

ST MARTINS KARATE GROUP

Safeguarding Adults Policy and Procedures

Protecting adults through respectful, proportionate and prompt action

Organisation	St Martins Karate Group
Clubs covered	St Martins Junior Karate Club and St Martins Karate Carnforth
Safeguarding contacts	Paul Turner (DSL) and Chris Haggan (Deputy DSL)
Safeguarding email	safeguarding@stmartinsjunior karateclub.co.uk
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Approved by Paul Turner and Chris Haggan

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Policy information

This policy is owned by St Martins Karate Group and applies to both clubs, all sessions and all related activities. St Martins Karate Group is a member club of CMAA, its national supporting body. This policy should be read alongside relevant CMAA safeguarding guidance, codes of conduct and reporting arrangements. CMAA may be contacted for advice and support, but seeking CMAA advice must never delay emergency action or a referral to the police, Adult Social Care or another statutory agency where this may be required.

1. Purpose, scope and status

This policy explains how St Martins Karate Group safeguards adults who take part in karate classes, gradings, competitions, demonstrations, courses, social activities, trips and online or digital activity connected with the Group. It covers all adults, while recognising the additional statutory protection that applies where an adult has care and support needs and is experiencing, or is at risk of, abuse or neglect and is unable to protect themselves because of those needs.

It applies to:

- all instructors, assistant instructors, volunteers and anyone acting on behalf of the Group;
- all adult members aged 18 or over, whether or not they currently have care and support needs;
- carers, support workers, relatives, visitors and contractors while participating in or attending

Group activities; and

- both St Martins Junior Karate Club and St Martins Karate Carnforth.

Compliance is mandatory. A failure to follow this policy may result in removal from duties, exclusion from activities, disciplinary action, referral to CMAA and/or referral to statutory agencies.

2. Adult safeguarding principles

- Empowerment: adults will be supported and encouraged to make their own informed decisions and to express the outcomes they want.
- Prevention: it is better to act before harm occurs, including through safe practice, clear boundaries and early reporting.
- Proportionality: responses will be the least intrusive appropriate response to the risk presented.
- Protection: support and representation will be considered for adults in greatest need.
- Partnership: the Group will work with the adult, CMAA and relevant agencies while recognising that local authorities and the police hold statutory responsibilities.
- Accountability: decisions and actions will be transparent, appropriately recorded and capable of review.
- Every adult has the right to be treated with dignity and respect and to participate in a safe, positive and inclusive environment.
- Safeguarding is everyone's responsibility. Concerns must never be ignored or assumed to be someone else's responsibility.
- No adult will be treated less favourably because of disability, age, sex, gender reassignment, race, religion or belief, sexual orientation, marriage or civil partnership, pregnancy or maternity, socio- economic background or any other status.
- Information will be shared lawfully, proportionately and only where necessary for safeguarding, safety or legal purposes.

3. Roles and responsibilities

3.1 Designated Safeguarding Lead (DSL) Paul Turner is the Designated Safeguarding Lead. The DSL leads the Group's adult safeguarding arrangements, receives concerns, ensures appropriate action and referrals, seeks advice from CMAA where useful, liaises with statutory agencies, and oversees secure records and policy review.

3.2 Deputy Safeguarding Lead

Chris Haggan is the Deputy Safeguarding Lead. The Deputy acts when the DSL is unavailable, supports safeguarding administration and must act directly where delay could place an adult at risk.

3.3 Everyone involved with the Group

- must recognise and report concerns promptly;
- must listen to the adult and respect their views, wishes and dignity;
- must follow codes of conduct, safe-practice rules and professional boundaries;
- must not investigate allegations, test the truth of a disclosure or confront a person alleged to have caused harm;
- must complete safeguarding learning appropriate to their role and cooperate with safeguarding enquiries; and
- may contact statutory agencies directly where an adult is in immediate danger, a crime may be in progress, or the DSL/Deputy cannot be reached and delay would be unsafe.

