Cerebral Palsy Sport

Adult Safeguarding Policy

2026

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Foreword – CP Sport Chair

At Cerebral Palsy Sport, our commitment to safeguarding is at the heart of everything we do. We believe that every adult who takes part in our activities; whether as a participant, volunteer, member, or supporter, has the absolute right to feel safe, respected and valued. Safeguarding is not simply a policy requirement; it is an essential expression of who we are and how we work.

This Adult Safeguarding Policy sets out the standards and responsibilities that underpin our approach. It reflects our legal duties under the Care Act 2014 and best practice guidance across the sport and voluntary sectors. More importantly, it reflects our values: integrity, inclusivity, respect and person-centred care.

As Chair of the Board, I am proud of the culture we continue to build; one where safeguarding is understood, prioritised and embedded in every aspect of our organisation. Our Board takes its responsibilities seriously, providing oversight, accountability and leadership to ensure that safeguarding remains a central priority in our decision-making and governance.

Creating a safe environment is a shared responsibility. Every member of our team, every volunteer, and every partner who works with Cerebral Palsy Sport has a vital role to play. This policy provides the guidance and clarity needed to recognise concerns, respond appropriately and ensure that adults are protected from abuse, neglect and poor practice.

Thank you for your commitment to safeguarding and for helping us ensure that Cerebral Palsy Sport remains a place where every adult can participate with confidence, dignity and enjoyment.

Chris Jay
Chair of the Board
Cerebral Palsy Sport

SECTION A – Safeguarding Statement, Purpose and Aims

Safeguarding Statement

1. Cerebral Palsy Sport is committed to creating and maintaining a safe, positive and inclusive environment for all adults who engage with our services, activities and events. We recognise our duty of care to safeguard adults who are experiencing, or may be at risk of, abuse or neglect, and we will take all reasonable steps to promote their welfare and protect them from harm.

2. We are committed to ensuring that safeguarding practice:

   a. reflects statutory responsibilities and current government guidance
   b. complies with the Care Act 2014, the Mental Capacity Act 2005 and the Disclosure and Barring Service (DBS) framework
   c. is embedded across all areas of our work
   d. promotes a person-centred, rights-based approach to safety and wellbeing

3. All adults, regardless of age, gender, sexuality, ethnicity, religion, ability or socio-economic status, have the right to:

   a. enjoy safe participation in our activities
   b. be treated with dignity and respect
   c. be protected from abuse, neglect, discrimination and poor practice

4. Safeguarding is everyone's responsibility. All staff, volunteers, ambassadors, members and partners play a role in upholding these standards.

Purpose and Aims of the Policy

5. The purpose of this Adult Safeguarding Policy is to:

   a. Set out clear standards of safeguarding practice across Cerebral Palsy Sport.
   b. Enable staff, volunteers and partners to make confident and informed decisions when responding to safeguarding concerns.
   c. Ensure all safeguarding procedures, reporting routes and responsibilities are clearly defined and understood.
   d. Ensure all individuals involved in our activities are appropriately trained and supported.
   e. Promote a culture where safeguarding is recognised as central to the organisation's work, ensuring that the welfare of adults is paramount.
   f. Ensure compliance with safeguarding legislation including the Care Act 2014, the Mental Capacity Act 2005 and the Safeguarding Vulnerable Groups Act 2006 (as amended).

Policy Objectives

6. To achieve these aims, Cerebral Palsy Sport will:

   a. Respond swiftly, appropriately and proportionately to all suspicions, concerns and allegations of abuse.
   b. Provide safe, inclusive opportunities for adults to participate at a level appropriate to their ability and personal development.
   c. Promote partnership working with safeguarding agencies, carers, personal assistants and relevant organisations.
   d. Provide clear guidance, resources and access to training for staff and volunteers.
   e. Treat personal information confidentially and in accordance with the Data Protection Act 2018 and UK GDPR, sharing information only where legally required or necessary to protect individuals from harm.
   f. Ensure the policy is communicated widely, understood by all, and reviewed regularly in line with legislation and best practice.

Principles of Adult Safeguarding

7. Cerebral Palsy Sport adopts the six principles set out in the Care Act 2014:

   a. **Empowerment** – Adults are supported to make informed decisions about their own safety and outcomes.
   b. **Prevention** – We take action before harm occurs, providing clear information and promoting safe environments.
   c. **Proportionality** – We respond in the least intrusive and most appropriate way to the level of risk.
   d. **Protection** – We offer support, representation and encouragement to those most in need.
   e. **Partnership** – We work openly with statutory agencies, communities and individuals to prevent and respond to abuse.
   f. **Accountability** – We maintain transparency, clear reporting structures and shared responsibility for safeguarding practice.

Legislative and Policy Framework

8. This policy aligns with the following legislation and guidance:

   a. Care Act 2014
   b. Mental Capacity Act 2005
   c. Safeguarding Vulnerable Groups Act 2006 (as amended by the Protection of Freedoms Act 2012)
   d. Protection of Freedoms Act 2012
   e. Domestic Violence, Crime and Victims (Amendment) Act 2012
   f. Equality Act 2010
   g. Sexual Offences Act 2003
   h. Human Rights Act 1998
   i. Data Protection Act 2018 (UK GDPR)

9. This policy should be read alongside the following CP Sport policies:

- Codes of Conduct (staff, volunteers, athletes) – See Appendices 2, 3 and 4

- CPS-SAF-01 Safeguarding Children Policy
- CPS-SAF-03 Safer Recruitment Policy
- CPS-SAF-04 Managing Allegations & Serious Concerns Policy

- CPS-GOV-01 Governance & Board Roles Framework
- CPS-GOV-05 Trustee Code of Conduct
- CPS-GOV-08 Conflict of Interest Policy

- CPS-RSK-01 Risk Management Policy
- CPS-RSK-03 Crisis Management Policy

- CPS-HS-01 Health & Safety Policy
- CPS-HS-03 Incident & Accident Reporting Policy

- CPS-DAT-01 Data Protection Policy
- CPS-DAT-02 Confidentiality & Privacy Policy
- CPS-DAT-03 Data Breach Policy

- CPS-HR-01 Recruitment and Selection Policy
- CPS-HR-08 Volunteer Recruitment & Management Policy

10. These relationships reflect best practice from the ACT, Sport England, the Charity Commission and local safeguarding partnerships.

