



**ACTIVE
HUMBER**

SAFEGUARDING ADULTS POLICY AND PROCEDURES

Date of review	November 2025
Date of next review	December 2026
Policy owner / Lead member of staff	Tony Forrester
Policy area	<i>Safeguarding</i>

Safeguarding Team

Lead Safeguarding Officer:

Tony Forrester - Head of Programmes & Projects

T: 07539 670 136

E: tforrester@activehumber.co.uk

Deputy Safeguarding Officers:

Lucy Gray – Development Manager (Children and Young People)

T: 07860 954 336

E: lgray@activehumber.co.uk

Ian Spencer - Development Manager (Disability & Long Term Health Conditions)

T: 07860 954 338

E: ispencer@activehumber.co.uk

Ailey McLaughlin – Development Manager (Adults)

T: 07984 585 219

E: amclaughlin@activehumber.co.uk

Active Humber Office Number: 01482 244344

Active Office Safeguarding Email – safeguarding@activehumber.co.uk

Contents

Commitment.....	5
Principles.....	6
Guidance and legislation.....	7
Types of abuse and neglect	8
Signs and indicators of abuse and neglect.....	10
What to do if you have a concern or someone raises concerns with you	11
How to record a disclosure.....	12
Safeguarding adults flowchart	13
Roles and responsibilities	14
Good practice, poor practice and abuse	15
Relevant policies and procedures	17
Appendix 1 – Incident report form.....	18
Appendix 2 – Legislation and Government initiatives	20
Appendix 3 – Useful contacts and guidance	21
Appendix 4 – Roles and responsibilities	23
Appendix 5 – Glossary of terminology and acronyms.....	24
Appendix 6 – Capacity for decision making.....	25
Appendix 7 – Information Sharing Flowchart.....	26
Appendix 8 – Active Humber Governance Structure	27

Introduction

Active Humber recognises and accepts our responsibilities to safeguard the welfare of all children, young people and adults involved in our work in accordance to Working Together 2015 and the Care Act 2014.

This document specifically sets out Active Humber's safeguarding adults policy and procedures that apply to employees and volunteers of Active Humber.

Active Humber are an independent charity and are the Active Partnership covering the four areas of the Humber being East Riding of Yorkshire, Kingston upon Hull, North East Lincolnshire and North Lincolnshire and is one of 43 Active Partnership's that cover the whole of England. Active Humber are largely an infrastructure organisation with the remit of working with partners to reduce inactivity levels, however there are at times programmes that we directly deliver.

A key role for Active Humber is to influence and support the sector to achieve its aims and provide advice, guidance and signposting, this is inclusive of our safeguarding responsibilities. The wider partnership consists of many traditional partners and providers of physical activity but also recognises and works collaboratively with the wider partners involved in promoting and delivering better health across the whole system.

Underpinning all the work of the partnership is a fundamental awareness of and concern for, the need for everyone regardless of age, background or level of ability to feel able to engage in sport and physical activity. Some will be young, fit and talented, but most will not. We need a sport sector that welcomes everyone – meets their needs, treats them as individuals and values them as customers.

Active Humber will encourage and support partner organisations, including clubs, counties, suppliers, and sponsors to adopt and demonstrate their commitment to both safeguarding and equality as set out in our policy and procedures. Where Active Humber fund a project we will ensure the organisation has in place their own robust policies and procedures for safeguarding adults.

A glossary of terminology and acronyms used throughout this policy can be found in [Appendix 5](#).

Commitment

Active Humber is committed at every level of our organisation to creating and maintaining a safe and positive environment and accepts our responsibility to safeguard the welfare of all children, young people and adults involved in our work in accordance with Working Together 2015 and the Care Act 2014. To view the Governance Structure of Active Humber see [Appendix 8](#).

Active Humber will ensure that safeguarding remains a high priority and ensure that appropriate roles and responsibilities are in place to manage our work.

Active Humber will:

- ✓ Respond to and take seriously all allegations, dealing with them promptly in line with the Active Humber Adult Safeguarding Policy
- ✓ Report all concerns that arise both within Active Humber and / or outside the organisation
- ✓ Take all necessary checks (DBS) as deemed appropriate
- ✓ Maintain robust policies and procedures that are understood by all in the organisation
- ✓ Provide training and continuous improvement for all staff and the organisation which is undertaken regularly
- ✓ Regularly monitor and review all policies, processes and practices
- ✓ Make available advice, guidance, support and signposting to the sector
- ✓ Be advocates to partners for the importance of safeguarding and meeting our collective responsibilities

Active Humber recognises the role and responsibilities of the statutory agencies in safeguarding adults and is committed to applying with the procedures of Local Safeguarding Adults Boards. Links to the local multi-agency policy and procedures can be found in [Appendix 3](#).

