults, regardless of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, and sexual orientation status have the right to be protected from abuse and poor practice and to participate in an enjoyable and safe environment.
- The club will seek to ensure that our sport and any other recreational activities are inclusive and make reasonable adjustments for any ability, disability or impairment, we will also commit to continuous development, monitoring and review.
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- The rights, dignity and worth of all adults will always be respected.
- We recognise that a disabled adult may or may not identify themselves or be identified as an adult 'at risk'.
- We all have a shared responsibility to ensure the safety and wellbeing of all adults and will act appropriately and report concerns whether these concerns arise within football, or in the wider community.
- All allegations will be taken seriously and responded to quickly in line with The Club's Safeguarding Adults at risk Policy and Procedures.

## ROLES AND RESPONSIBILITIES

### Senior Safeguarding Lead/Safeguarding Trustee

- Ensure that effective safeguarding policies and practices are approved, implemented, and monitored throughout the Club.
- Take steps to ensure that any safeguarding risks arising from the Club activities involving adults at risk are assessed and risk mitigation strategies are put in place.
- Ensure that the Management Team are immediately advised of any major causes of safeguarding concern.
- Ensure safeguarding data is a standard agenda item in Board/Trustee meetings; including its analysis, lessons learned and recommendations for ongoing improvements and resourcing.
- To chair the Strategic Safeguarding Group meetings (SSL).

### Head of Safeguarding

- Provides effective leadership and management with a clear sense of direction and purpose in the safeguarding of children, ensuring full compliance across the Club, Premier League rules and government legislation, whilst maintaining key stakeholder relationships both externally and internally.
- Is accountable for the day-to-day case management of new and ongoing safeguarding concerns, including investigations works with external safeguarding partnerships and the Disclosure and Barring Service.
- Is the recognised point of contact for those wishing to raise concerns or seek help and guidance connected with Safeguarding.



- Provide a quarterly report to the Board on safeguarding matters, incidents, lessons learned, good working practice and areas of poor practice.

During periods of absence the responsibilities of the Head of Safeguarding may be delegated to one or more members of staff known as Safeguarding Officers. The Head of Safeguarding will ensure that Safeguarding Officers are properly trained and supported to complete this function.

## **Safeguarding Officers:**

Support the Clubs Head of Safeguarding to pro-actively promote and raise safeguarding awareness and assist with responding appropriately to safeguarding concerns and allegations.

- Work with the Clubs Head of Safeguarding to implement and promote the Club's safeguarding policies and procedures within their department.
- Act as a source of safeguarding support and advice within their department.
- Promote a safe working environment.
- Support colleagues to respond appropriately to concerns about the welfare or safety of children.

## **All Staff:**

### **Safeguarding is everyone responsibility, all staff:**

- Have a responsibility to provide a safe and inclusive environment for adults at risk
- Have a responsibility to take appropriate action and report concerns.
- Should respect and abide the Club's Code of Conduct.

*See appendix 1 for safeguarding organisational structure chart*

## **SAFEGUARDING ADULTS AT RISK PRINCIPLES**

### **Definition of the term 'Adult at Risk' (Care Act 2014)**

The safeguarding duty in the context of the legislation under the Care Act apply to

Someone who is aged eighteen or over who:

- Has needs for care and support (whether or not the Local Authority is meeting any of those needs) **and**
- Is experiencing, or at risk of, abuse or neglect **and**
- As a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect.

This may include people with learning disabilities, sensory impairments, mental health needs, older people and people with a physical disability or impairment. It may also include people who are affected by the circumstances that they are living in, for example, experiencing domestic violence (this list is not exhaustive). An individual's level of



vulnerability to harm may vary over time depending on the circumstances they are in and their needs at that time.

## **The following six key principles underpin all adult safeguarding work:**

1. **Empowerment:** people being supported and encouraged to make their own decisions and give informed consent.
2. **Prevention:** it is better to take action before harm occurs.
3. **Proportionality:** the least intrusive response appropriate to the risk presented.
4. **Protection:** support and representation for those in greatest need.
5. **Partnership:** local solutions through services working with their communities – communities have a part to play in preventing, detecting and reporting neglect and abuse.
6. **Accountability:** accountability and transparency in safeguarding practice.

## **Making Safeguarding Personal (MSP)**

Making safeguarding personal means putting the person at the centre of everything we do during a safeguarding process from the very beginning to the very end. It means engaging the person in a conversation about how best to respond to their safeguarding situation in a way that enhances involvement, choice and control. As well as improving quality of life, well-being and safety.

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

This means we will:

- Listen to the person who is at risk
- Understand their wishes and feelings
- Take them seriously
- Treat them with respect
- Support them to feel safe
- Support them to make their own decisions
- Keep them informed and involved
- Tell them what will happen next

## **Capacity and the statutory principles:**

We make decisions every day, often without even realising, and may take this for granted. Some people can make every decision about their own lives. Some people can make some decisions and a small number of people cannot make any decisions. Being unable to make a decision is called “lacking capacity”. Where an adult is found to lack capacity to make a decision then any action taken, or any decision made for, or on their behalf, must be made in their best interests.

People must be assumed to have capacity to make their own decisions and must be given all practicable help before we treat them as not being able to make their own decisions.

To make a decision we need to:

- Understand information





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

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

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

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

The Mental Capacity Act 2005 sets out five statutory principles:

1. Assume that people can make decisions, unless it is proven that they cannot – if you have concerns about a person's level of understanding attending one of your events you should check this with them and if applicable people supporting them.
2. Give people as much support as they need to make decisions – you may be involved in this, you might need to think about the way you communicate or provide information, you may be asked your opinion.
3. The right to make unwise decisions if you understand the implications – a person may want to play a contact sport even though they are unsteady on their feet. If they understand the implications then consider how risks can be minimised so they do not miss out, for example by using protective sports equipment.
4. Best Interests - If someone is not able to make a decision, then the people helping them must only make decisions in their 'best interests'. This means that the decision must be what is best for the person, not for anyone else. If someone was making a decision on your behalf, you would want it to reflect the decision you would make if you were able to.
5. If someone is having a decision made for them, then find the least restrictive way of doing what needs to be done

It is not for an AFC Bournemouth employee to decide whether an Adult at Risk lacks capacity.

## **Types of Abuse:**

Abuse can take many forms and abusive behaviour can be assessed on a scale from poor practice, to bad practice to abuse. Abuse cannot be easily measured as an action alone. Its severity will partly be defined by the:

- Vulnerability of the victim and the power differential
- Nature and extent of the abuse
- Length of time it has been occurring
- Impact on the individual or group
- Risk of it being repeated or becoming increasingly serious



## **The Care Act 2014 recognises 10 categories of abuse in relation to adults at risk:**

- Physical Abuse
- Psychological or emotional abuse
- Sexual abuse.
- Neglect and acts of omission
- Self-neglect
- Financial or material abuse
- Discriminatory abuse
- Modern slavery
- Organisational abuse
- Domestic violence and abuse

## **Not included in the Care Act 2014 but also best practice principles:**

- Forced Marriage
- Honour Based Abuse -.
- Female Genital Mutilation
- Cyber Bullying
- Mate Crime
- Radicalisation

*Definitions, signs, and symptoms of abuse are contained within Appendix 2 of the policy document.*

Further information can also be found:

[Types and Indicators of abuse](#)

### **Consent:**

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

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, do not let the issue of consent get in the way of getting advice.