11. It also complements local Safeguarding Adults Board procedures.

Communication

12. This policy is mandatory for all individuals involved in Cerebral Palsy Sport. It will be:

a. promoted across the organisation
b. accessible on our website and internal platforms
c. reinforced through induction and training

13. Failure to comply with this policy may result in disciplinary, contractual or membership consequences.

Monitoring and Review

14. This policy will be reviewed:

a. On an annual basis by the CP Sport safeguarding committee
b. following legislative or regulatory changes
c. in response to any significant safeguarding incident, learning review or organisational change

SECTION B — Roles and Responsibilities

Overview

15. Safeguarding is a shared responsibility. Cerebral Palsy Sport is committed to ensuring that all those involved in our activities understand their safeguarding duties, act in accordance with this policy, and promote a culture where safety, dignity and wellbeing are paramount.

16. This section outlines the responsibilities of the organisation, its Board, senior leadership, safeguarding officers, staff, volunteers and partners.

Organisational Responsibilities

17. Cerebral Palsy Sport will:

    a. **Provide a safe environment** for adults participating in all activities and events.
    b. **Promote a safeguarding culture** where concerns are recognised, reported and acted upon promptly.
    c. **Maintain up-to-date safeguarding policies and procedures**, reviewed regularly and in response to legislation or best practice changes.
    d. **Ensure clear lines of accountability**, including designated safeguarding roles at Board and operational level.
    e. Ensure all staff and volunteers receive appropriate safeguarding training, supervision and support.
    f. **Comply with relevant safeguarding legislation**, including the Care Act 2014, Mental Capacity Act 2005 and DBS framework.
    g. **Work collaboratively with statutory agencies** in line with local Safeguarding Adults Board procedures.
    h. **Ensure safe recruitment practices**, including DBS checks where required.

Board of Trustees Responsibilities

18. The Board has overall accountability for safeguarding within Cerebral Palsy Sport. The Board will:

    a. Oversee and monitor safeguarding strategy and practice across the organisation.
    b. Approve safeguarding policies and subsequent revisions.
    c. Appoint a Board Safeguarding Lead to provide scrutiny and ensure safeguarding remains a priority.
    d. Ensure all Board members receive safeguarding training appropriate to their role.
    e. Seek and consider the views of participants, carers and members where appropriate, ensuring these inform governance and decision-making.
    f. Hold the Chief Executive to account for effective implementation of safeguarding responsibilities.

Chief Executive Responsibilities

19. The Chief Executive is responsible for ensuring safeguarding is embedded across all operations. They will:

    a. Promote the welfare and rights of all adults involved in Cerebral Palsy Sport.
    b. Ensure organisational compliance with safeguarding legislation and local authority procedures.
    c. Ensure adequate resources (training, staffing, systems) to support safeguarding implementation.

d. Ensure all team members and volunteers are safely recruited, trained and supervised.
e. Respond to complaints or concerns escalated to senior level.
f. Support and oversee the Lead Safeguarding Officer in fulfilling operational responsibilities.

Lead Safeguarding Officer Responsibilities

20. The Lead Safeguarding Officer (LSO) is the designated point of contact for safeguarding adults within the organisation. They will:

a. Maintain up-to-date safeguarding policies and procedures and ensure their implementation.
b. Provide advice, guidance and support to staff, volunteers, participants and carers.
c. Receive and respond to safeguarding concerns, ensuring timely and appropriate action.
d. Liaise with statutory agencies, including local authority safeguarding teams and the police.
e. Maintain secure, accurate and confidential records of all safeguarding concerns and actions taken.
f. Coordinate safeguarding training, ensuring staff and volunteers are trained at the appropriate level.
g. Support safe recruitment processes, including role-based DBS assessments.
h. Work with the Board Safeguarding Lead and CEO on strategic safeguarding matters.

21. A Deputy LSO will act in the absence of the LSO.

Responsibilities of Staff, Volunteers and Ambassadors

22. All staff, volunteers, an ambassadors must:

a. Promote the safety and wellbeing of adults in all activities.
b. Follow this safeguarding policy and reporting procedures at all times.
c. Attend mandatory safeguarding training and refreshers.
d. Report safeguarding concerns immediately to the LSO or Deputy, even if unsure.
e. Maintain professional boundaries and act as positive role models.
f. Respect confidentiality, sharing information only on a need-to-know basis.
g. Contribute to safe practice, including risk assessments, supervision and safe environments.
h. Never investigate concerns themselves — this is the role of statutory services.

Safe Recruitment, Training and DBS Requirements

23. Cerebral Palsy Sport is committed to safe recruitment and safeguarding risk management. We will:

a. Assess all roles to determine whether a DBS check is required and at what level (Basic, Standard or Enhanced with barred list check).
b. Conduct DBS checks for eligible roles, in line with the Safeguarding Vulnerable Groups Act 2006 and Protection of Freedoms Act 2012.
c. Review DBS requirements annually or when roles change.
d. Ensure criminal records information is handled lawfully, in line with the Data Protection Act 2018.
e. Provide safeguarding induction training for all new staff and volunteers.
f. Ensure appropriate refresher training — typically every 2–3 years.
g. Ensure trustees receive safeguarding training proportionate to their governance role.

Regulated Activity and Barred List Checks

24. Cerebral Palsy Sport will identify which roles fall under "regulated activity with adults" as defined in the Safeguarding Vulnerable Groups Act (as amended). This includes roles involving:

    a. personal care
    b. assistance with financial affairs
    c. conveyance
    d. health or social care provided by or under the direction of a professional
    e. certain forms of unsupervised care or support

25. Where a role meets the criteria:

    a. an Enhanced DBS check with adults' barred list check is required, and
    b. the organisation must refer individuals to the DBS if they have been removed from regulated activity due to causing harm or posing a risk of harm.