Principles

The guidance and processes given in this policy are underpinned by the following six principles of adult safeguarding as set out in the Care Act:

Empowerment - People being supported and encouraged to make their own decisions and informed consent.

"I am asked what I want as the outcomes from the safeguarding process and these directly inform what happens."

Prevention – It is better to take action before harm occurs.

"I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help."

Proportionality – The least intrusive response appropriate to the risk presented.

"I am sure that the professionals will work in my interest, as I see them, and they will only get involved as much as needed."

Protection – Support and representation for those in greatest need.

"I get help and support to report abuse and neglect. I get help so that I am able to take part in the safeguarding process to the extent to which I want."

Partnership – Local solutions through services working with their communities.

Communities have a part to play in preventing, detecting and reporting neglect and abuse
"I know that staff treat any personal and sensitive information in confidence, only sharing what is helpful and necessary. I am confident that professionals will work together and with me to get the best result for me."

Accountability – Accountability and transparency in delivering safeguarding.

"I understand the role of everyone involved in my life and so do they (MCA 2015)."

Active Humber will ensure the above principles underpin all of our work seeking to ensure we are inclusive and make reasonable adjustments for any ability, disability or impairment and ensure the rights, dignity and worth of all adults will be respected.

We recognise that ability and disability can change over time, such that some adults may be additionally vulnerable to abuse, for example those that have a dependency on others or have different communication needs.

Guidance and legislation

The practices and procedures within this policy are based on the principles contained within the UK Legislation and Government Guidance. The following has been taken into consideration:

- ❖ The Care Act 2014
- ❖ The Protection of Freedoms Act 2012
- ❖ Domestic Violence, Crime and Victims (Amendment) Act 2012
- ❖ The Equality Act 2010
- ❖ The Safeguarding Vulnerable Groups Act 2006
- ❖ Mental Capacity Act 2005
- ❖ Deprivation of Liberty Safeguards
- ❖ Sexual Offences Act 2003
- ❖ The Human Rights Act 1998
- ❖ The Data Protection Act 1998
- ❖ General Data Protection Regulations 2018
- ❖ Disclosure and Barring Service 2013
- ❖ Making Safeguarding Personal Guide 2014
- ❖ Local Multi-Agency Procedures for the Safeguarding of Adults (links in [Appendix 3](#)).

Further information about the above legislation and guidance can be found in [Appendix 2](#).

Types of abuse and neglect

The definitions in this section are from the Care Act 2014. This is not intended to be an exhaustive list but an illustrative guide as to the sort of behaviour or issue which could give rise to a safeguarding concern.

Self-neglect– this covers a wide range of behaviour: neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding.

Modern Slavery– 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.

Domestic Abuse– including psychological, physical, sexual, financial and emotional abuse. It also includes so called 'honour' based violence.

Discriminatory– discrimination is abuse which centres on a difference or perceived difference particularly with respect to race, gender or disability or any of the protected characteristics of the Equality Act.

Organisational Abuse– including neglect and poor care practice within an institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one's own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.

Physical Abuse– includes hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate sanctions.

Sexual Abuse– including rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting.

Financial or Material Abuse– including theft, fraud, internet scamming, coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.

Neglect– including ignoring medical or physical care needs, failure to provide access to appropriate health social care or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating.

Emotional or Psychological Abuse – this includes threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks.

Not included in the Care Act 2014 but also relevant:

Cyber Bullying - cyber bullying occurs when someone repeatedly makes fun of another person online or repeatedly picks on another person through emails or text messages, or uses online forums with the intention of harming, damaging, humiliating or isolating another person. It can be used to carry out many different types of bullying (such as racist bullying, homophobic bullying, or bullying related to special educational needs and disabilities) but instead of the perpetrator carrying out the bullying face-to-face, they use technology as a means to do it.