If the decision is to act without the adult's consent, then unless it is unsafe to do so, the adult should be informed that this is being done and of the reasons why. For example, where you believe there has been a serious crime committed or there is a threat to life, and you believe the person is unable to protect themselves.

### **AFC BOURNEMOUTH PROCEDURES:**

#### **Recruitment and Disclosure:**



The Club operates within best practice and safer recruitment guidelines to ensure we take all steps to prevent unsuitable individuals from working with, having access to or influence over adults at risk.

As part of the club's recruitment and selection process, all offers of work to positions which involve working with adults at risk are subject to the outcome of satisfactory Disclosure and Barring Service (DBS) criminal records check (CRC) at the level deemed suitable for the position offered and subject to appropriate references. The club adheres to the Premier League disclosure eligibility guidance document when completing DBS checks.

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 a satisfactory DBS has been received, the member of staff will not be permitted to work with adults at risk.

Should an individual's DBS Disclosure reveal any convictions the club will consider whether the nature of the offence/offences renders the person concerned unsuitable for working with adults at risk.

AFC Bournemouth is committed to providing equal opportunities to staff and therefore a positive DBS check will not necessarily result in a bar from work.

The Rehabilitation of Offenders Act 1974 and Protection from Freedoms Act 2012 will be considered in all cases before a final decision is made.

All new employees, workers or volunteers working with adults at risk at the club will be required to complete a Self-Declaration form before commencement of duties.

The club has a Safe Recruitment Policy which deals with all aspects of the safe recruitment of staff and the management of disclosures with content. This policy should be referred to and followed where any concerns are identified.

## **Staff Training:**

On commencement of role all staff are required to have a safeguarding Induction with the Head of Safeguarding (or Safeguarding Officer under the direction of the Head of Safeguarding) which will include familiarisation with the club's Policies, Procedures, Code of Conduct and individual's responsibilities around safeguarding. Staff are required to complete the PL safeguarding e-learning module before commencing their role or as part of the induction process.

In addition, the Club will deliver a targeted, accessible and effective training and development programme aligned with the role descriptors.

## **Risk assessment:**

Where an adult at risk is involved in a trip, activity or event, a risk assessment must take account of their vulnerabilities whilst in the Club's care. The risk assessment should set out what arrangements are in place for their care and supervision and how risks will be minimised. Activity leaders will be required to continually update risk assessments whilst leading such activities

## **MATCH DAY PROCEDURES**

The Club works tirelessly to provide the best facilities for our disabled supporters including Adults at Risk. The Club prides itself on being inclusive to all. We understand and



recognise that disabled supporters may need assistance when visiting Vitality Stadium to enjoy their experience. We offer reasonable adjustments based on individual needs.

Further information can be found: [AFCB Access Guide](#)

## **Searching adults at risk:**

To ensure the safety and security for all Club activities all adults at risk may be subject to the Club's search process. Adults at risk are asked to self-search as the preferred method; however, should the Club suspect that the adult at risk may be concealing a prohibited item, consent will be sought from the adult at risk and/or their carer before a Steward or Security member of the same sex being observed by a Supervisor searches the adult at risk.

## **Matchday photography:**

Adults at Risk attend games as spectators and may appear as part of the crowd on matchdays and be reproduced in official AFC Bournemouth promotional material and appear in the public domain. The Club's terms and conditions of ticket purchase and standard ground regulations state that images may be taken of fans within the crowd and used in promotional material. Ticket holders agree to these conditions when purchasing a ticket. Any queries on promotional material featuring an adult at risk should be addressed to the Head of Safeguarding.

## **COMMUNITY ACTIVITY AND ENGAGEMENT:**

### **Community Sports Trust (CST):**

Means the charity organisation affiliated to AFC Bournemouth that exists to achieve a positive impact in the communities that it operates in and in the lives of those that access their services.

AFC Bournemouth Community Sports Trust fully adopts the procedures and best practice guidance identified in the club's Safeguarding Adults at Risk and other related policies and those issued by the FA and Premier League with regard to safeguarding adults at risk.

The Community Sports Trust have clear protocols for managing complaints, concerns, incidents and allegations. They are required to report any significant incidents or allegations related to any part of their organisation, its workforce or activities, at the earliest opportunity to the Head of Safeguarding

### **Premier League Charitable Fund (PLCF):**

PLCF monitor and report on the overall impact of the charity's activity to demonstrate the value of football to communities and the value of the Premier League and our partner's investment.

<https://www.premierleague.com/communities/plcf>

### **The role of the Charity commission:**

The Charity Commission register and regulate charities in England and Wales, to ensure that the public can support charities with confidence.



In addition to statutory reporting to either the LADO or Police, the AFC Bournemouth Community Sports Trust are also responsible for reporting serious incidents to the Charity Commission.

Guidelines for reporting incidents can be found via the below link.

<https://www.gov.uk/guidance/how-to-report-a-serious-incident-in-your-charity#what-to-report>

## **GUIDELINES IN THE EVENT OF CONCERN**

### **DEALING WITH A DISCLOSURE:**

Although AFC Bournemouth is committed to doing the utmost to safeguard call from harm, there may be an occasion when concern is raised over the treatment of an adult at risk.

When an adult at risk discloses that they have been abused or is at risk of abuse, staff must ensure that the adult at risks immediate needs are met and prioritise their safety and protection from further abuse above all else.

If an adult at risk discloses any experience of abuse or neglect. Remember, it may have taken a great amount of courage for the person to tell you that something has happened and fear of not being believed can cause people not to tell.

How you react, what you say, and how you respond to the situation is crucial. The adult at risk may not understand that they are being or have been abused and might not realise the significance or severity of what they are telling you.

It may be the case that the disclosure is happening many months or even years after the abuse took place, one reason for the delay in disclosure may be the person they were afraid of has left the setting or organisation and they now feel safe to tell you.

### **All staff should remember the 5 safeguarding principles:**

- Recognise- recognising there is a concern, abuse, or risk of harm
- Respond- how you respond to the disclosure or concern
- Report- to Head of Safeguarding or safeguarding officer
- Record- Detail the concern via online platform 'MyConcern' or using the report form
- Refer- referral onto statutory agencies or other governing bodies

### **How to respond:**

- Accept what the person is saying – do not question the person or get them to justify what they are saying – reassure the person that you take what they have said seriously.
- Do not 'interview' the person; just listen carefully and calmly to what they are saying.
- Assure the person their concerns are taken seriously
- Listen carefully to what the person is saying. Stay calm. Get as clear a picture as possible.
- Reassure the person they will be involved in all decisions made about them, the situation and who will need to know



- Explain the duty for staff to pass this information on to the Head of Safeguarding – The adult at risk will need to understand that the information about the risk will need to be shared, but that it will only be shared with other people who need to know, such as those in safeguarding roles.
- Have, readily available, all the contact numbers for the Emergency Services, the Head of Safeguarding and the Designated Safeguarding Officers which can assist in an emergency or urgent situation if required.