26. We apply the DBS legal test when considering eligibility and barring decisions.

27. Our CP Sport staff, ambassador and volunteer DBS Matrix is contained in this policy (Appendix 5).

Organisational Diligence and Policy Maintenance

28. Cerebral Palsy Sport will:

    a. Review safeguarding policies annually, or sooner if legislation or organisational needs change.
    b. Ensure alignment with Local Safeguarding Adults Board procedures.
    c. Maintain accurate and secure safeguarding records.
    d. Conduct safeguarding risk assessments for new activities, programmes or partnerships.
    e. Ensure role profiles are reviewed annually, including safeguarding responsibilities.
    f. Communicate policy updates to all stakeholders.

SECTION C — Definitions and Recognising Abuse

Key Definitions

29. **Adult -** An adult is anyone aged **18 or over**, as defined in safeguarding legislation.

30. **Adult at Risk -** An *adult at risk* is a person aged 18 or over who:

    a. **has needs for care and/or support** (regardless of whether these needs are being met),
    b. is experiencing, or is at risk of, abuse or neglect, and
    c. as a result of those needs is unable to protect themselves from abuse, neglect or exploitation.

31. This definition of 'Adult at Risk' replaces older terminology such as *vulnerable adult*.

32. **Adult Safeguarding -** Adult safeguarding is:
    a. "Protecting a person's right to live in safety, free from abuse and neglect."
    (Care Act 2014)

33. **Abuse** - Abuse is a violation of a person's human and civil rights by another person or persons. Abuse may be a single act or repeated acts, intentional or unintentional, and may occur in any relationship or setting.

34. **Capacity (Mental Capacity Act 2005)** - Capacity refers to a person's ability to make a specific decision at a specific time. The MCA 2005 states:

    a. A person **must be assumed to have capacity** unless it is established that they lack it.
    b. Capacity is **decision-specific** and may fluctuate.
    c. A person should not be treated as unable to make a decision merely because they make what others consider an unwise decision.

35. Cerebral Palsy Sport works in accordance with the MCA 2005 principles in all safeguarding responses.

Types of Abuse and Neglect

(Care Act 2014 categories with sport-specific examples)

36. The Care Act identifies 10 main categories of abuse. Abuse may occur in any setting, including sporting environments, at home, in the community or online.

37. Physical Abuse

Includes hitting, slapping, pushing, kicking, inappropriate restraint, misuse of medication, or physical punishment.
Sport example: A coach handles an athlete roughly or uses inappropriate physical contact.

38. Domestic Abuse

Includes controlling or coercive behaviour, psychological, physical, sexual, financial or emotional abuse within personal relationships.
Sport example: A participant appears distressed when collected by a family member and becomes withdrawn in their presence.

39. Sexual Abuse

Includes rape, sexual assault, sexual harassment, unwanted touching, indecent exposure, sexualised comments, or involvement in sexual activities without consent.
Sport example: A fellow participant sends unwanted explicit messages to another adult with a learning disability.

40. Emotional or Psychological Abuse

Includes threats, humiliation, blaming, controlling behaviour, intimidation, harassment or isolation.
Sport example: An athlete is persistently shouted at, belittled or intimidated by another participant.

41. Financial or Material Abuse

Includes theft, fraud, coercion in financial affairs, misuse of property or benefits.
Sport example: A participant's equipment or money regularly goes missing at sessions.

42. Neglect and Acts of Omission

Includes ignoring medical or physical care needs, withholding necessities such as medication, food or heating, or failing to provide access to appropriate services.
Sport example: A coach fails to ensure hydration breaks or ignores clear signs of medical distress.

43. Self-Neglect

Includes extreme lack of self-care, unkempt appearance, hoarding or neglecting personal hygiene.
Sport example: A participant arrives consistently dishevelled or in unsuitable clothing, indicating possible self-neglect.

44. Discriminatory Abuse

Includes abuse based on race, gender, disability, sexual orientation, religion or protected characteristics.
Sport example: Participants making derogatory comments about an individual's disability or identity.

45. Organisational Abuse

Includes neglect or poor practice within an organisation, whether through systemic weaknesses, routines, or staff behaviours.
Sport example: A club regularly fails to provide adequate rest breaks or safe staffing ratios.

46. Modern Slavery

Includes human trafficking, forced labour, domestic servitude or exploitation.
Sport example: A participant is prevented from attending sessions by someone controlling their movements.

Other Relevant Forms of Harm

47. While not statutory Care Act categories, the following are important within sporting and community settings:

48. Cyberbullying

Repeated harassment, mocking or intimidation via social media, messaging or online forums.

49. Mate Crime

When someone befriends an adult (often with learning disabilities) to exploit or harm them.

50. Radicalisation

Targeting vulnerable individuals to encourage extremist beliefs or actions.

51. Forced Marriage

Marriage without full and free consent. Criminalised under the Anti-social Behaviour, Crime and Policing Act 2014.

Recognising Signs and Indicators of Abuse

52. Abuse may present in many ways, and any single sign does not automatically indicate abuse, but concerns should always be explored.

53. Common indicators include:

    a. Unexplained injuries or frequent medical issues
    b. Fearful, withdrawn, anxious or unusually quiet behaviour
    c. Sudden changes in confidence, demeanour or mental wellbeing
    d. Loss of personal belongings or money
    e. Poor personal hygiene or deterioration in appearance
    f. Reluctance to attend activities they previously enjoyed
    g. Signs of self-harm
    h. Avoidance of specific individuals
    i. Disclosures or hints that something is wrong

54. Remember: You do not need to be certain that abuse is happening; you only need reasonable cause for concern.

Where Abuse Can Occur

55. Abuse can happen anywhere, including:

    a. sporting venues
    b. public spaces
    c. online
    d. the adult's home
    e. residential or supported living settings
    f. during transport
    g. at competitions or away trips
    h. within peer relationships

56. Perpetrators may be family, carers, staff, volunteers, other participants, strangers, or peers.

SECTION D — Responding to Concerns, Disclosures and Allegations

Overview

57. Cerebral Palsy Sport is committed to ensuring that all concerns about the safety or wellbeing of adults are responded to promptly, proportionately and in accordance with the law.

58. Anyone involved in Cerebral Palsy Sport may become aware of a safeguarding concern. You do **not** need proof that abuse is happening — only **reasonable concern**.

59. All safeguarding concerns must be reported using the procedures in this section. Please refer to Appendix 1 *"Reporting Concerns Flowchart"* for clear instructions of what to do in the event anyone has concerns.