Forced Marriage - forced marriage is a term used to describe a marriage in which one or both of the parties are married without their consent or against their will. A forced marriage differs from an arranged marriage, in which both parties consent to the assistance of a third party in identifying a spouse. The Anti-Social Behaviour, Crime and Policing Act 2014 make it a criminal offence to force someone to marry.

Mate Crime - a 'mate crime' as defined by the Safety Net Project is 'when vulnerable people are befriended by members of the community who go on to exploit and take advantage of them. It may not be an illegal act but still has a negative effect on the individual.' Mate Crime is carried out by someone the adult knows and often happens in private. In recent years there have been a number of Serious Case Reviews relating to people with a learning disability who were murdered or seriously harmed by people who purported to be their friend.

Radicalisation - the aim of radicalisation is to attract people to their reasoning, inspire new recruits and embed their extreme views and persuade vulnerable individuals of the legitimacy of their cause. This may be direct through a relationship, or through social media.

Signs and indicators of abuse and neglect

Abuse can take place in any context and by all manner of perpetrator. Abuse may be inflicted by anyone in the organisation who comes into contact with another. There are many signs and indicators that may suggest someone is being abused or neglected, these include but are not limited to:

- ❖ Unexplained bruises or injuries – or lack of medical attention when an injury is present
- ❖ A person has belongings or money going missing
- ❖ A person's attendance is limited
- ❖ Someone losing or gaining weight
- ❖ Someone having an unkempt appearance
- ❖ A change in the behaviour or confidence of a person
- ❖ They may self-harm
- ❖ They may have a fear of a particular group or individual
- ❖ They may tell you / another person they are being abused – i.e. a disclosure

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

You may become aware that abuse or poor practice is taking place, suspect abuse or poor practice may be occurring or be told about something that may be abuse or poor practice and you must report this to the Active Humber Lead Safeguarding Officer, or, if the Lead Safeguarding Officer is implicated then report it to the Active Humber CEO.

IF YOU ARE CONCERNED SOMEONE IS IN IMMEDIATE DANGER, CONTACT THE POLICE IMMEDIATELY BY CALLING 999.

It is important when considering your concern that you also consider the needs and wishes of the person at risk, considering their capacity to make decisions. More guidance on Capacity for Decision Making can be found in [Appendix 6](#). The Mental Capacity Act 2015 states that every individual has the right to make their own decisions and provides the framework for this to happen, a link to the legislation can be found in [Appendix 2](#).

If you have a concern or someone raises a concern to you, please follow the Safeguarding Adults Flowchart on page 13.

If you are asked to share information about the concern, speak to the Active Humber Lead Safeguarding officer first before following the 'Information Sharing – flowchart' in [Appendix 7](#).

We recognise that when a disclosure is made your feelings can range from upset to trauma, depending on your situation and the disclosure. You may want to help the person who has made the disclosure, or who is subject to the disclosure or may have difficulty dealing with your feelings towards the situation. Where required, Active Humber will facilitate support for the person receiving the disclosure. This may be in the form of an Employee Assistance Programme or funding professional support via 121 counselling. This support is available to volunteers and employees.