## **Staff should not:**

- Make ambitious promises or promise confidentiality.
- Seek details beyond those that the adult at risk disclosing willingly discloses.
- Document the conversation while the person is disclosing. This should be done as soon as possible after the disclosure has been made.
- Ask leading questions.
- Name behaviour and/or body parts in language different to that used by the adult at risk disclosing.
- Give the impression that the adult at risk disclosing is to blame.
- Approach the alleged abuser or person whose conduct there are concerns about.

A disclosure is not the only way that staff may be made aware of a safeguarding concern. Staff should immediately contact the Head of Safeguarding (or a Safeguarding Officer in their absence) if they witness an incident or come upon information that causes concern or puts an adult at risk of harm.

Where necessary an internal safeguarding case management meeting will be convened to review, and risk assess the identified concern. This should always involve the Head of Safeguarding, a Safeguarding Officer involved in the activity and if need be, a Senior Manager.

## **RECORDING & REPORTING DISCLOSURES AND OTHER SAFEGUARDING CONCERNS:**

All safeguarding concerns and disclosures must always be taken seriously, and every effort should be made to ensure that confidentiality is maintained for all concerned when dealing with a disclosure or a safeguarding concern. It is important to ensure that information is handled and shared on a 'need to know basis' only. Those who need to know are those who have a role to play in protecting the adult at risk and others who may be at risk, for example:

- Staff with operational responsibility for safeguarding, for example the Head of Safeguarding, Safeguarding Officers and the Senior Safeguarding Lead.
- Statutory authorities (Police and Local Authorities)
- Football authorities (The FA and Premier League)

Any member of staff may make a referral themselves directly to statutory and/or football authorities, particularly if they are concerned about an adult at risks immediate safety, if they are having difficulty contacting the clubs designated safeguarding staff or if they are concerned that a disclosure or information about a safeguarding concern has not been acted upon appropriately.



The Head of Safeguarding (or a Safeguarding Officer in their absence) must be notified immediately after contacting a statutory authority or emergency services.

It is vital that clear and concise notes are made at the time of the concern or soon after a disclosure is made to support the completion of a more detailed record later.

The person raising the concern should complete the club's Safeguarding Concern Reporting Form (Appendix 4) or report the concern for those who have access using the club's MyConcern Safeguarding Recording database.

If the club referral form cannot be accessed when dealing with a disclosure or safeguarding concern, a written record should include the following information wherever possible:

- The date and time of the incident or disclosure, parties involved i.e. victim(s), the person(s) whose conduct there are concerns about, any witnesses, person(s) reporting the concern, person(s) to whom the concern was reported.
- Factual information. Staff might convey their intuitive thoughts, but these should be recognised as such and should not form part of the record.
- In the case of bruises or observed injuries, a body map (a drawing of a body outline, upon which the location of bruises/injuries can be indicated) can be completed.
- The time and date of referring the information and to whom the information was referred.

Such records must be signed and dated by the individual recording the information. If more information is recalled at a later date, this should be added as an addendum. The original record must not be changed.

Staff need to clearly record and document their decision-making process. Defensible decision-making means recording a clear rationale for all the decisions made and the discussions that led to the decision(s). Decisions in practice should withstand 'hindsight scrutiny' should something go wrong.

Staff should be aware that such records may be used as evidence for investigations and inquiries, court proceedings, disciplinary procedures and/or quality assurance purposes.

Dealing with a disclosure or safeguarding concern may have an impact on the well-being of those involved. It is important that anyone affected seeks help if they feel that they need support

An adult at risk 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 staff should be present.**

## MY CONCERN

The My Concern safeguarding software is an electronic recording system which enables members of staff in educational and sport establishments or other trusted users to record and update safeguarding concerns. The system allows Designated Safeguarding Leads such as the Head of Safeguarding and Designated Safeguarding Officers to case manage incidents, produce data reports, and access all relevant data for their establishment.





## STAFF CONDUCT

### Good practice and staff conduct includes:

To ensure adults at risk have the most positive and safe experience when engaging with the Club, all employees, workers, consultants, agency staff and volunteers should adhere to the following principles and action (to ensure they role model positive behaviours and so reduce the risk of potential allegations, abuse and neglect occurring):

- treating all adults with respect and in accordance with their needs
- setting a good example conducting themselves appropriately
- encouraging others to be positive and respectful
- involving the adults at risk in any decision that may affect them
- being a good listener
- working in an open environment and within sight and hearing of others
- asking an individual's permission before physical contact, such as physical support or first aid
- be alert to changes in behaviour and signs of abuse, neglect or exploitation
- recognising that challenging behaviour may be a sign of abuse
- recognising that personal or family circumstance or lifestyle may add to vulnerability
- reporting concerns
- following the Clubs policy with regard to personal relationships with participants, including virtual communication
- While in a position of trust, inappropriate behaviour towards adults at risk is unacceptable and likely to be unlawful (Abuse of Position of Trust)
- Staff are encouraged to act responsible and help adults at risk keep themselves safe

### Poor Practice:

Poor practice does not necessary imply intentional harm is taking place, but it can be a determining factor in escalating risk-taking behaviours which may cause harm. Any of the following can be considered poor practice. This list is not exhaustive.

- Lack of professional boundaries
- Connected on personal social media accounts
- Contact during unsociable hours (late at night)
- Sharing personal details such as home address
- Taking or inviting adults at risk to home address
- Insufficient care to avoid accident or injuries
- Unnecessary risk taking
- Not complying with policies and procedures





## **MANAGING ALLEGATIONS AGAINST EMPLOYEES, CONSULTANTS, AGENCY STAFF AND VOLUNTEERS:**

Should a concern arise about an employee, worker, consultant, agency staff or volunteer's conduct in relation to an adult at risk, this should be reported to the club's Head of Safeguarding (or a Safeguarding Officer in their absence) who will take such steps as considered necessary to ensure the safety of the adult at risk in question and any other person who may be at risk.

The club's Managing Allegations Policy & Procedures should be followed where an allegation or concern is raised from any source that an employee or volunteer has:

- Behaved in a way that has, or may have, harmed an adult at risk.
- Possibly committed a criminal offence against or related to an adult at risk.
- Behaved towards an adult at risk in a way that indicates they may pose a risk of harm towards that person or other adults at risk. This can include behaviour in their personal life that raises safeguarding concerns.

When managing an allegation against an employee, worker, consultant, agency staff or volunteer the nature of the concern will dictate the level of investigation required and who is informed.

The Head of Safeguarding (or a Safeguarding Officer in their absence), in the first instance will contact the Senior Safeguarding Lead. There may be a requirement for the following agencies to be notified:

- The Football authorities (The FA and Premier League)
- Adult Social Care Manager and/or the Police (if required must be within 24 hours)
- The club will consider notifying a parent/carer of the adult at risk subject to appropriate consent, following advice from statutory authorities.

If the concern raised relates to the conduct of the Head of Safeguarding or the Senior Safeguarding Lead (Board Member) the matter should be referred to another Senior Member of staff.

### **Low Level Concerns in relation to staff:**

AFC Bournemouth aims to create and embed a culture of transparency and confidence within our Club to enable all concerns about an adult's behaviour (including those below the referral threshold) that are below the expected standards and values of our organisation and does not meet the organisational expectations.