Immediate Danger or Emergency

60. If you believe an adult is in **immediate danger**, or a serious crime has occurred:

Call 999 immediately…. (then)

- Inform the Lead Safeguarding Officer (LSO) or Deputy as soon as possible.
- Preserve evidence where safe to do so (do not tidy, clean, or move items unnecessarily).

Types of Situations You May Encounter

61. You may become aware of a concern because:

a. **An adult discloses abuse** ("They tell you what happened.")
b. You observe signs or behaviours suggesting abuse or neglect.
c. A third party expresses concern about someone.
d. You witness an incident that causes concern.
e. **Online behaviours** cause worry (messages, posts, images).

Responding to a Disclosure

62. When an adult tells you something concerning:

DO:

a. **Stay calm** and listen carefully.
b. **Allow silence** — let them speak in their own time.
c. **Reassure them** that they have done the right thing.
d. Be non-judgemental and supportive.
e. Take the disclosure seriously — do not minimise it.
f. **Explain what will happen next**, including that you must share information with safeguarding staff.
g. Record their words as accurately as possible.
h. Report to the LSO/Deputy immediately.

DO NOT:

a. Ask leading or investigative questions.
b. Promise confidentiality (you *can* promise privacy).
c. Express shock, anger or disbelief.
d. Blame them or anyone else.

e. Share the information with anyone other than appropriate safeguarding staff.
f. Attempt to investigate the concern yourself.

63. The goal is to support, not investigate.

Responding to a Suspicion of Abuse

64. If you witness something, notice concerning behaviour, or have a gut feeling:

a. Do **not** confront the alleged person responsible.
b. Do **not** try to gather evidence yourself.
c. Discuss your concern with the LSO/Deputy immediately.
d. If they are unavailable and the risk is urgent, escalate to the CEO or Board Safeguarding Lead.

65. Suspicion alone is enough to report.

Taking Account of Wishes and Capacity

66. Where the adult **Has mental capacity**: Their views, wishes and consent will be central to decision-making unless:

a. they or others are at immediate risk of harm
b. a crime has been committed
c. coercion or control is suspected
d. there is substantial public interest in raising concerns

67. Where the adult **Lacks capacity:** Decisions must be made in their **best interests** (MCA 2005), considering:

a. their past and present wishes
b. views of people important to them
c. safety and rights

68. Safeguarding must always be **least restrictive** and proportionate.

Reporting Safeguarding Concerns

69. All safeguarding concerns must be reported to the Lead Safeguarding Officer (LSO)

or, if unavailable:

1) Deputy Safeguarding Officer (DLSO)
2) Chief Executive Officer (CEO)
3) Board Safeguarding Lead (DSL)

70. When reporting:

a. Provide clear, factual information.
b. Do not delay reporting — even if you do not have all the details.
c. Mark any communication **URGENT** if the risk is immediate.

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External Referrals to Statutory Agencies

71. The LSO/Deputy is responsible for:

    a. Screening and assessing concerns
    b. Contacting the Local Authority Safeguarding Adults Team as required
    c. Contacting the **police** where a crime is suspected
    d. Liaising with health professionals where appropriate

72. Referral timescales (best practice):

    a. **Immediate** — if the adult is at risk of serious harm or a criminal offence has occurred
    b. **Within 24 hours** — if the concern involves harm that may still be happening
    c. **Within 7 days** — for lower-level concerns that require monitoring or multi-agency discussion

Recording Safeguarding Concerns

73. You must make a record **as soon as possible**, including:

    a. Date and time of incident or disclosure
    b. Names of those involved
    c. What was seen, heard, or said (adult's words wherever possible)
    d. Factual observations (not opinions)
    e. Description of injuries/behaviours if relevant
    f. Actions you have taken
    g. Who you reported to, and when

74. Records must be:

    - Accurate
    - Factual
    - Dated, timed and signed
    - Stored securely and shared only on a need-to-know basis

75. Records are essential for safeguarding investigations and legal processes.

Support for Staff and Volunteers

76. Cerebral Palsy Sport recognises that safeguarding situations can be stressful. Staff and volunteers will be supported through:

    a. access to the LSO and management team
    b. debriefing after incidents
    c. appropriate supervision
    d. signposting to external support where required

77. No one will be treated unfairly for reporting a safeguarding concern in good faith.

Whistle Blowing

78. Cerebral Palsy Sport is committed to maintaining the highest standards of openness, integrity and accountability. Staff, volunteers, participants and partners should feel confident to raise concerns about unsafe practice, wrongdoing or misconduct without fear of reprisal. Whistleblowing is an important element of safeguarding and helps protect adults, staff, volunteers and the reputation of the organisation.

79. Whistleblowing is when a person raises a concern about wrongdoing within the organisation. This may include, but is not limited to:

    a. unsafe or poor safeguarding practice
    b. concerns about the behaviour of a staff member, volunteer or contractor
    c. breaches of policy or procedure
    d. criminal behaviour, fraud or corruption
    e. behaviour that places adults at risk of harm
    f. deliberate concealment of wrongdoing

    These concerns may not always be directly related to a safeguarding incident but may still pose risk to the safety and wellbeing of others.

80. Anyone can raise a whistleblowing concern by following the instructions in Appendix 7 – "*Whistle Blowing Flowchart".*

81. Cerebral Palsy Sport will take all whistleblowing concerns seriously and act upon them appropriately. Individuals who raise concerns in good faith will not be treated unfairly or suffer negative consequences. Victimisation of whistleblowers is strictly prohibited and may lead to disciplinary action.

Allegations Against Staff, Volunteers or Coaches

82. If a concern or allegation involves someone working for or representing Cerebral Palsy Sport:

    a. The individual may be suspended or removed from duties as a precautionary measure.
    b. CP Sport will consult with the Local Authority Safeguarding Adults Team, and/or the Police (if criminal behaviour is alleged)
    c. Internal disciplinary processes may run **alongside** statutory investigations.
    d. Confidentiality will be maintained; information shared on a need-to-know basis only.