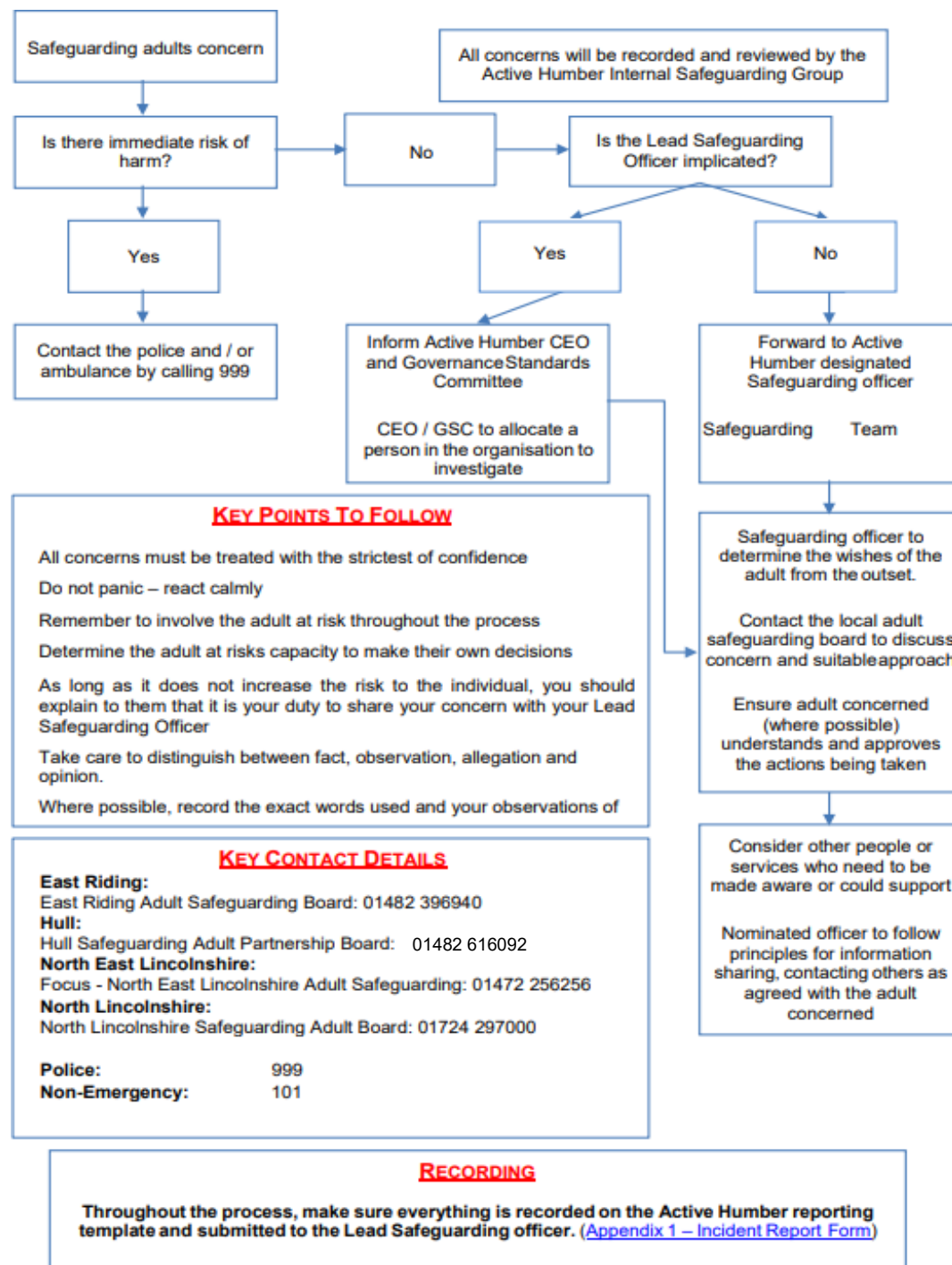
How to record a disclosure

When recording a concern or disclosure please use the form in [Appendix 1](#) and ensure it is submitted to the Active Humber Lead Safeguarding Officer.

When recording the concern or disclosure, keep the following points in mind:

- ❖ Do not panic – react calmly
- ❖ As long as it does not increase the risk to the individual, you should explain to them that you wish to share your concern with your Lead Safeguarding Officer, if they are happy for this to happen
- ❖ Describe the circumstances in which the disclosure came about, including time and location
- ❖ Take care to distinguish between fact, observation, allegation and opinion. It is important that the information you have is accurate
- ❖ Where possible, record the exact words used and your observations of behaviour
- ❖ Be mindful of the need to be confidential at all times, this information must only be shared with your Lead Safeguarding Officer and others on a need to know basis
- ❖ If the matter is urgent and relates to the immediate safety of an adult at risk, then contact the police immediately calling 999
- ❖ Sign and date the record

Safeguarding adults flowchart



Roles and responsibilities

To ensure Active Humber has the required capacity to carry out our safeguarding responsibilities the following roles are in place:

- ✓ A Lead Safeguarding Officer, who is appropriately trained and has appropriate experience to manage the safeguarding responsibilities for Active Humber. This role will produce and disseminate appropriate guidance and resources to support this policy and procedures. A complete role description can be found in [Appendix 4](#).
- ✓ At least one Deputy Safeguarding Officer, who is appropriately trained and has relevant experience to support the Lead Safeguarding Officer in their role and to be the nominated officer if the Lead Safeguarding Officer is unavailable.
- ✓ A clear line of accountability within Active Humber for work on promoting the welfare of adults.
- ✓ A 'safeguarding champion' at Board level will be appointed. This person will chair the Governance and Standards Committee as a sub group of the Company Board and
- ✓ responsible for managing risk and to ensure robust policies and procedures are in place.
- ✓ An internal safeguarding steering group will meet regularly, consisting of operational
- ✓ staff at different levels and roles, to review and manage the safeguarding responsibilities of Active Humber. This will be chaired by the Lead Safeguarding Officer.
- ✓ Disciplinary procedures for dealing with allegations of poor practice against members of staff and volunteers. A disciplinary panel will be formed as required for a given incident, if appropriate and should a threshold be met.
- ✓ Arrangements in place to work effectively with other organisations to safeguard and promote the welfare of adults, including arrangements for sharing information.
- ✓ Appropriate whistle blowing procedures and an open and inclusive culture that enables safeguarding, equality and diversity issues are addressed.

Good practice, poor practice and abuse

It can be difficult to distinguish poor practice from abuse, whether intentional or accidental.

It is not the responsibility of any individual involved in Active Humber to make judgements regarding whether or not abuse is taking place, however, all Active Humber personnel have the responsibility to recognise and identify poor practice and potential abuse, and act on this if they have concerns.

Good practice

Active Humber expects that its employees:

- ❖ Are fully aware of the policies and procedures in place at Active Humber
- ❖ Have a basic awareness in working with Adults at Risk

Everyone should:

- ❖ Aim to make the experience of working with Active Humber professional and effective
- ❖ Promote fairness and equality
- ❖ Follow the Active Humber Code of Conduct for staff and volunteers
- ❖ Treat all adults equally and preserve their dignity; this includes giving everyone similar attention, time and respect

Those working directly with adults at risk should:

- ❖ Respect the developmental stage of each person
- ❖ Ensure the activity is appropriate to the physical, social and emotional stage of the development of the person
- ❖ Work with adults at risk, medical adviser and their carers (where appropriate) to ensure activities are suited to the needs and lifestyle of the person, not the ambitions of others
- ❖ Build relationships based on mutual trust and respect, encouraging adults at risk to take responsibility for their own development and decision-making
- ❖ Always be publicly open when working with adults at risk
- ❖ Avoid unnecessary physical contact with people. Physical contact (touching) can be appropriate so long as:
 - It is neither intrusive nor disturbing
 - The person's permission has been openly given
 - It is delivered in an open environment
 - It is needed to demonstrate during an activity
- ❖ Maintain a safe and appropriate relationship and avoid forming intimate relationships with people you are working with as this may threaten the position of trust and respect
- ❖ Be an excellent role model by maintaining appropriate standards of behaviour

- ❖ Gain the adult at risks consent and, where appropriate, the consent of relevant carers, in writing, to administer emergency first aid or other medical treatment if the need arises.
- ❖ Be aware of medical conditions, disabilities, existing injuries and medicines being taken and keep written records of any injury or accident that occurs, together with details of treatments provided
- ❖ Arrange that someone with current knowledge of emergency first aid is available at all times
- ❖ Gain written consent from the correct people and fill out relevant checklists and information forms for travel arrangements and trips. This must be the adult themselves if they have capacity to do so

Poor practice

The following are regarded as poor practice and should be avoided:

- ❖ Unnecessarily spending excessive amounts of time alone with an individual adult
- ❖ Engaging in rough, physical or sexually provocative games, including horseplay
- ❖ Allowing or engaging in inappropriate touching of any form
- ❖ Using language that might be regarded as inappropriate by the adult and which may be hurtful or disrespectful
- ❖ Making sexually suggestive comments, even in jest
- ❖ Reducing an adult to tears as a form of control
- ❖ Letting allegations made by an adult go uninvestigated, unrecorded, or not acted upon
- ❖ Taking an adult at risk alone in a car on journeys, however short
- ❖ Inviting or taking an adult at risk to your home where they will be alone with you
- ❖ Sharing a room with an adult at risk
- ❖ Doing things of a personal nature that adults at risk can do for themselves

NOTE: At times it may be acceptable to do some of the above. In these cases, to protect both the adult at risk and yourself, seek written consent from the adult at risk and, where appropriate, their carers and ensure you have discussed it with the Lead Safeguarding Officer and gained their approval.