4. Legal and guidance framework

This policy has regard to relevant law and guidance in England, including:

- Care Act 2014 and the Care and Support Statutory Guidance, particularly adult safeguarding duties;
- Mental Capacity Act 2005 and its Code of Practice;
- Human Rights Act 1998 and Equality Act 2010;
- Data Protection Act 2018 and UK GDPR;
- Domestic Abuse Act 2021;
- Sexual Offences Act 2003;
- Modern Slavery Act 2015;
- Serious Crime Act 2015, including coercive or controlling behaviour and female genital mutilation

provisions;

- Safeguarding Vulnerable Groups Act 2006, Protection of Freedoms Act 2012 and relevant Disclosure and Barring Service requirements;
- CMAA Safeguarding Adults Policy, codes and reporting arrangements;
- Ann Craft Trust guidance for safeguarding adults in sport and activity; and
- the standards and guidance associated with the Safeguarding Code in Martial Arts.

An adult is a person aged 18 or over. The term adult at risk is used in this policy in the Care Act sense:

an adult who has needs for care and support, is experiencing or at risk of abuse or neglect, and because of those needs is unable to protect themselves from the abuse or neglect or the risk of it.

5. Adult at risk, capacity and consent

5.1 Presumption of capacity Adults will be presumed to have capacity to make their own decisions unless it is established otherwise. Capacity is decision-specific and time-specific. A diagnosis, disability, communication difficulty, age, appearance or an apparently unwise decision does not by itself mean that a person lacks capacity.

5.2 Supporting decision-making

- Provide information in an accessible way and allow sufficient time.
- Use the person's preferred method of communication and involve a trusted supporter, advocate, carer or support worker where the adult agrees.
- Take reasonable steps to help the adult understand, retain, use or weigh relevant information and communicate a decision.
- Ask the adult what they want to happen and record their desired outcomes.

5.3 Consent and action without consent Where an adult has capacity, their wishes should normally guide the safeguarding response. However, information may need to be shared or action taken without consent where there is an immediate or serious risk, a risk to another person, a child may be at risk, a serious crime may have been committed, staff or volunteers may be implicated, coercion or undue influence is suspected, or there is another lawful and proportionate reason. The adult should normally be told what will be shared and why, unless doing so would increase risk or prejudice an investigation.

The Group will not conduct formal capacity assessments beyond what is necessary for an immediate club decision. Where capacity is genuinely in question or a best-interests decision may be required, advice will be sought from Adult Social Care, health professionals or another appropriate authority.

6. Forms of abuse, neglect and exploitation

Abuse is a violation of an individual's human and civil rights by another person or persons. It may be deliberate or arise through neglect, omission, poor practice or ignorance. It can happen once or repeatedly, in any relationship, and inside or outside karate.

Physical abuse: Assault, hitting, slapping, pushing, inappropriate restraint, misuse of medication, excessive or unsafe training, deliberate injury, or using legitimate karate contact as a disguise for punishment or aggression.

Sexual abuse: Rape, sexual assault, unwanted touching, sexual harassment, exposure, sexualised communication, non-consensual images, grooming or any sexual activity to which the adult did not or could not consent.

Psychological or emotional abuse: Threats, humiliation, intimidation, coercion, controlling behaviour, isolation, verbal abuse, cyber abuse, unreasonable demands or persistent criticism.

Financial or material abuse: Theft, fraud, scams, exploitation, pressure concerning money or property, misuse of benefits, or taking payments or belongings without valid consent.

Neglect and acts of omission: Ignoring medical, physical, emotional or support needs; failure to provide access to appropriate care; withholding necessities; or unsafe disregard of known needs.

Discriminatory abuse: Harassment, slurs, unequal treatment or denial of opportunities because of a protected characteristic or other aspect of identity.

Organisational abuse: Poor or abusive practice within an organisation, including rigid routines, unsafe culture, repeated failures to respect dignity, or prioritising the organisation over the adult.

Domestic abuse: Physical, sexual, emotional, psychological, economic or controlling and coercive behaviour between people aged 16 or over who are personally connected.

Modern slavery and exploitation: Human trafficking, forced labour, servitude, sexual exploitation, criminal exploitation, cuckooing and related coercion.

Self-neglect: Serious neglect of personal hygiene, health or surroundings, including hoarding, where this creates risk. Self-neglect requires a sensitive, person-centred response and is not automatically evidence of incapacity.

Hate crime, harassment and mate crime: Abuse motivated by hostility or prejudice, stalking, targeted exploitation, or a supposed friendship used to control or exploit an adult.

Online and technology-facilitated abuse: Threats, impersonation, coercive messaging, image-based abuse, financial scams, stalking, doxxing or harassment through digital services.