83. Cerebral Palsy Sport will fully cooperate with external investigations.

DBS Referrals

84. Cerebral Palsy Sport has a **legal duty to refer** a person to the Disclosure and Barring Service (DBS) if:

    a. they have been removed from regulated activity because they caused harm,
    b. may have caused harm,
    c. or posed a risk of harm to an adult at risk.

85. The LSO/CEO will manage all DBS referrals.

Key Principles for Safeguarding Response

86. Safeguarding responses within Cerebral Palsy Sport are guided by the following principles:

a. **Safety first** — protect the adult from immediate harm.
b. **Listen and respect** — value the adult's voice and choices.
c. **Do not investigate** — your role is to report, not resolve.
d. **Confidentiality, not secrecy** — share only with those who need to know.
e. **Record everything** — accurate notes are essential.
f. **Act promptly** — delays place people at risk.
g. **Follow policy and procedure** — consistency protects everyone.

SECTION E — Safe Practice Guidelines

Overview

87. Cerebral Palsy Sport is committed to promoting safe environments and practices across all activities, events and programmes. These guidelines set out expectations for safe conduct in relation to:

    a. photography, filming and use of images
    b. supervision and staffing ratios
    c. transport arrangements
    d. away trips and overnight stays
    e. communication with carers and personal assistants
    f. roles and responsibilities during events
    g. late collection and emergency arrangements

88. These standards apply to staff, volunteers, coaches, participants and anyone acting on behalf of Cerebral Palsy Sport.

Photography, Filming and Use of Images

89. **Principles** - Photography and video can be valuable for celebration, communication and coaching. However, they can also be misused. Cerebral Palsy Sport ensures that:

    a. consent is always sought and recorded
    b. images are used safely, respectfully and lawfully
    c. individuals' dignity, identity and privacy are protected
    d. storage and sharing comply with the Data Protection Act 2018

90. **When Photography/Filming Is Allowed** - Photography or filming at Cerebral Palsy Sport events is permitted **only when:**

    a. the purpose has been declared
    b. consent has been obtained where required
    c. organisers have been informed in advance (where applicable)
    d. use complies with these guidelines

91. **Registration Requirements** - Depending on the type of photographer:

    a. Professional photographers - Must register with event organisers in advance, providing proof of identity and purpose.
    b. **Students or amateur photographers -** Must complete a Photography Registration Form and provide verification from their club/college.
    c. **Spectators/family members -** May take photos for personal use unless using **zoom or professional equipment**, in which case registration is required.

92. Good Practice for Using Images

a. Obtain **written consent** from the adult (or from a carer if the adult lacks capacity).
b. Avoid using full names, contact details, or identifiable personal information.
c. Use images showing adults in suitable and appropriate sportswear.
d. Focus images on activity, not on individuals unless specifically agreed.
e. Use images that reflect diversity and positive engagement.
f. Store images securely and delete them when no longer needed.

93. **Videoing as a Coaching Tool -** Video may be used for legitimate coaching and performance analysis where:

a. participants are informed beforehand
b. written consent is obtained
c. footage is stored securely and viewed only by authorised individuals

94. **Use of Images Abroad** - Safeguarding standards vary internationally. When travelling abroad:

a. participants and carers must be informed that images may be taken by others outside UK safeguarding norms
b. consent to travel must include acceptance of this context
c. staff should remain vigilant of inappropriate image-capturing

Supervision and Staffing Expectations

95. Cerebral Palsy Sport ensures that all activities are supervised by appropriately trained individuals.

96. Supervision Standards

a. Staffing must be appropriate to the activity, venue and needs of participants.
b. Supervisors must be familiar with this safeguarding policy.
c. Activities must have a designated person responsible for safeguarding on-site.
d. For single-sex groups, and where intimate support or overnight stays are involved, staffing should include an adult of the same gender wherever possible.

97. Staff Responsibilities During Activities - Staff and volunteers must:

a. maintain professional boundaries
b. monitor participation and wellbeing
c. uphold Codes of Conduct (Appendix 1- Code of Conduct for staff, volunteers and ambassadors)
d. complete head counts and registers
e. follow emergency and risk assessment procedures
f. ensure all equipment and environments are safe

Transport Arrangements

98. Transport to and from activities must promote participant safety.

99. General Principles

a. A written schedule of activities, times and locations should be provided in advance.
b. Carer/PA consent should be obtained for any organised transport.
c. Staff should never transport participants alone except in exceptional, risk-assessed circumstances.
d. All drivers must be suitably qualified, insured and briefed on safeguarding expectations.

100. Transport Safety Checklist

a. Vehicle is roadworthy, insured and accessible.
b. Sufficient staff supervision during journeys.
c. Planned rest breaks and safe pick-up/drop-off points.
d. Emergency contact details available for all travellers.
e. Any medical conditions must be shared with the transport provider before the journey commences.

Away Trips and Overnight Stays

101. Away trips can offer valuable opportunities for independence and enjoyment. They must be carefully planned.

102. Pre-Trip Planning

a. Conduct a full **risk assessment**, including venue, transport, accommodation and medical requirements.
b. Appoint staff roles: Head Coach, Team Manager, Safeguarding Lead, Support Staff.
c. Ensure all staff are safely recruited and trained.
d. Confirm accommodation safety, accessibility and staffing arrangements.
e. Share itinerary and emergency contact information with carers/PAs.

103. Participant Preparation - Participants (and where relevant, carers/PAs) must receive:

a. travel times
b. accommodation details
c. staffing list and contact numbers
d. kit and equipment requirements
e. costs and payment expectations

104. Staff Conduct on Trips

a. Staff must model safe, respectful behaviour at all times.
b. Alcohol must not be consumed when responsible for participants.
c. Registers and head counts must be completed regularly.
d. Staff must maintain professional boundaries.

105. Roles and Responsibilities on Trips

a. **Coaching Staff** - Responsible for safe training, warm-up, competition and activity delivery.
b. **Team Manager** - Responsible for participant welfare, logistics, communication and organisation.
c. **Safeguarding Staff** - Available throughout to support decision-making and manage concerns.
d. **Carers / PAs travelling with participants** - Remain in a spectator/support role unless previously briefed and agreed otherwise.