If, during your care, an adult at risk suffers any injury, seems distressed in any manner, appears to be sexually aroused by your actions, or misunderstands/misinterprets something you have done, report these incidents as soon as possible to an Active Humber designated Safeguarding Officer and make a brief written note of it.

Relevant policies and procedures

This 'Active Humber Safeguarding Adults Policy and Procedures' should be read in conjunction with other Active Humber policies and procedures, in particular:

- ❖ Whistle Blowing Policy
- ❖ Social Media Policy
- ❖ Complaints Procedure
- ❖ Disciplinary Procedures
- ❖ Active Humber Code of Conduct
- ❖ Equal Opportunities Policy
- ❖ Safeguarding officers Role and Responsibilities
- ❖ Safeguarding Children and Young People Policy and Procedures
- ❖ Safer Recruitment Policy

For copies of any of the above policies and procedures please request these from the Active Humber safeguarding team or via info@activehumber.co.uk.

Appendix 1 – Incident report form

Active Humber Officer:	
Role:	
Contact telephone number:	
Date:	
Time:	

Nature of concern:

Remember:

- Record as much detail as possible including dates and times of telephone calls / conversations / meetings / incidents
- Record facts whenever possible; when recording opinion / inference / 2nd hand information, this should be made clear.
- Record any agreed actions to be taken by the different parties involved (Police, Social Services, you) – who and what is to be done? Timescales for action?
- Seek (and record) agreement for other parties to provide feedback or update you whenever possible.
- Any information you record may need to be disclosed to the individuals concerned and /or individuals and organisations deemed necessary by the safeguarding officer to deal with the concern.
- Sign your records, as it is possible for several people to be recording their actions on the same case.

Detailed record of incident or concern (Note all relevant facts and information)	Actions (Names or organisations)

--	--

Signature: Date:

Please send this form to a member of the safeguarding team.

Appendix 2 – Legislation and Government initiatives

Sexual Offences Act 2003

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

The Sexual Offences Act introduced a number of new offences concerning adults at risk and children. www.opsi.gov.uk

Mental Capacity Act 2005

<http://www.legislation.gov.uk/ukpga/2005/9/introduction>

Its general principle is that everybody has capacity unless it is proved otherwise, that they should be supported to make their own decisions, that anything done for or on behalf of people without capacity must be in their best interests and there should be least restrictive intervention. www.dca.gov.uk

Safeguarding Vulnerable Groups Act 2006

<http://www.legislation.gov.uk/ukpga/2006/47/contents>

Introduced the new Vetting and Barring Scheme and the role of the Independent Safeguarding Authority. The Act places a statutory duty on all those working with vulnerable groups to register and undergo an advanced vetting process with criminal sanctions for non-compliance. www.opsi.gov.uk

Disclosure & Barring Service 2013

<https://www.gov.uk/government/organisations/disclosure-and-barring-service/about>

Criminal record checks: guidance for employers - How employers or organisations can request criminal records checks on potential employees from the Disclosure and Barring Service (DBS). www.gov.uk/db-update-service

The Care Act 2014 – statutory guidance

<http://www.legislation.gov.uk/ukpga/2014/23/introduction/enacted>

The Care Act introduces new responsibilities for local authorities. It also has major implications for adult care and support providers, people who use services, carers and advocates. It replaces No Secrets and puts adult safeguarding on a statutory footing.

Making Safeguarding Personal Guide 2014

This guide is intended to support councils and their partners to develop outcomes-focused, person-centred safeguarding practice.

[Making Safeguarding Personal Guide 2014](#)

Appendix 3 – Useful contacts and guidance

Adult Safeguarding Boards:

North Lincolnshire Safeguarding Adult Team 01724 297000 [North Lincs SAB | Worried about a person - North Lincs SAB](#)