A low-level concern may be no more than a nagging doubt and the aim of the policy is to support a culture that enables staff to feel confident to report any concern, no matter how small.

*The full policy can be provided on request from the Head of Safeguarding.*



## **Notifying the Football Association and the Premier League of Allegations:**

The FA sets the safeguarding policy and regulatory framework across the game. Their regulatory framework enables them to take action against any affiliated person or organisation that breaches their safeguarding regulations and policies.

The FA have produced a threshold document which has been developed to assist Professional Clubs and CCO's when in receipt of safeguarding concern(s) about an individual's behaviour towards a child or adult at risk. It provides guidance on how to respond and when to alert the Football authorities.

The threshold for making a safeguarding referral to The FA is met when:

- Any information is received by a Professional Club or CCO regarding the abuse, harm or exploitation of a Child or Adult at Risk by an individual who is or has previously been involved in football related activity in any capacity. This includes any current, prospective or a former employee, volunteer, consultant player (including academy players as defined in the Premier League and EFL Youth Development Rules), third party contractor and casual worker of any professional Club or CCO whether the evidence relates to their performance, a recent or non-recent allegation. This also includes any referrals made to external agencies.
- Any information received by a Professional Club or CCO regarding an allegation of a sexual offence of any nature, against anyone (irrespective of whether that a person is a child or adult at risk), by an individual who is or has previously been involved in football related activity in any capacity. This includes any current, prospective or a former employee, volunteer, consultant player (including academy players as defined in the Premier League and EFL Youth Development Rules), third party contractor and casual worker of any professional Club or CCO whether the evidence relates to their performance, a recent or non-recent allegation. This also includes any referrals made to external agencies.
- A third (or subsequent) incident or allegation of low-level concerns.

All such matters must be referred to the Premier League and the Football Association as soon as reasonably practicable. Where a referral is made to an 'external agency' (such as the police, the local authority or the DBS), this must be referred to the football authorities within 24 hours, along with all relevant information and evidence provided to the external agency in respect of the same.

Failure to report a concern about the welfare of a child/adult at risk may result in action taken by The FA under its Disciplinary Regulations and/or the Premier League.

## **Escalating a concern or resolving professional differences:**

Disagreements over the handling of concerns can impact negatively on positive working relationships and consequently the ability to safeguard and promote the welfare of adults at risk.



At no time should professional disagreement detract from ensuring that an adult at risk is safeguarded. Their welfare and safety must remain paramount throughout. If the staff member cannot resolve the difference themselves, they should escalate to their Manager/ Safeguarding Officer, who may escalate to a more senior level.

If the club and agency involved is unable to resolve the issue themselves, it may be necessary to escalate for a multi-agency discussion.

## **Whistleblowing:**

Whistleblowing is the term used when a worker passes on information concerning wrongdoing. The wrongdoing will typically (although not necessarily) be something they have witnessed at work.

A whistleblower is protected by law and should not be treated unfairly or lose their job because they 'blow the whistle'.

Concern can be raised at any time about an incident that happened in the past, is happening now, believed will happen in the near future.

*The club Whistleblowing Policy should be referred to and followed where any concerns arise.*

## **Non-recent abuse, Incidents and poor practice:**

Where non-recent incidents, poor practice or abuse are received concerning staff who no longer work at the club, they should immediately be referred to the Head of Safeguarding for review.

Where required the Head of Safeguarding will be responsible for referring these matters to Statutory Authorities (Police/Children's Social Care or LADO) even if the alleged perpetrator of the abuse is believed to be deceased.

When matters are referred to Statutory Authorities, the Head of Safeguarding will also notify the football authorities (The FA and Premier League)

Following the publication of the Sheldon review below is a link to the FA website which provides support and reporting mechanisms: [FA Support](#)

## **INFORMATION SHARING AND DATA PROTECTION**

### **Data Protection:**

In line with the Data Protection Act 2018 and the guidance laid out in the General Data Protection Regulation 2018, the club will maintain confidentiality of all;

- data collected (in writing or electronically) relating to adults at risk,
- information and documentation relating to safeguarding allegations, concerns and incidents, and
- information and documentation relating to recruitment and selection procedures in accordance with relevant data protection legislation.



## **Confidentiality & Information Sharing:**

Information sharing is essential for effective safeguarding and promoting the welfare of adults at risk and protecting them from harm, neglect, and exploitation. It is a key factor identified in many serious case reviews (SCRs), where poor information sharing has resulted in missed opportunities to take action that keeps adults at risk safe.

The advice for all staff at AFC Bournemouth is that no personal assurance of confidentiality can be given to an adult at risk if a concern is raised or an allegation made. Staff should routinely explain what information is going to be shared with other people or organisations wherever possible however it is recognised that this may not always be possible.

Difficulties in working with the principles of maintaining confidentiality should not lead to a failure to take action to protect an adult at risk from harm.

Confidentiality must not be confused with secrecy, that is, the need to protect the management interests of the club should not override the need to protect the adult at risk. Decisions about what information is shared and with who will be taken on a case-by-case basis. The sharing of information should be:

- Necessary for the purpose it is being shared.
- Shared only with those who have a need for it.
- Be accurate and up to date.
- Be shared in a timely fashion.
- Be shared accurately.
- Be shared securely.

Information sharing decisions should be properly recorded along with the rationale behind it.

There are actions which staff have to and are obliged to take once we are aware of a problem. Staff having any concerns about confidentiality, information sharing or any other safeguarding issue in relation to an adult at risk should seek advice from the Head of Safeguarding. The welfare of the adult at risk at all times is paramount.  
*See section re consent.*

## **Storage and Retention of Records:**

All records and information relating to disclosures and concerns in respect of adults at risk is sensitive and confidential and will be kept securely with paper records kept in a secure filing cabinet (i.e. locked at all times) and accessible through the Head of Safeguarding or nominated Safeguarding Officer.

Disclosure information and records in relation to adults at risk will be retained by the club in accordance with statutory guidance.



## HEAD OF SAFEGUARDING AND SAFEGUARDING CONTACTS

### **AFC Bournemouth Safeguarding Team**

[safeguarding@afcb.co.uk](mailto:safeguarding@afcb.co.uk)

**Head of Safeguarding** - Meredith Hack - 07554 446446

[meredith.hack@afcb.co.uk](mailto:meredith.hack@afcb.co.uk)

### **Designated Safeguarding Officers**

**Academy** - Academy Safeguarding Officer - Zoe Jarvis- 07765400894

[zoe.jarvis@afcb.co.uk](mailto:zoe.jarvis@afcb.co.uk)

**Community Sports Trust**- Safeguarding Manager - Natasha Bartlett - 07393462169

[tash.bartlett@afcb.co.uk](mailto:tash.bartlett@afcb.co.uk)



## EXTERNAL CONTACTS AND RESOURCES

The Police 101 or (in an emergency) – 999

### **Bournemouth, Christchurch and Poole Council (BCP) Services**

Bournemouth Adult Social Care (Care Direct) – 01202 123654  
[asc.contactcentre@bcpcouncil.gov.uk](mailto:asc.contactcentre@bcpcouncil.gov.uk)

Emergency Duty Service – 0300 123 9895

<http://www.bournemouth.gov.uk/AdultSocialCare/AdultSocialCare.aspx>

### **Dorset Council Services**

Dorset Direct – Adult Social Care – 01305 221016

Emergency Duty Service – 01305 221016 or 01305 221000

<https://www.dorsetcouncil.gov.uk/-/adult-access>

### **Premier League Safeguarding Team**

**Tel:** 0207 864 9000

Email: [safeguarding@premierleague.com](mailto:safeguarding@premierleague.com)

Online: <https://www.premierleague.com/safeguarding>

### **The Football Association/NSPCC**

Safeguarding Children & Vulnerable Adults Helpline

Tel: 0808 800 5000

Text phone for Deaf Users. Tel 0800 056 0566

**STARS (Sexual Trauma and Recovery Service)** - Is a pan-Dorset charity that offers one to one support, free of charge, for anyone of any age or gender who lives, works or studies in Dorset and has experienced any form of sexual violence at any time in their life.