The person causing harm may be an instructor, volunteer, member, family member, partner, carer, support worker, professional, acquaintance or stranger. Concerns arising outside the club remain safeguarding concerns and should be reported.

7. Recognising possible abuse or neglect

Indicators may include, but are not limited to:

- unexplained, suspicious or repeated injuries, or explanations that are inconsistent;
- an adult describing abuse, neglect or exploitation, or another person expressing concern;
- a marked change in behaviour, attendance, confidence, mood, presentation, hygiene or performance;

- fear of a particular person, reluctance to leave with someone, unexplained absences or sudden isolation;
- a carer, relative or other person always speaking for the adult or preventing private communication;
- unexplained loss of money, possessions or access to finances;
- unwanted sexual attention, sexualised behaviour, distress or unexplained changes in relationships;
- signs of coercion, controlling behaviour, threats, stalking or domestic abuse;
- unsafe living conditions, untreated medical needs, significant weight change or self-neglect;
- online secrecy, pressure, threats, scams, image-based abuse or distress;
- an instructor, member, carer or support worker behaving in a way that causes concern; or
- repeated poor practice, boundary breaches or excessive use of physical contact, force, exercise or authority.

One indicator does not prove abuse, and some adults show no obvious signs. Concerns should be recorded and passed on; instructors and volunteers must not attempt to diagnose, determine capacity, establish guilt or investigate.

8. Responding to a disclosure or concern

Immediate danger Call 999 if an adult is in immediate danger, a serious crime is in progress or urgent medical help is required. Do not delay while trying to contact the DSL or CMAA.

When an adult discloses harm or raises a concern:

- stay calm, listen carefully and give the adult time to communicate;
- take the concern seriously and acknowledge that it may have been difficult to speak;
- reassure the adult that they have done the right thing and are not to blame;
- do not promise secrecy; explain that information may need to be shared with people who can help

keep them or others safe;

- ask what the adult wants to happen and what outcomes matter to them;
- ask only open or clarifying questions needed to understand immediate safety, such as 'Tell me what happened' or 'Is there anything else you want me to know?';
- do not lead, interrogate, press for unnecessary details, investigate, confront the alleged person or discuss the matter widely;
- consider communication needs, access to a carer or advocate, immediate medical needs and whether the adult feels safe going home;
- explain what will happen next as far as possible;
- make a factual written record as soon as possible using the adult's own words; and
- report promptly to the DSL or Deputy, or directly to statutory agencies where necessary.

If the concern relates to a recent assault, preserve possible evidence where safe and appropriate. Do not clean an area, wash clothing, ask the adult to change unnecessarily or handle items more than required.

9. Reporting, advice and referral procedures

9.1 Internal reporting All adult safeguarding concerns, allegations and significant poor-practice incidents must be reported promptly to the DSL or Deputy. This includes concerns arising at home, in another organisation, online, in the community or in a care setting.

The shared safeguarding email is safeguarding@stmartinsjuniorkarateclub.co.uk. It is monitored regularly and concerns will be passed promptly to the appropriate safeguarding lead. Urgent concerns should also be reported by telephone.

9.2 Seeking advice from CMAA The DSL or Deputy may seek safeguarding advice from CMAA and should notify CMAA where required by membership rules or where a concern involves club practice, an instructor, volunteer or member.

CMAA advice can support, but does not replace, local safeguarding procedures.

Where an adult may be at immediate or significant risk, a crime may have been committed, or statutory safeguarding criteria may be met, the Group will contact the police or Lancashire Adult Social Care directly. CMAA must not be used as a gatekeeper and consultation must not delay a referral.

9.3 Referral to statutory agencies

- Immediate danger, urgent crime or urgent medical emergency: call 999.
- Lancashire Adult Social Care safeguarding concerns: 0300 123 6720 or the council's online adult safeguarding concern form.

- Out of hours urgent social care concerns: 0300 123 6722.
- Non-emergency police matters: call 101.
- Where a child may also be at risk, follow the Group's Safeguarding Children Policy and contact

Children's Social Care or the police as required.

The Group is not responsible for deciding whether abuse has occurred. The DSL or Deputy will record the reasons for the action taken, including any decision not to refer. The adult's views will be included, but a referral may be made without consent where lawful and necessary.