East Riding Safeguarding Adults Board Local procedures: https://www.ersab.org.uk/ Concerned about an adult?	T: 01482 396940 T: Out of Hours (Emergency Duty Team): 01377 241273 E: safeguardingadultsteam@eastriding.gov.uk
Hull Multi Agency Adult Safeguarding Hub (MASH) Local procedures: https://www.hullcollaborativepartnership.org.uk/hull-safeguarding-adults-partnership-board Report a concern Worried about an adult Hull	T: 01482 616092 T: Out of Hours (Emergency Duty Team): 01377 300304 E: adultsafeguarding@hullcc.gov.uk
North East Lincolnshire Safeguarding Adults Board Local procedures: https://safernel.co.uk/safeguarding-adults-board/	T: 01472 256256 (Single Point of Access – SPA) E: safeguardingadultsboard@northlincs.gov.uk W: https://www.focusadultsocialwork.co.uk/social-work/
North Lincolnshire Safeguarding Adults Team Local Procedures: North Lincs SAB Worried about a person - North Lincs SAB	T: 01724 297000 E: safeguardingadultreferrals@northlincs.gov.uk
Ann Craft Trust - Safeguarding Adults in Sport and Activity:	T: 0115 951 5400

	Website: www.anncrafttrust.org E: Ann-Craft-Trust@nottingham.ac.uk
--	--

Appendix 4 – Roles and responsibilities

Safeguarding officer Role Description

Purpose: to act as the lead officer within Active Humber in relation to Safeguarding casework, and to take a key role in the development and implementation of Safeguarding policies and procedures for both children and adults.

Key Tasks:

- ❖ To receive and collate concerns which are reported to Active Humber, and to act as necessary
- ❖ To seek advice and guidance regarding the handling of safeguarding concerns as necessary, acting as advised by safeguarding boards or Police
- ❖ Together with the Deputy Safeguarding officer(s), to liaise with individuals and their families who raise Safeguarding concerns, and where appropriate with individuals who are the subject of those concerns, to ensure effective and timely communication
- ❖ To record efficiently and securely retain all information relating to safeguarding concerns and cases
- ❖ To act, together with the Deputy Safeguarding officer(s), as the point of contact for partner and external organisations in relation to safeguarding matters
- ❖ Where competent to do so, provide support on guidance to external organisations relating to safeguarding. Alternatively, to seek advice from specialised partners such as safeguarding boards, the NSPCC's Child Protection in Sport Unit (CPSU) and the Ann Craft Trust
- ❖ To lead the internal safeguarding group to manage the safeguarding work and handling concerns for Active Humber
- ❖ To keep up to date with and promote safeguarding policy, procedure and regulations
- ❖ To have a sound understanding of Active Humber's recruitment policy and procedures including DBS checks where required
- ❖ To promote Safeguarding best practice training workshops within the county and clubs
- ❖ To ensure appropriate training is sought and undertaken by all relevant officers and to maintain up to date qualified officers are in the relevant positions
- ❖ To lead on the review of the safeguarding policies and procedures for Active Humber

Appendix 5 – Glossary of terminology and acronyms

ACT	Ann Craft Trust
AP	Active Partnership
CPSU	Child Protection in Sport Unit
DBS	Disclosure and Barring Service
GDPR	General Data Protection Regulations
GSC	Governance and Standards Committee (Active Humber)
LSAB	Local Safeguarding Adult Board LSO – Lead Safeguarding Officer
MCA	Mental Capacity Act
NSPCC	National Society for the Prevention of Cruelty to Children
PoT	Position of Trust
SAAR	Safeguarding Adults at Risk

Appendix 6 – Capacity for decision making

The Mental Capacity Act (MCA) is designed to protect and empower individuals who may lack the mental capacity to make their own decisions. It is a law that applies to individuals aged 16 and over. Someone can lack capacity to make some decisions (for example, to decide on complex financial issues) but still have the capacity to make other decisions (for example, to decide what items to buy at the local shop).