Support Line Tel 01202 308855

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

**The Shores** (Dorset Sexual Assault Referral Centre – SARC) – Provides a comprehensive service to men, women and children who have been raped or sexually assaulted

Tel 0800 970 9954

<http://www.the-shores.org.uk/>

**Dorset For You** – Domestic abuse and violence – Where to get help

<https://www.dorsetforyou.com/dvahelp>

**Ann Craft Trust** – Safeguarding adults advice helpline 0115 951 5400

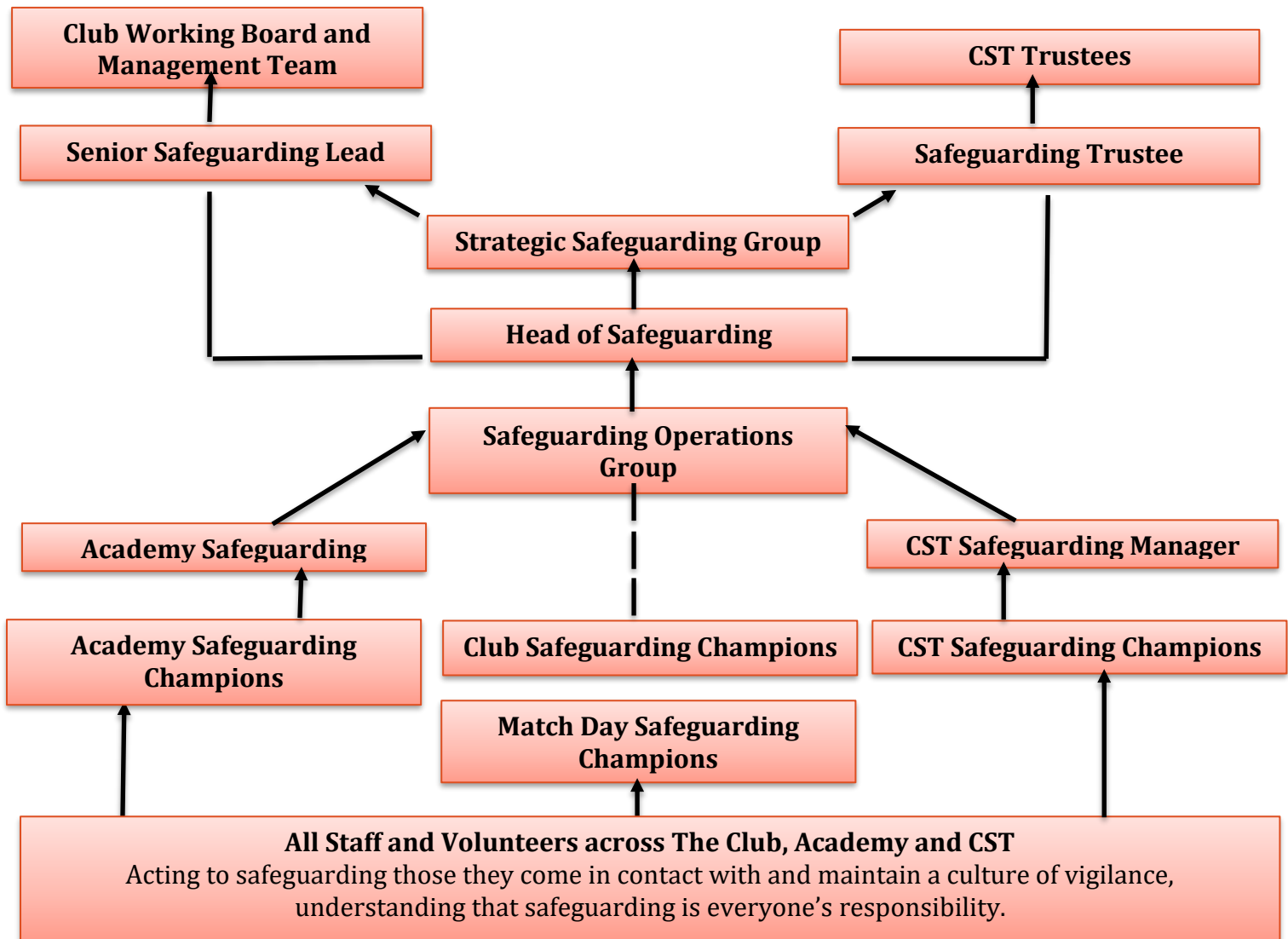
<https://www.anncrafttrust.org>

**Mind**- provides advice and support to empower anyone experiencing a mental health problem.

<https://www.mind.org.uk/> Call Infoline: 0300 123 3393 Mon-Fri 9am-6pm



## Appendix 1: AFC Bournemouth Safeguarding Organisational Structure Chart





## Appendix 2 - Recognising abuse, poor practice and other safeguarding concerns:

**Bullying:** Repeated behaviour intended to intimidate or upset someone and/or make them feel uncomfortable or unsafe, for example, name calling, exclusion or isolation, spreading rumours, embarrassing someone in public or in front of their peers, threatening to cause harm, physically hurting someone or damaging their possessions.

**Cyberbullying:** The use of technology to harass, threaten, embarrass, humiliate, spread rumours or target another person. By definition, it occurs among Children. When an adult is the victim, it may meet the definition of cyber harassment or cyberstalking.

**Discriminatory Abuse:** Abuse or bullying because of discrimination occurs when motivated by a prejudice against certain people or groups of people. This may be because of an individual's age, disability, gender reassignment, marriage or civil partnership status, pregnancy and maternity, race, religion and belief, sex or sexual orientation' Actions may include unfair or less favourable treatment, culturally insensitive comments, insults and 'banter'

**Domestic Abuse:** Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged sixteen or over, who are or have been intimate with partners or family members regardless of gender or sexuality. This can encompass, but is not limited to: psychological, physical, sexual, financial, emotional abuse and so called 'honour' based violence.

**Emotional abuse:** Any act or other treatment which may cause emotional damage and undermine a person's sense of wellbeing, including persistent criticism, denigration or putting unrealistic expectations on adults at risk and, isolation, verbal assault, humiliation, blaming, controlling, intimidation or use of threats.