10. Concerns involving instructors, volunteers, members or carers

Any concern that an instructor, assistant, volunteer, contractor, member, carer or support worker has harmed an adult, may have harmed an adult, abused a position of trust, exploited an adult, committed an offence, breached serious professional boundaries or may pose a risk must be reported immediately.

- Report to the DSL, unless the concern relates to the DSL, in which case report to the Deputy.
- If the concern relates to both safeguarding leads, there is a conflict of interest, or the matter is not being addressed, contact CMAA and/or statutory agencies directly.

- Do not begin an internal investigation before seeking appropriate safeguarding or police advice.
- The Group may take neutral risk-management measures, including changing duties, increased supervision or suspension, without implying guilt.

- The adult, the person raising the concern and the person subject to the allegation will be treated fairly and offered appropriate support.

- CMAA will be informed where required or appropriate, without delaying statutory action.
- Where legal referral conditions are met, the Group will consider or make a referral to the

Disclosure and Barring Service.

11. Recording, information sharing and confidentiality

- A factual written record must be made as soon as possible and signed and dated.
- Record the date, time, place, people present, what was seen or heard, the adult's exact words where

possible, questions asked, visible injuries, wishes expressed, capacity or communication issues observed, actions taken and who received the information.

- Clearly distinguish fact, observation, allegation and opinion. Do not speculate.
- Records will be stored securely with restricted access and separately from general membership records.
- Information will be shared on a need-to-know basis for safeguarding, safety or legal purposes. Data protection law does not prevent necessary and proportionate safeguarding information sharing.
- Where practical, the adult will be told what information will be shared, with whom and why.
- Safeguarding records will be retained in line with legal, insurance, CMAA and safeguarding requirements, then disposed of securely.
- The DSL will maintain a chronology and record the reasons for decisions, including decisions not to share or refer.

12. Safer recruitment, training and supervision

St Martins Karate Group will take reasonable steps to prevent unsuitable people from holding positions of trust or responsibility. Safeguarding does not rely on a DBS certificate alone.

- Adult instructors and relevant volunteers will be subject to role-appropriate recruitment, identity, suitability, qualification and reference checks.
- Enhanced DBS checks, including barred-list information, will be obtained where the role is legally eligible. The Group will not request checks that are not permitted by law.
- Appointments will include clear roles, codes of conduct, safeguarding expectations and appropriate induction or supervision.
- Instructors regularly attend safeguarding and related training courses. Learning will be appropriate to role and refreshed periodically or when guidance changes.
- The DSL and Deputy will receive role-appropriate adult and child safeguarding training and keep their knowledge current.
- Concerns about conduct, boundary breaches or suitability will be addressed promptly and referred externally where required.

13. Safe practice in karate

13.1 Appropriate physical contact Karate involves demonstrations, partner work, controlled contact, posture correction, first aid and physical intervention to prevent injury. Any contact must be necessary, proportionate, respectful, appropriate to the adult's needs and connected to a legitimate coaching or safety purpose.

- Explain contact in advance where practical and seek the adult's agreement.
- Respect discomfort, refusal or a request for an alternative approach.
- Use the minimum contact necessary, preferably in an open and observable setting.
- Never use contact that is sexualised, humiliating, punitive, aggressive, secretive or intended to cause unnecessary pain.
- Do not use excessive exercise, contact or physical punishment as discipline.
- Make reasonable adjustments to drills, contact, protective equipment, breaks and communication where needed.
- Follow the Group's safe-practice rules for sparring, head contact, weapons, protective equipment, first aid and return after injury.

13.2 One-to-one situations Individual coaching or welfare conversations should normally take place in an open or observable area, while respecting the adult's privacy and dignity. Where a private conversation is appropriate,

another responsible person should know it is taking place and unnecessary isolation should be avoided.

13.3 Personal care and first aid Instructors do not routinely provide intimate or personal care. An adult who requires personal care should normally attend with an agreed carer, support worker or personal assistant. First aid may be given by an appropriate person with consent where possible, recorded in accordance with Group procedures, and with another person present where practical.

13.4 Restraint and emergency intervention Physical restraint is not a coaching or disciplinary method. Physical intervention may be used only where immediately necessary and proportionate to prevent serious harm, using the minimum force for the shortest time. Any such incident must be reported, recorded and reviewed.

