

Appendix A Contact Details

1 Designated Officers

Organisation	Designation	Contact
Wakefield MDC	SRU Project Officer	01924 307807 24 hr answering service

2 Social Services / Police / Other

Social Care Direct (24 hours)	01924 303456
West Yorkshire Police (Child protection unit)	0845 6060606

3 Other National Numbers

Organisation	Contact
NSPCC	Tel 020 7825 2500 Helpline (24 hour) 0800 800 500
Childline UK	0800 11111
Sports Coach UK	0113 274 4802
Samaritans	0345 909090

Appendix B

Good Practice Guidelines

All WMDC staff and coaches who are working on WMDC's programmes will be given a copy of the following Guidelines. The guidelines will form an integral part of the training within the induction period.

Good practice means:

- always working in an open environment (eg avoiding private or unobserved situations and encouraging an open environment (eg no secrets)
- treating all young people/disabled adults equally, and with respect and dignity
- always putting the welfare of each young person first, before winning or achieving goals
- maintaining a safe and appropriate distance with performers (eg it is not appropriate to have an intimate relationship with a child or to share a room with them)
- building balanced relationships based on mutual trust which empowers children to share in the decision-making process
- making sport fun, enjoyable and promoting fair play
- ensuring that if any form of manual/physical support is required, it should be provided openly and according to guidelines provided by the NGB. Care is needed, as it is difficult to maintain hand positions when the child is constantly moving. Young people should always be consulted and their agreement gained. Some parents are becoming increasingly sensitive about manual support and their views should always be carefully considered
- keeping up to date with the technical skills, qualifications and insurance in sport
- involving parents/carers wherever possible (eg for the responsibility of their children in the changing rooms). If groups have to be supervised in the changing rooms, always ensure parents/teachers/coaches/officials work in pairs
- ensuring that if mixed teams are taken away, they are accompanied by a male and female member of staff. (NB however, same gender abuse can also occur).
- ensuring that at tournaments or residential, adults should not enter children's rooms or invite children into their rooms
- being an excellent role model – this includes not smoking or drinking alcohol in the company of young people
- giving enthusiastic and constructive feedback rather than negative criticism
- recognising the developmental needs and capacity of young people and disabled adults – avoiding excessive training or competition and not pushing them against their will.

Practice to be avoided

The following will be **avoided** except in emergencies. If cases arise where these situations are unavoidable they should only occur with the full knowledge and consent of someone in charge in the Organisation or the child's parents. For example, a child sustains an injury and needs to go to hospital, or a parent fails to arrive to pick up a child at the end of a session:

- Avoid spending excessive amounts of time alone with children away from others.

Appendix B cont.

Practice never to be sanctioned

The following should **never** be sanctioned. The coach should never:

- engage in rough, physical or sexually provocative games, including horseplay
- share a room with a child
- allow or engage in any form of inappropriate touching
- allow children to use inappropriate language unchallenged
- make sexually suggestive comments to a child, even in fun
- reduce a child to tears as a form of *control*
- allow allegations made by a child to go unchallenged, unrecorded or not acted upon
- do things of a personal nature for children or disabled adults, that they can do for themselves
- invite or allow children to stay with you at your home unsupervised
- engage in a relationship of an intimate nature with a child.
- take children to your home where they will be alone with you.

NB It may sometimes be necessary for staff or volunteers to do things of a personal nature for children, particularly if they are young or are disabled. These tasks should only be carried out with the full understanding and consent of parents and the performers involved. There is a need to be responsive to a person's reactions. If a person is fully dependent on you, talk with him/her about what you are doing and give choices where possible. This is particularly so if you are involved in any dressing or undressing of outer clothing, or where there is physical contact, lifting or assisting a child to carry out particular activities. Avoid taking on the responsibility for tasks for which you are not appropriately trained.

If any of the following incidents should occur, you should report them immediately to another colleague and make a written note of the event. Parents should also be informed of the incident:

- if you accidentally hurt a performer
- if he/she seems distressed in any manner
- if a performer appears to be sexually aroused by your actions
- if a performer misunderstands or misinterprets something you have done.