**Exploitation:** A common feature in county lines drug supply is the exploitation of young and vulnerable people. The dealers will frequently target children and adults - often with mental health or addiction problems - to act as drug runners or move cash so they can stay under the radar of law enforcement. Cuckooing is the practice where people take over a vulnerable person's home and use the property to facilitate exploitation.

**Extremism and Radicalisation:** The process by which a person comes to support terrorism and forms of extremism leading to terrorism. Anybody from any background can become radicalised. The grooming of adults at risk for the purposes of involvement in extremist activity is a serious safeguarding issue.

**Female Genital Mutilation (FGM):** Involves procedures that intentionally alter or injure female genital organs for non-medical reasons. The procedure has no health benefits for girls and women. The Female Genital Mutilation Act makes it illegal to practice FGM in the UK or to take women and girls who are British nationals or permanent residents of the UK abroad for FGM whether or not it is unlawful in another country.

**Financial or material abuse:** Stealing from a vulnerable person, using them for financial gain, putting pressure on them about wills, property, inheritance or financial transactions, misusing or stealing their property, possessions or benefits. It may include depriving a person access to their money, property or assets. Financial abuse is something more usually related to adults but where professional (and future professional) footballers are concerned, this is a significant area of risk.





**Forced marriage:** is when an individual may face physical pressure to marry (for example, threats, physical violence or sexual violence) or emotional and psychological pressure (for example, made to feel like they are bringing shame on the family). A Forced Marriage is different from an arranged marriage, which is a marriage entered into freely by both parties, although their families take a leading role in the choice of partner.

**Gambling:** The betting or staking of something of value, with consciousness of risk and hope of gain, on the outcome of a game, a contest, or an uncertain event whose result may be determined by chance or accident or have an unexpected result by reason of the bettor's miscalculation.

NHS: <https://www.nhs.uk/live-well/addiction-support/gambling-addiction/>

**Grooming:** The process of developing a relationship with and the trust of an individual, and sometimes their family, to exploit, abuse or traffic them. Grooming can happen both online and in person.

**Honour Based Abuse:** Honour-based abuse is a crime or incident committed to protect or defend the 'honour' of a family or community.

**Mate Crime:** is defined as the exploitation, abuse or theft from any person at risk from those they consider to be their friends.

**Mental health:** Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make healthy choices. One in four adults experiences at least one diagnosable mental health problem in any given year. People in all walks of life can be affected and at any point in their lives.

NHS: <https://www.england.nhs.uk/mental-health/adults/>

**Modern slavery:** Encompasses slavery, human trafficking, forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.

**Neglect:** Ongoing failure to meet the basic needs of adults at risk. Neglect may involve failing to provide adequate food or shelter including exclusion from home or abandonment, failing to protect them from physical and emotional harm or danger or failing to ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, basic emotional needs.

In an activity setting, it may involve failing to ensure that Adults at Risk are safe and adequately supervised or exposing them to unnecessary risks.

**Neglect/acts of omission:** Ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services or the withholding of the necessities of life such as medication, adequate nutrition and heating.

**Organisational abuse:** Neglect and poor care practice within an institution or specific care setting such as a hospital or care home, or where care is provided within an adult at risk's own home. This may range from one-off incidents to ongoing ill-treatment. It can be



through neglect or poor professional practice as a result of the structure, policies, processes or practices in place.

**Physical Abuse:** Any deliberate act causing injury or trauma to another person, for example, hitting, slapping, pushing, kicking, burning, giving a person medicine that they do not need and/ or that may harm them or application of inappropriate restraint measures.

**Self-neglect:** Neglecting to care for one's personal hygiene, health or surroundings, including behaviour such as hoarding.

**Sexual Abuse:** Any act which results in the exploitation of adults at risk, whether with their consent or not, for the purpose of sexual or erotic gratification. This includes non-contact activities, such as indecent exposure, involving adults at risk in witnessing sexual acts, looking at sexual images/pornography or grooming them in preparation for abuse (including via the internet). It is unacceptable for any member of Staff to abuse their relationship of trust for sexual gratification

## Signs and symptoms of Abuse:

### Physical Abuse Indicators:

- Injuries that are not explained satisfactorily or the person exhibiting 'untypical' self-harm
- Unexplained bruising to any part of the body, particularly collections of bruises which form a pattern which may correspond to the shape of an object or a person's hand
- Unexplained burns especially on 'unlikely' areas of the body, soles of the feet or palms of the hand
- Immersion burns. Rope burns and burns from an electrical appliance
- Unexplained fractures to any part of the body
- Unexplained cuts or scratches to mouth, lips, gums, eyes, or genitalia
- Medical problems that go unattended
- Person flinches at physical contact or indicates that someone has threatened them with physical harm
- Sudden or unexplained urinary or faecal incontinence
- Reluctance to undress or uncover parts of the body
- Person may appear afraid of or 'anxiously' try to avoid certain members of staff, family members or other people they know
- Injuries at different stages of healing
- Unexplained loss of hair in clumps

### Sexual Abuse Indicators:

- Person discloses fully or partially that sexual abuse is occurring or has occurred.
- Person has urinary tract infections or sexually transmitted diseases that are not otherwise explained
- Person appears unusually subdued, withdrawn, or has poor concentration
- Person appears reluctant to be alone with a person known to them
- Person has unusual difficulty in walking or sitting



- Person experiences pain, itching or bleeding in genital or anal area
- Bruising to thighs or upper arms
- Bites on various parts of the body
- Person exhibits significant change in sexual behaviour or outlook
- Persons underclothing is torn, stained, or bloody
- A woman, who lacks the capacity to consent to sexual intercourse becomes pregnant

## **Psychological Abuse Indicators:**

- Untypical ambivalence, deference, passivity, resignation
- Person appears anxious, withdrawn or fearful, especially in the presence of specific people
- Person appears to have a poor opinion of themselves
- Person appears to lack the opportunity to make choices or have adequate privacy
- Untypical changes in behaviour or routines of daily living
- Person appears isolated and deprived of social contact
- Person is unable to maintain eye contact having previously been able to

## **Financial Abuse Indicators:**

- General lack of money especially soon after benefits are claimed
- Person lacks belongings or services they can clearly afford
- Inadequately explained fall in living standards
- Inadequately explained withdrawals from bank accounts
- Inadequately explained inability to pay bills
- Person does not appear to possess items which are known to have been purchased
- Recent acquaintances expressing interest in the person or their money
- Inadequately maintained financial systems, when others are managing a person's money, including a failure to produce receipts for major items
- Unexplained change in appointee ship or agent

## **Neglect Indicators:**

- Person lives in accommodation which falls below minimum practical standards
- Person has inadequate heating and/or lighting
- Person's physical appearance or condition is poor
- Person appears to be malnourished or dehydrated
- Person is observed to be left in wet clothing
- Failure to obtain health services when the person is ill
- Person does not appear to be taking the prescribed medication
- Callers/visitors refused access to the person
- Person is exposed to unacceptable risks



## **Appendix 3 - Responding to Safeguarding incidents, additional guidance:**

### **Preserving the evidence:**

Your first concern is the safety and the welfare of the abused person. However, your efforts to preserve evidence may be vital.

In all cases, but especially when police involvement is required, preservation of evidence is crucial if the police investigation is to be effective. What you do or do not do in the time whilst you are waiting for the police to arrive may make all the difference.