Late Collection Procedures

106. Late collection can create risk. Staff must:

    a. Wait with the adult in a safe public area with at least two staff present.
    b. Attempt to contact the carer/PA using the details provided.
    c. Contact emergency numbers if the primary carer cannot be reached.
    d. Never transport the adult in their own vehicle unless this has been risk-assessed and agreed by senior staff.
    e. Never leave an adult deemed at risk unattended.

    Repeated late collection incidents may require a review of participation arrangements.

Communication with Carers and Personal Assistants

107. Clear communication ensures safety and continuity of care.

108. Staff must provide carers/PAs with:

    a. event or session details
    b. travel arrangements
    c. emergency contacts
    d. medical or access arrangements
    e. changes to timetable or venue
    f. expectations for drop-off and collection

109. Carers and PAs must share relevant medical, behavioural or support information in advance to enable safe planning.

Key Expectations for Staff and Volunteers

110. Across all activities, staff and volunteers must:

    a. follow Codes of Conduct (Appendix 1 - Code of Conduct for staff, volunteers and ambassadors)
    b. promote safety, dignity and respect
    c. maintain confidentiality
    d. challenge unsafe or discriminatory behaviour
    e. never use their position for personal advantage
    f. ensure activities are inclusive and appropriately adapted

111. Failure to adhere with CP Sport code of conducts (appendices 2, 3 and 4) may result in staff or volunteers being subjected to disciplinary procedures; and participants, parents, carers, or PA's may be restricted or refused entry to CP Sport events.

Important Contacts

112. Cerebral Palsy Safeguarding Contacts

Lead Safeguarding Officer (LSO)	Richard Todd	Click here to contact the CP Sport Safeguarding Team
Chief Executive Officer (CEO)	Brendan Tonks	Click here to contact the CP Sport Safeguarding Team
Board Designated Safeguarding Lead	Esther Jones	Click here to contact the CP Sport Safeguarding Team

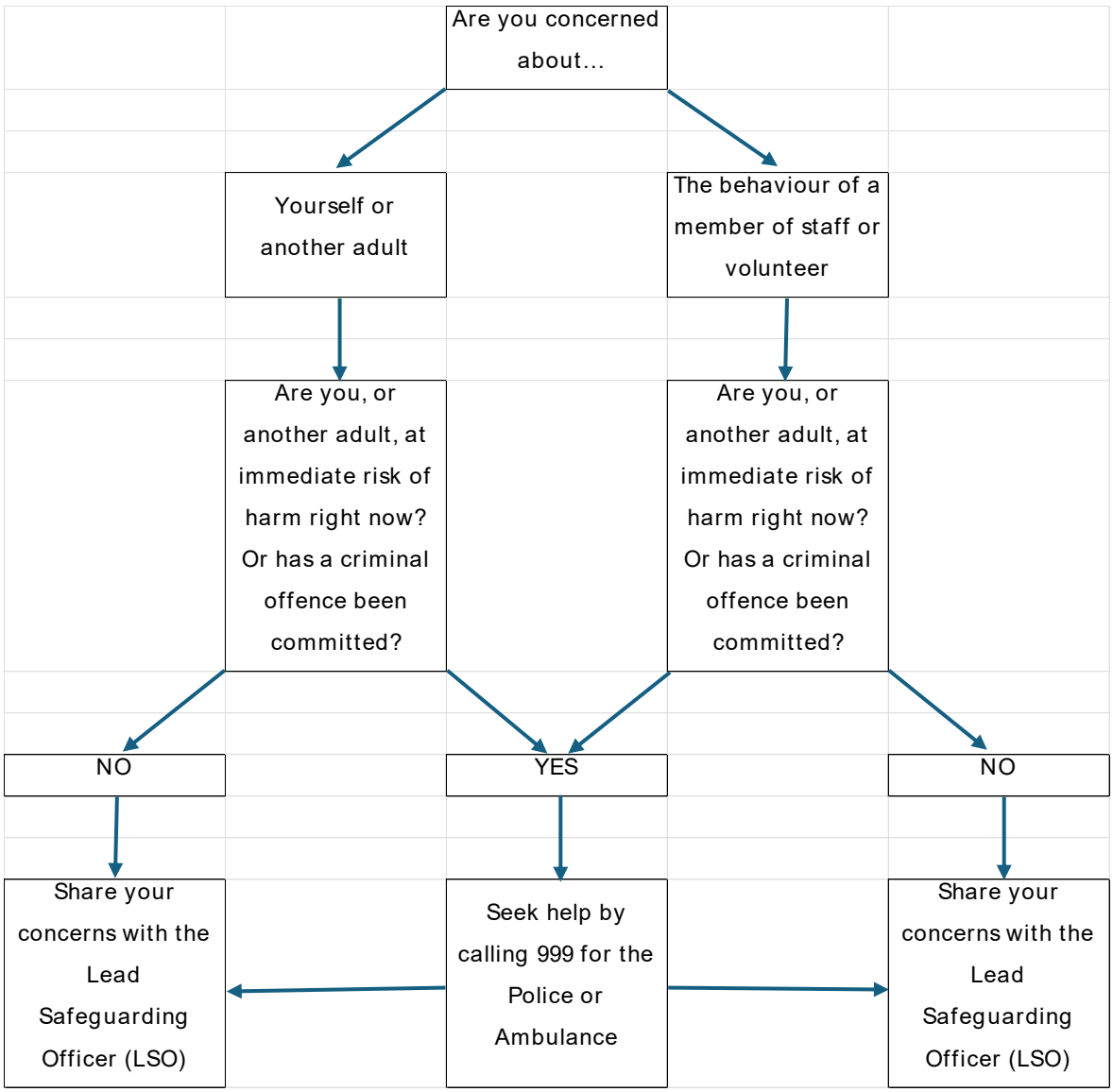
113. External Safeguarding Contacts

Ann Craft Trust (ACT)	www.anncrafttrust.org
Local Authority Adult Social Care Services (search by postcode)	https://www.nhs.uk/service-search/other-health-services/local-authority-adult-social-care/
Local Safeguarding Adults Board	https://www.anncrafttrust.org/resources/find-your-nearest-safeguarding-adults-board/
Local Police Force Services (search by postcode) NON-EMERGECY	https://www.police.uk/pu/find-a-police-force/
DBS	https://www.gov.uk/government/organisations/disclosure-and-barring-service
Citizens Advice Bureau (search by postcode)	https://www.citizensadvice.org.uk/about-us/contact-us/nearby/

Review of Policy

114. This policy will be reviewed **annually**, or earlier if governance standards, legislation or organisational needs change.