Appendix C

Types and Recognition of Abuse

Abuse and Neglect

Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by a stranger.

- **Neglect** – where adults fail to meet a child’s basic physical and/or psychological needs, likely to result in the serious impairment of the child’s health or development (eg failure to provide adequate food, shelter and clothing, failure to protect a child from physical harm or danger, or the failure to ensure access to appropriate medical care or treatment). It may also include refusal to give children love, affection and attention. Neglect in sport could include a teacher or coach not ensuring children were safe, exposing them to undue cold, heat or to unnecessary risk of injury.
- **Physical abuse** – where adults physically hurt or injure children by hitting, shaking, throwing, poisoning, burning, biting, scalding, suffocating, drowning or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer feigns the symptoms of, or deliberately causes ill health to a child whom they are looking after eg fictitious illness by proxy or Munchausen’s syndrome by proxy. Examples of physical abuse in sport may be when the nature and intensity of training and competition exceeds the capacity of the child’s immature and growing body; where drugs are used to enhance performance or delay puberty.
- **Sexual abuse** – where girls and boys are abused by adults (both male and female) who use children to meet their own sexual needs. This could include full sexual intercourse, masturbation, oral sex, anal intercourse and fondling. Showing children pornographic material (books, videos, pictures) is also a form of sexual abuse. In sport, coaching techniques, which involve physical contact with children, could potentially create situations where sexual abuse may go unnoticed. The power of the coach over young performers, if misused, may also lead to abusive situations developing.
- **Emotional abuse** – is the persistent emotional ill treatment of a child such as to cause severe and persistent adverse effects on the child’s emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may feature age or developmentally inappropriate expectations being imposed on children. It may involve causing children to feel frightened or in danger by being constantly shouted at, threatened or taunted which may make the child very nervous and withdrawn. Some level of emotional abuse is involved in all types of ill treatment of a child. Emotional abuse in sport may occur if children are subjected to constant criticism, name-calling, sarcasm, bullying or unrealistic pressure to consistently perform to high expectations.

The above definitions are adapted from Department of Health (1999) *Working Together to Safeguard Children – A guide to inter-agency working to safeguard and promote the welfare of children.*

Appendix C continued.

Indicators of Abuse

Indications that a child may be being abused **may** include the following:

- Unexplained or suspicious injuries such as bruising, cuts or burns, particularly if situated on a part of the body not normally prone to such injuries.
- An injury for which the explanation seems inconsistent.
- The child describes what appears to be an abusive act involving him/her.
- Someone else (a child or adult) expresses concern about the welfare of another child.
- Unexplained changes in behaviour (eg becoming very quiet, withdrawn or displaying sudden outbursts of temper).
- Inappropriate sexual awareness.
- Engaging in sexually explicit behaviour.
- Distrust of adults, particularly those with whom a close relationship would normally be expected.
- Has difficulty in making friends.
- Is prevented from socialising with other children.
- Displays variations in eating patterns including overeating or loss of appetite.
- Loses weight for no apparent reason.
- Becomes increasingly dirty or unkempt.

It should be recognised that this list is not exhaustive and the presence of one or more of the indicators is not proof that abuse is actually taking place. It is **not** the responsibility of those working in sport to decide that child abuse is occurring but it is their responsibility to act on any concerns.

Bullying

It is important to recognise that in some cases of abuse, it may not always be an adult abusing a young person. It can occur that the abuser may be a young person, for example in the case of bullying. Bullying may be seen as deliberately hurtful behaviour, usually repeated over a period of time, where it is difficult for those bullied to defend themselves. Nancy Duin defined bullying as *repeated (systematic) aggressive verbal, psychological or physical conduct by an individual or group against another person or persons (Bullying, a Survival Guide, produced by BBC Education).*

Although anyone can be the target of bullying, victims are typically shy, sensitive and perhaps anxious or insecure. Sometimes they are singled out for physical reasons – being overweight, physically small, having a disability or belonging to a different race, faith or culture. Girls and boys can be bullies although it seems to be more conspicuous in boys. Although bullying often takes place in schools research shows it can and does occur anywhere there is inadequate supervision – on the way to and from school, at a sporting event, in the playground and changing rooms.