The following checklist aims to help you to ensure that vital evidence is not destroyed.

### **In situations of physical and /or sexual assault:**

- In the case of a person who has been physically abused who wishes to show you an injury, only observe what they consent to show you and what is appropriate
- Do not touch what you do not have to. Wherever possible leave things as they are. Do not clean up, do not wash anything or in any way remove fibres, blood etc. If you do have to handle anything at the scene keep this to a minimum
- Do not touch any weapons unless they are handed directly to you. If this happens, keep handling to a minimum. Place the items/weapons in a clean dry place until the police collect them
- Preserve anything that was used to comfort the abused person, for example a blanket
- Secure the room. Do not allow anyone to enter unless strictly necessary to support you or the abused person and/or the alleged perpetrator, until the police arrive
- The Police may organise a medical examination urgently

### **Prior to the arrival of the police and medical examination:**

- Ensure that no one has physical contact with both the abused person and the alleged perpetrator as cross-contamination can destroy evidence. It is acknowledged that if you are working alone in the situation, you may have to comfort both the abused person and the alleged perpetrator e.g. where the alleged perpetrator is also an AFC Bournemouth service-user. You need to be aware that cross-contamination can easily occur.
- Preserve any bloodied items
- Encourage the victim not to shower
- Encourage the victim not to change clothing
- Even when the victim says they do not want police involvement, preserve the items anyway as they may change their mind later
- Encourage the person not to eat or drink if there is a possibility that evidence may be obtained from the mouth



## **Methods of Preservation:**

- For most things use clean brown paper, if available, or a clean brown paper bag or a clean envelope. If you use an envelope, do not lick it to seal. Avoid using plastic bags as they can produce moisture
- For liquids use clean glassware
- Do not handle items unless necessary to move and make safe. If there are latex gloves available, use them

It is acknowledged that completion of all the above tasks may not be possible in a traumatic situation. You are urged to do the best that you can

## **Ensuring the individual is in or is moved to a place of safety:**

It is essential that, whatever the nature of the suspected abuse, the adult at risk is separated from the person who is or is thought to be producing the threat. It is important that the disruption to the life of the victim is kept to a minimum, therefore, if it is possible for the alleged perpetrator to leave the scene, this should be the preferred option. However, if it is not achievable, an alternative place of safety should be sought as the immediate safety of the victim is the highest priority.

## **Role of staff supporting the alleged victim:**

Members of staff involved in supporting the alleged victim have a key role in making sure the procedures are followed and that the victim is properly advised and supported. If several staff are involved, it may be convenient for one person to take the lead. This is entirely a matter for the staff and Head of Safeguarding or the Safeguarding Officer to decide in the light of the individual circumstances.

The role of the staff supporting the alleged victim includes the following:

- Ensuring the continued safety of and support the abused person
- Liaising with immediate colleagues who have been involved to gather all the available information together
- Ensuring that evidence has been preserved
- Collating and completing all written material relating to the incident
- Reporting the matter to the Head of Safeguarding or Safeguarding Officer at the earliest opportunity



## Appendix 4 – AFC Bournemouth Safeguarding Concern Report Form and flow chart:

### Safeguarding Children & Adult at Risk Incident Report

The form should be used to accurately record disclosure of a safeguarding incident and the initial action taken. Radicalisation in relation to terrorism is also a Safeguarding issue.

<p><b>Time &amp; Date Incident Form completed:</b></p> <p><b>Name of person completing Form:</b></p> <p><b>Contact Details:</b></p>	
<p><b>Time, day and date that incident occurred:</b></p> <p><b>Location of the Incident:</b></p> <p><b>Relationship of Vulnerable Person to AFC Bournemouth.</b></p> <p><b>Is the incident racially motivated or discriminatory?</b></p>	<p><b>Type of incident:</b></p> <p><input type="checkbox"/> Verbal abuse</p> <p><input type="checkbox"/> Sexual abuse including CSE</p> <p><input type="checkbox"/> Physical abuse including domestic abuse</p> <p><input type="checkbox"/> Neglect</p> <p><input type="checkbox"/> Emotional abuse or bullying</p> <p><input type="checkbox"/> Financial abuse or theft</p> <p><input type="checkbox"/> PREVENT (<i>terrorism or radicalisation</i>)</p> <p><input type="checkbox"/> Vulnerable person taken to hospital</p> <p><input type="checkbox"/> Poor Practice</p> <p><input type="checkbox"/> Other (<i>specify e.g. accident</i>)</p>
<p><b>Personal details of vulnerable person:</b></p> <p><b>Title Mr/ Mrs/ Miss/ Ms/ Other (<i>specify</i>):</b></p> <p><b>Full Name:</b></p> <p><b>Age &amp; Date of Birth:</b></p> <p><b>Gender:</b></p> <p><b>Ethnicity:</b></p> <p><b>Any known disability?</b></p> <p><b>Address &amp; Contact details:</b></p> <p><b>Parent/Carers name &amp; contact details:</b></p>	<p><b>Details of person reporting the incident:</b></p> <p><b>Title Mr/ Mrs/ Miss/ Ms/ Other (<i>specify</i>):</b></p> <p><b>Full Name:</b></p> <p><b>Age &amp; Date of Birth:</b></p> <p><b>Gender:</b></p> <p><b>Ethnicity:</b></p> <p><b>Relationship to Injured party:</b></p> <p><b>Address &amp; Contact details:</b></p>



<p><b>Personal details of the person causing concern:</b></p> <p><b>Title</b> Mr/ Mrs/ Miss/ Ms/ Other (<i>specify</i>):</p> <p><b>Full Name:</b></p> <p><b>Age &amp; Date of Birth:</b></p> <p><b>Gender:</b></p> <p><b>Ethnicity:</b></p> <p><b>Any known disability?</b></p> <p><b>Address &amp; Contact details:</b></p> <p><b>Parent/Carers name &amp; contact details:</b></p> <p><b>Relationship of person to AFC Bournemouth.</b></p>	
<p><b>Please indicate nature and position of any injury:</b></p>	<p><b>Guidance:</b></p> <p><i>If physical abuse has taken place, you may observe visible bruises and marks but do not ask a vulnerable person to remove or adjust clothing to observe them.</i></p>
<p><b>Please record details of who assisted the vulnerable person and what initial actions were taken to secure their immediate comfort and safety:</b></p>	<p><b>Guidance:</b></p> <p><i>Remember to use your 'Safeguarding quick reference guide for those working within AFC Bournemouth Football Club'.</i></p> <p><i><b>If notified of a possible sexual assault that has taken place within the last 7 days, you must notify the Police at the time you are advised; as there may still be recoverable forensic evidence.</b></i></p>

<p><b>Detailed account of incident:</b></p> <p><b>Guidance:</b></p> <p><i>Once an entry has been made it must not be altered or deleted, additional information can be recorded chronologically to clarify previous errors and omissions.</i></p> <p><i>Make careful notes of what is actually said by the person making the disclosure, record dates, times and events. Sign and date your notes and report a detailed account of the facts to your Safeguarding Officer or to your Head of Safeguarding. Keep it Factual!</i></p> <p><i>Please record all known details of any person subject of an allegation and their connection with the injured party and AFC Bournemouth. If the subject of the allegation is aware that this incident has been reported can you take steps to prevent evidence being destroyed such as social media / CCTV?</i></p>
--



*If the subject of the allegation is unknown please record a full description and details of social media activity, places frequented and associates.*

Please provide names and contact details of any witnesses to the incident:

Internal Club Safeguarding Notifications made:

Please record name and contact details of person advised; and day, date, time, method of contact; and guidance received.