Appendix 1 – Reporting Concerns Flow Chart



Supporting the adult through the process

- Speak with the Adult involved
- Determine the wishes of the adult involved
- Seek external guidance and advice (Important Contacts list)
- Offer support and information for the adult involved to make informed choices
- Put measures in place to keep the adult safe during the activity
- Ask for consent to share any concerns with statutory agencies (if appropriate)
- Keep the adult informed and involved throughout the process

Appendix 2: Cerebral Palsy Sport Code of Conduct [Staff, Ambassadors and Volunteers]

All staff, volunteers and coaches at Cerebral Palsy Sport play a crucial role in creating a safe, inclusive and empowering environment. This Code of Conduct outlines the standards required to ensure that every adult is treated with respect and dignity, and that the highest safeguarding standards are upheld at all times.

You must always act professionally, ethically and with integrity. Treat every adult fairly, without discrimination or favouritism, and value the individuality and unique needs of each participant. Maintain appropriate boundaries; do not form personal, intimate or sexual relationships with any adult you support, and avoid behaviour that could be misinterpreted or lead to a conflict of interest.

You must prioritise safety and wellbeing in every activity and session. Plan appropriate, inclusive and meaningful activities, adapting where needed to meet individual requirements. Ensure environments are safe, equipment is appropriate and risks are identified and managed. Follow this safeguarding policy at all times and immediately report any concern, disclosure or suspicion of abuse.

Communicate clearly, calmly and respectfully. Encourage participation, independence and decision-making. Listen actively to adults and take their views seriously. Maintain confidentiality, sharing information only when necessary to protect someone from harm.

Uphold high personal standards. Do not use alcohol, drugs or smoke during any activity. Treat all colleagues, carers, families and participants with courtesy. Avoid being alone with an adult at risk wherever possible, and ensure transparency in your actions.

By following this Code, you help create a safe, positive culture where adults can thrive and participate confidently in Cerebral Palsy Sport.

Appendix 3 – Cerebral Palsy Code of Conduct [Personal Assistants, Parents and Carers]

Personal Assistants (PAs), parents and carers play an essential role in enabling adults to participate safely and confidently in Cerebral Palsy Sport activities. This Code outlines the expectations for conduct, communication and partnership working to ensure the wellbeing and dignity of all participants.

Your role is to provide positive, respectful support that promotes choice, independence and enjoyment. Encourage participation in a constructive way, but never pressure an adult into activities they do not wish to undertake. Prioritise the adult's autonomy and communicate any changes in their health, needs or circumstances to staff as early as possible.

Ensure the adult arrives prepared with appropriate clothing, equipment, medication and refreshments. Provide accurate and up-to-date information about medical conditions, access requirements, communication preferences and emergency contacts. This information enables staff to plan safely and inclusively.

Communicate openly and respectfully with staff and volunteers. Respect their roles and responsibilities during sessions, particularly where safety, coaching or decision-making is required. Carers should avoid intervening unless safety requires it or it has been agreed with staff.

Model positive behaviour. Treat all participants, families, staff and volunteers with kindness and patience. Challenge discriminatory or unsafe behaviour and report safeguarding concerns immediately. Avoid language or conduct that could be perceived as aggressive, intimidating or disrespectful.

Respect boundaries at all times. Do not use alcohol, drugs or smoke during Cerebral Palsy Sport sessions or events. Support punctuality at drop-off and collection, informing staff promptly of delays.

By following this Code, you contribute to a culture where adults feel safe, respected and able to fully enjoy their involvement in Cerebral Palsy Sport.

Appendix 4 – Cerebral Palsy Code of Conduct [Participants]

As a participant in Cerebral Palsy Sport, you are part of a community that values respect, safety, fairness and inclusion. This Code of Conduct explains the behaviour expected from all participants to help ensure that every activity is positive, enjoyable and safe.

Treat others with kindness, respect and understanding. Be welcoming to new participants and support one another to feel included. Respect differences in ability, background, identity and personal needs. Avoid bullying, discrimination, teasing or behaviour that could hurt or isolate others.

Keep yourself and others safe. Follow instructions from staff and volunteers, and use equipment properly. Let staff know if you feel unsafe, worried, unwell or unsure about something. Report any behaviour that concerns you; including bullying, harassment, discrimination or inappropriate messages online.

Take part in activities fairly and positively. Arrive on time where possible and communicate if you expect to be late. Wear appropriate kit and bring anything you may need, such as medication or refreshments. Try your best, celebrate your progress and encourage others. Being competitive is fine, but respect and good sportsmanship come first.

Behave responsibly. Do not shout, swear, hit or act aggressively. Avoid alcohol, drugs or banned substances during any activity or event. Respect boundaries and personal space. Use social media positively and never post harmful or inappropriate content about others.

Take care of equipment and respect the venues you use. Look after your belongings and tell staff if something goes missing.

By following this Code, you help create a safe, fun and positive atmosphere where everyone can enjoy and benefit from being part of Cerebral Palsy Sport. Adhere to all CP Sport Policies and Procedures.

Appendix 5 – Cerebral Palsy Sport DBS Matrix

This DBS Matrix has been developed by CP Sport, with the support of the following organisations, who supported our team to appropriately allocate the correct DBS checks to the roles outlined below.

1. National Advisor, Partnership Team, Disclosure and Barring Service.
2. Customer Service Consultant, First Advantage.

CP Sport Staff roles	
Senior Leadership	Enhanced with Adult and Child Workforce
Sport/Project Delivery Officer	Enhanced with Child Workforce
Marketing and Comms Officer	Enhanced with Adult and Child Workforce
CP Sport Volunteer roles	
Trustee	Enhanced with Child Workforce
Ambassador	Enhanced with Adult and Child Workforce
Volunteers	Enhanced with Child Workforce

These DBS roles will be reviewed annually as part of the Adult Policy review.

Appendix 6 – Cerebral Palsy Sport Adult Safeguarding Training Matrix

This matrix outlines the appropriate safeguarding adults training level requirements for different roles across CP Sport.