Bullies come from all walks of life, they bully for a variety of different reasons and may even have been abused. Typically, bullies can have low self-esteem, be excitable, aggressive and jealous. Crucially, they have learned how to gain power over others and there is increasing evidence to suggest that this abuse of power can lead to crime.

The competitive nature of sport makes it an ideal environment for the bully. The bully in sport can be:

- a parent who pushes too hard
- a coach who adopts a win-at-all costs philosophy
- a player who intimidates inappropriately
- an official who places unfair pressure on a person.

Bullying can include:

- Physical: eg hitting, kicking and theft.
- Verbal: eg name-calling, constant teasing, sarcasm, racist or homophobic taunts, threats, graffiti and gestures.
- Emotional: eg tormenting, ridiculing, humiliating and ignoring.
- Sexual: eg unwanted physical contact or abusive comments.

Appendix C continued.

The damage inflicted by bullying can frequently be underestimated. It can cause considerable distress to children and disabled adults, to the extent that it affects their health and development or, at the extreme, causes them significant harm (including self-harm). There are a number of signs that may indicate that a young person or disabled adult is being bullied:

- Behavioural changes such as reduced concentration and/or becoming withdrawn, clingy, depressed, tearful, emotionally up and down, reluctance to go to school, training or sports club.
- A drop off in performance at school or standard of play.
- Physical signs such as stomachaches, headaches, difficulty in sleeping, bed-wetting, scratching and bruising, damaged clothes and bingeing on food, cigarettes or alcohol.
- A shortage of money or frequent loss of possessions.

Appendix D Guidance for SRU members of staff

Promoting Good Practice with Young People

1 Introduction

Child abuse, particularly sexual abuse, can arouse strong emotions in those facing such a situation. Staff should always be vigilant to the possibilities of child abuse. Abuse can occur within many situations including the home, school and the sporting environment. Some individuals will actively seek employment or voluntary work with young people in order to harm them. A coach, instructor, teacher, official or volunteer may have regular contact with young people and be an important link in identifying cases where a young person needs protection. All concerns should be reported and the appropriate procedures followed.

2 Good Practice Guidelines

All personnel in sport will be encouraged to demonstrate exemplary behaviour to get the best possible outcomes for children. These Good Practice Guidelines are outlined in appendix B and are common sense examples of how to create a positive culture and climate within sport.

The Good Practices Guidelines will be given to all clubs and coaches on WMDC programmes, using WMDC 's facilities or on the WMDC / VOX Club databases.

3 Code of Ethics and Conduct

WMDC will in addition to its own Code of Conduct encourage all staff to adopt SportsCoach UK's Code of Ethics and Conduct. The Code will encourage:

- the development of an open and positive climate in sport
- poor practice to be reported
- investigations to be carried out
- disciplinary action to be taken if appropriate.

4 Player Registration

Parents of all players taking part in organised Council programmes will be required to complete a registration form. This will include:

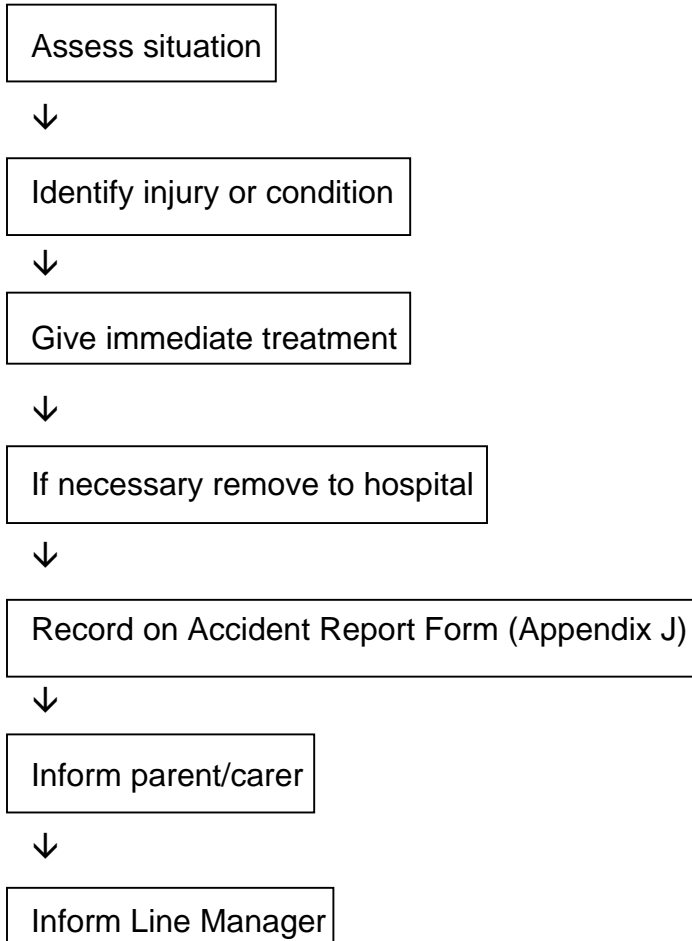
- securing parental consent in writing to acting *in loco parentis*, if the need arises to give permission for the administration of emergency first aid and/or other medical treatment
- awareness of any medicines being taken by participants, or existing injuries
- keeping a written record of any injury that occurs, along with the details of any treatment given
- requesting written parental consent if club officials are required to transport young people in their cars.

All information will be covered by the Data Protection Act.

Appendix E Dealing with Accidents and Injuries:

- All WMDC SRU facilities operate with qualified First Aid personnel on site. If coaching “off site” at least one coach or member of staff will be First Aid trained to current Emergency First Aid Certificate level.

In case of accident or injury:



- Accident Report Forms can be obtained from either the Duty Manager of the facility where the coaching activity is taking place or from the Sports Development Unit if the coaching activity is taking place at an outside venue.

Appendix F Incident Record Form

To be filled in by the duty officer

Name of person/member of staff having concerns:	Position:
Person's/Staff's name:	Date of birth:
Address:	
Parents/carers names and address:	
Date and time of any incident:	
Your observations:	
Exactly what the child said and what you said: (Remember, do not lead the child – record actual details. Continue on separate sheet if necessary)	
Details of actual evidence e.g. Bruising, bleeding, changes in behaviour of child or parent. (Continue on separate sheet if necessary.)	
Action taken so far:	