External Agencies Contacted:

*You can make an immediate referral to a statutory agency if you are concerned about a vulnerable person's immediate safety. You should obtain the consent of a parent/carer in cases involving a child before doing so, unless that person is implicated. The consent of a vulnerable adult should normally be obtained prior to a referral being made. If consent is an issue please contact your safeguarding officer or head of safeguarding immediately.*

Please record day, date, time and method of referral; and the name and contact details of any person(s) contacted; together with any connecting reference numbers.

- Police (101 non-emergency, 999 emergency)
- Local Social Services
- Other: (e.g. NSPCC 24hour help line 0808 800 5000)



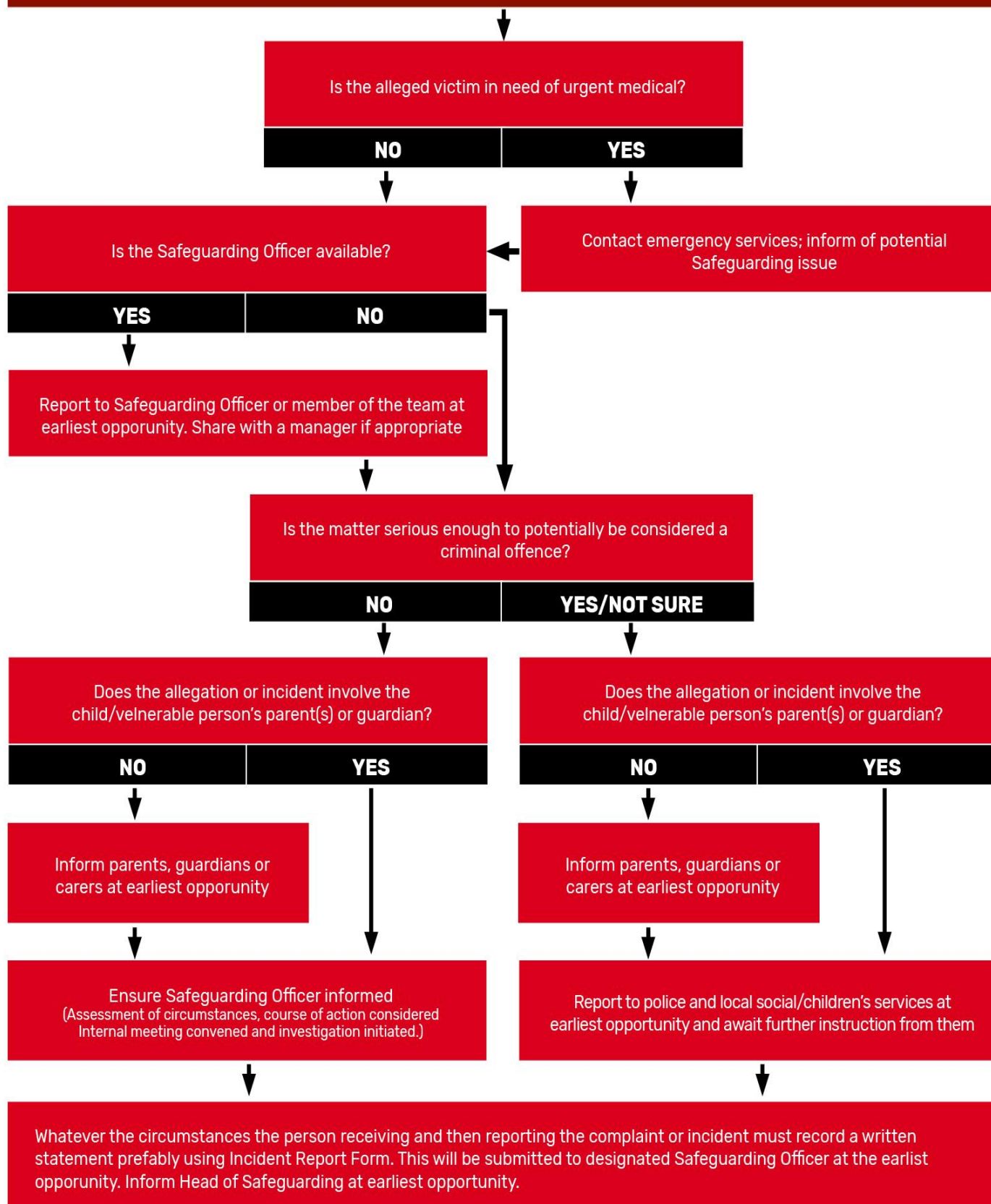
## Responding to a concern an incident or allegation

The flowchart presented below, details the immediate response to an incident or concern involving a child or other vulnerable person.

A child or other vulnerable person\* has disclosed concerning information to you OR you have witnessed or had reported to you an incident or complaint involving a child or other vulnerable person\*, which may be considered abuse or poor practice.

\*It is essential when considering an incident or concerns involving an adult who may be vulnerable to obtain the consent of that adult before referring the matter to a statutory agency, unless there is an immediate risk of harm.

**STAY CALM / REASSURE / TAKE SERIOUSLY / NO PROMISES / FEW QUESTIONS / FOLLOW GUIDE**





## **Appendix 5 - Other Applicable Club Policies:**

- Anti-Bullying Policy.
- Code of Ethics, Conduct & Behaviour.
- Data Protection & Handling Policy.
- Disciplinary Policy and Procedures.
- Equality & Promoting Diversity Policy.
- Health & Safety Policy.
- Low Level Concerns Policy
- Modern Slavery & Trafficking Policy Statement.
- Prevent Policy.
- Recruitment of Ex-Offenders Policy.
- Safeguarding Children Policy and Procedures.
- Safe Recruitment Policy and Procedures.
- IT, Social Media & Images Policy.
- Travel, Trips and Tournaments Policy and Guidance.
- Whistleblowing Policy.

## **Relevant Legislation/Regulations:**

- Achieving Best Evidence 2011.
- Care Act 2014.
- Care Standards Act 2000.
- Counter Terrorism & Security Act 2015.
- Data Protection Act 2018 – (General Data Protection Regulation 2018)
- Dorset, Bournemouth, Christchurch, and Poole Safeguarding Adults Procedures.
- Equality Act 2010.
- FA Safeguarding Concerns in the Professional Game, Referral and Threshold Document
- Human Rights Act 1998.
- Making Safeguarding Personal 2014.
- Mental Capacity Act 2005.
- Modern Slavery Act 2015.
- Premier League Guidance for Safer Working Practice.
- Premier League Safeguarding Rules.
- Protection of Freedoms Act 2012.
- Protection of Vulnerable Adults List 2004.
- Sex Offenders Act 1997.
- Sexual Offences Act 2003.
- Safeguarding Vulnerable Groups Act 2006.

Please note that these lists are not exhaustive.