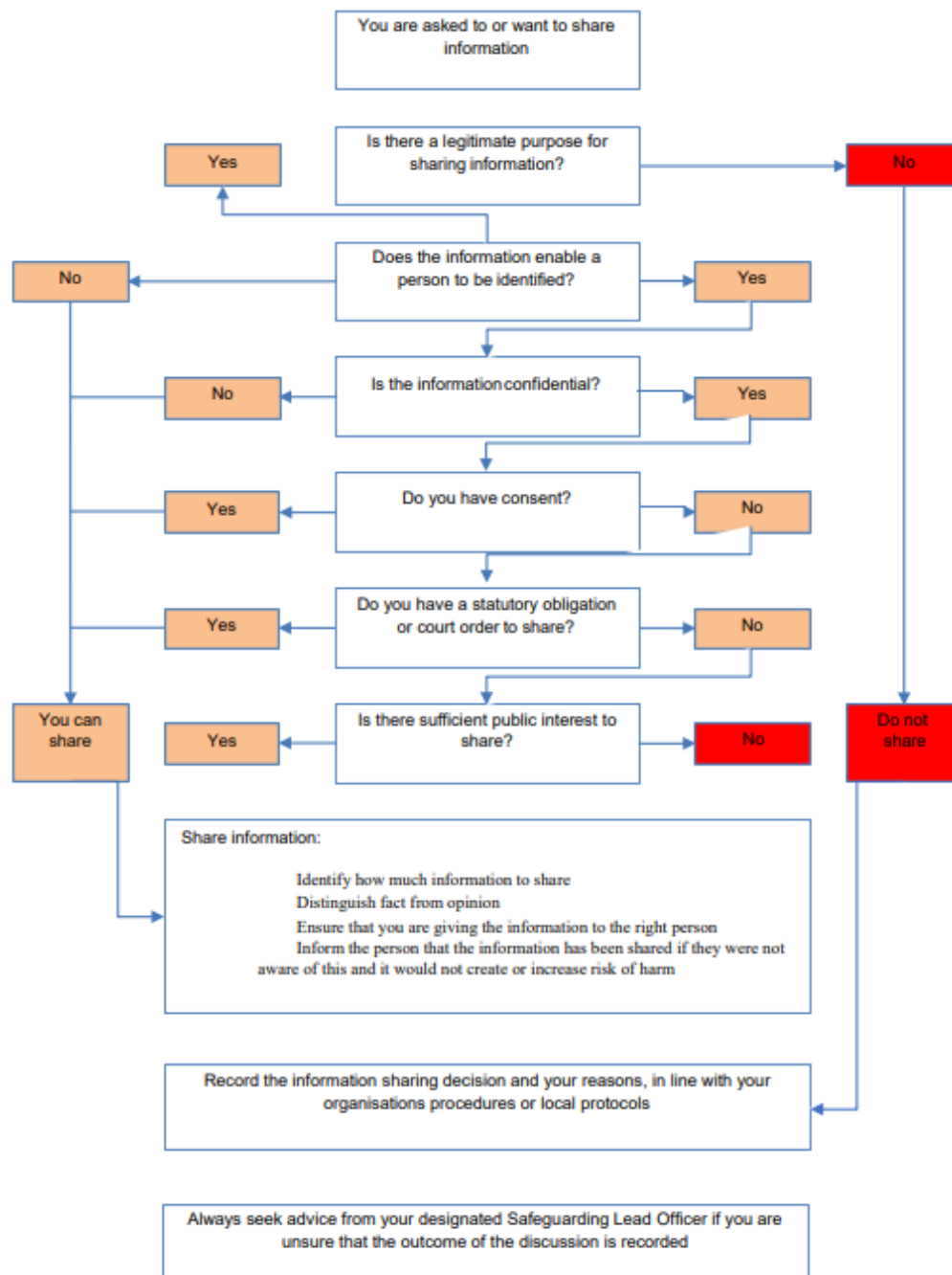
You should always assume an individual has the capacity to make a decision themselves, unless it is proved otherwise through a capacity assessment. Individuals must be given help to make a decision themselves. This might include, for example, providing the person with information in a format that is easier for them to understand. Just because someone makes what those caring for them consider to be an "unwise" decision, they should not be treated as lacking the capacity to make that decision. Where someone is judged not to have the capacity to make a specific decision (following a capacity assessment), that decision can be taken for them, but it must be in their best interest and it should be the least restrictive of their basic rights and freedoms possible.

To help you to understand the Mental Capacity Act, consider the following five points:

1. Assume that people are able to make decisions, unless it is shown that they are not. If you have concerns about a person's level of understanding, you should check this with them, and if applicable, with the people supporting them.
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, and you may be asked your opinion.
3. People have the right to make unwise decisions. The important thing is that they understand the implications. If they understand the implications, consider how risks might be minimised.
4. If someone is not able to make a decision, then the person helping them must only make decisions in their "best interests". This means that the decision must be what is best for the person, not for anyone else. If someone was making a decision on your behalf, you would want it to reflect the decision you would make if you were able to.
5. Find the least restrictive way of doing what needs to be done.

Appendix 7 – Information Sharing Flowchart

APPENDIX 7 – INFORMATION SHARING – FLOWCHART



Appendix 8 – Active Humber Governance Structure