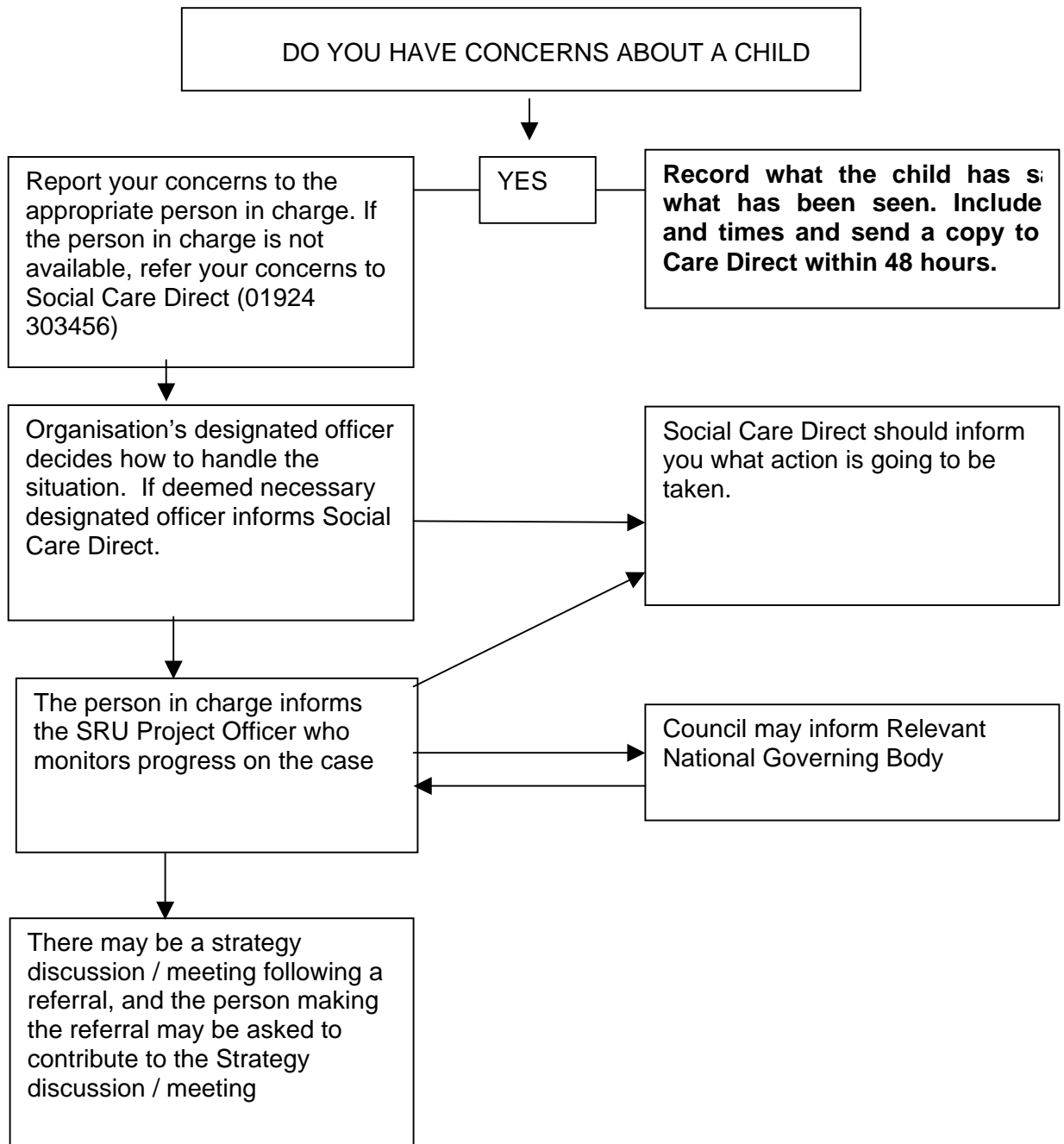
Who has been contacted?	
Police yes/no	If yes Name & contact number Details of advice received
Social Services yes/no	If yes Name & contact number Details of advice received
NGB yes/no	If yes – which Name & contact number Details of advice received
Sport & Recreation Unit Project Officer yes/no	If yes – which Name & contact number Details of advice received
Other (eg NSPCC) yes/no	If yes – which Name & contact number Details of advice received
Signature: _____	
Date: _____	
Print name: _____	

NB A copy of this form should be sent to social services after the telephone report. Remember to maintain confidentiality on a *need to know* basis – only if it will protect the child. Do not discuss this incident with anyone other than those who need to know.