Training Key

SG1 – Basic Introduction to Safeguarding (administrative roles)

- An Introduction to Safeguarding Adults in the Sport and Activity Sector - eLearning - Ann Craft Trust
  or
- https://www.ukcoaching.org/our-courses/courses/safeguarding-adults-elearning/
  Recommended ACT

SG2 – Intermediate Safeguarding Training (sport and activity delivery roles)

- Safeguarding Adults | UK Sport and Ann Craft Trust - UK Coaching

SG3 – Advanced Safeguarding Training (safeguarding leadership roles)

- Advanced Training for Safeguarding Adults in Sport & Activity Training - ACT

SG4 –Board Training (strategic safeguarding roles)

- Board Training for Safeguarding Adults in Sport & Activity - ACT

Role	Training – essential	Training – Desirable	Renewal period
Board Member	SG1 / SG4		3 years
Board (DSL)	SG1 / SG4	SG2	3 years
CEO	SG1 / SG4	SG2 / SG3	3 years
Lead Safeguarding Officer (LSO)	SG1 / SG2 / SG3 / SG4		3 years
Dept LSO	SG1 / SG2 / SG3 / SG4		3 years
Delivery Team	SG1 / SG2		3 years
Administrative Team	SG1		3 years
Ambassadors	SG1	SG2	3 years
Volunteers	SG1	SG2	3 years
Event Officials	SG1	SG2	3 years

Appendix 7 – Cerebral Palsy Sport 'Whistle Blowing' and 'Escalation' Flowchart

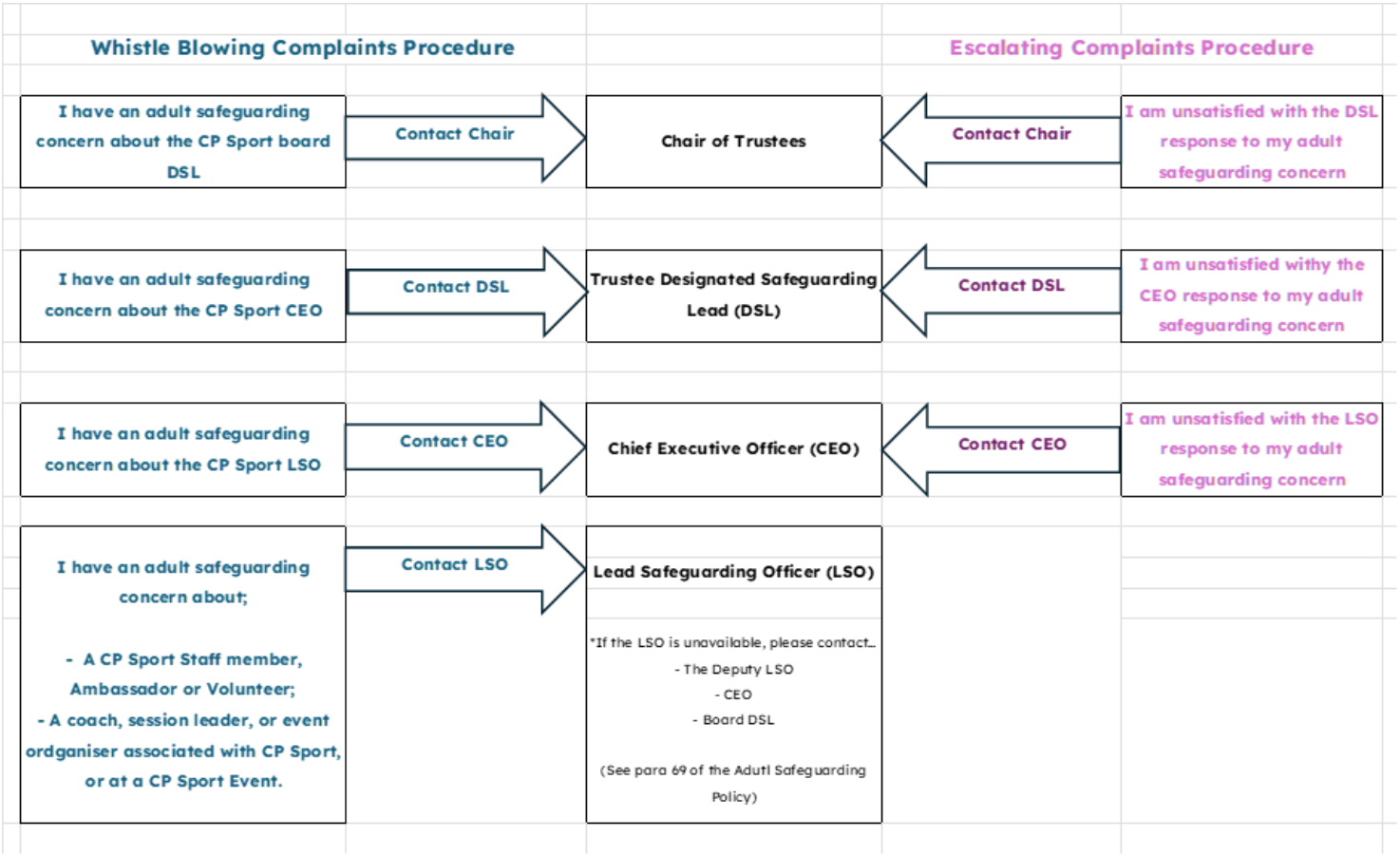
Cerebral Palsy Sport – Adult Safeguarding Escalation and Whistle Blowing flowchart

Whistle Blowing Procedure

The whistle blowing procedure outlines where concerns should be directed in the case that they relate to a CP Sport staff member, ambassador, volunteer or other event-based role.

Escalation Policy

The escalation procedure outlines where concerns should be directed in the case that you are concerned about the actions/feedback of the initial disclosure/complaint to CP Sport.



Policy Version Control

Policy	**Safeguarding Adults Policy**
Current Version	**V1**

Date	Policy Update	Version	Board Approval Date
23.10.25	New Policy Drafted by CEO (following full policy review).	V1	Awaiting approval
28.01.2026	Policy Approved by Board (General Meeting)	V1	Approved