Appendix G

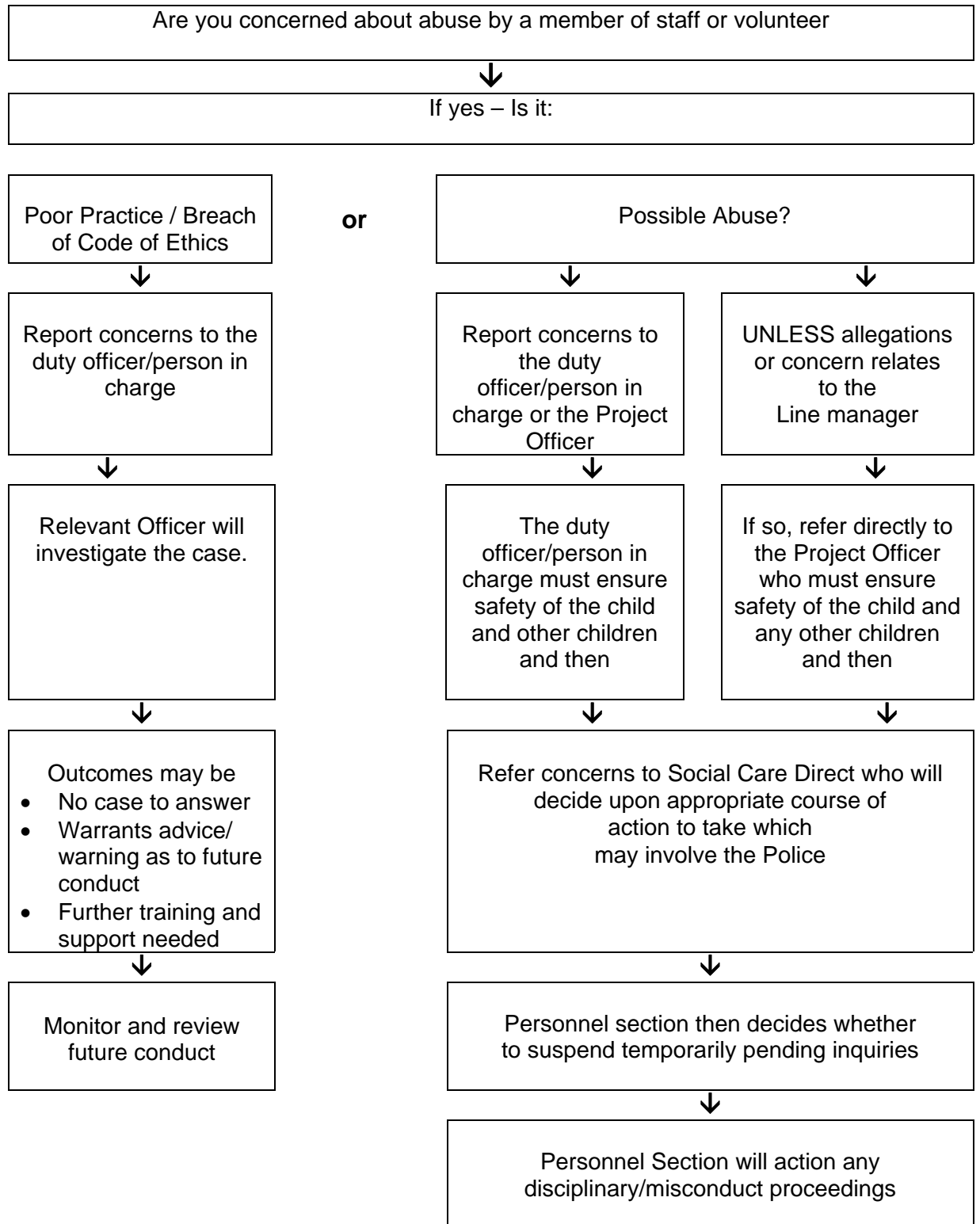
A Quick Guide to the Procedures

This guide is designed to inform the most appropriate action in relation to concerns about either a parent or carer (eg outside the immediate sporting environment).



Appendix H

What to do if you have Concerns about Child Abuse by a Member of Staff or Volunteer



If you do not know who to turn for advice or are worried about sharing your concerns with a senior colleague, you should contact the social services direct (or the NSPCC on 0800 800 500, or Childline on 0800 1111).

Appendix J

Recording Authorisation Form.

Date _____

Full Name _____

Address _____

Tel No. _____

Subjects name _____

Relationship _____

Reason for recording _____

Equipment used _____

Camera

video

other (Please state)

I declare that the above information is valid and the images will only be used for the reasons given.

Sign _____

I authorise the use of recording equipment, by the above named person

Name _____

Position _____

Area authorised for recording _____

The management reserves the right to revoke authorisation at any time.