14. Carers, support workers and reasonable adjustments

Adults may bring a carer, support worker, personal assistant, interpreter or other agreed supporter to training where needed. Their presence should be arranged with the club so that safety, insurance, access and confidentiality can be considered.

- The adult remains the primary person to communicate with and should be included directly in decisions.
- A carer or supporter should not automatically speak for the adult or override their wishes.
- Where the adult consents, the supporter may help with communication, routines, medication information, behaviour support, mobility or personal care.
- Any necessary support plan or reasonable adjustment will be agreed proportionately and kept under review.
- Supporters attending club activities must follow relevant codes of conduct and safeguarding expectations.
- Concerns about the conduct of a carer or support worker must be reported in the same way as any other safeguarding concern.

15. Photography, video, social media and electronic communication

15.1 Consent and publication

- Photography and publicity choices will be recorded through the adult membership form and may be amended or withdrawn.
- Where an adult lacks capacity for a specific image-use decision, images will not be used unless a lawful, documented best-interests basis has been established with appropriate advice.
- Images must be appropriate, respectful and connected to legitimate club activity.
- Adults must not be portrayed in a degrading, sexualised, misleading or unsafe manner.
- No photography or recording is permitted in toilets or any area being used for changing.

15.2 Personal devices and storage Instructors may use a personal phone or camera for authorised club images. Images must be uploaded promptly to the approved club destination and deleted from the device once no longer required, including from recently deleted or cloud-synchronised locations where practical. They must not be used for personal purposes.

15.3 Electronic communication

- Communication must remain professional, relevant to club activity and respectful of boundaries.
- Where an adult uses a carer or supporter for communication, the adult's preferences and consent should be recorded.
- Sexualised, coercive, harassing, discriminatory or exploitative messages are prohibited.
- Safeguarding concerns arising through messages, images or social media must be preserved and reported.

16. Bullying, harassment, discrimination and online harm

The Group has zero tolerance for bullying, harassment, victimisation, discriminatory conduct, initiation-type behaviour, coercion or abuse of power. This applies between members and to conduct by instructors, volunteers, carers, spectators or others connected with Group activities.

- Concerns will be taken seriously whether they occur face to face, through group chats, social media, gaming, email or other technology.
- Immediate steps may include separating people, changing training arrangements, preserving evidence or restricting contact.
- Behaviour may be managed through club conduct or disciplinary procedures, but safeguarding and criminal concerns will be referred externally where appropriate.
- Retaliation against an adult who reports or supports a concern is prohibited.

17. Whistleblowing and complaints

Anyone may raise a safeguarding concern in good faith without fear of adverse treatment. Concerns should normally be raised with the DSL or Deputy. If the concern involves both safeguarding leads, is not acted upon, or internal reporting feels unsafe, the person should contact CMAA, Lancashire Adult Social Care, the police or another appropriate agency directly.

A general complaint about service quality may be addressed through the Group's complaints process. A complaint that includes possible abuse, neglect, exploitation, serious poor practice or risk will be managed first as a safeguarding concern. No one will be penalised for making a genuine safeguarding report, even if it is not substantiated.

18. Policy approval, monitoring and review

- This policy is approved by Paul Turner and Chris Haggan on behalf of St Martins Karate Group.
- The DSL will monitor implementation, safeguarding learning, concerns, incidents and any lessons arising.
- The policy will be formally reviewed at least every three years.
- An earlier review will take place following a significant incident, complaint or learning review; a change in law, statutory guidance, CMAA requirements or Safeguarding Code expectations; or a material change in Group activities or structure.
- Changes will be communicated to instructors, volunteers, members and relevant carers or supporters.

Appendix A: Immediate action guide

Situation

Action

Immediate danger, serious crime in progress or urgent medical emergency Call 999. Make the area as safe as possible. Do not delay for internal approval or CMAA advice.

Adult discloses abuse or neglect Listen, take seriously, do not promise secrecy, ask what they want, record their words and report promptly.

Concern but no immediate danger Report to Paul Turner or Chris Haggan. Consider CMAA advice, Adult Social Care or police referral according to risk.

Concern involves Paul Turner Report to Chris Haggan and, where appropriate, CMAA or statutory agencies.

Concern involves both safeguarding leads or is not being addressed Contact CMAA and/or Lancashire Adult Social Care or the police directly.

Possible evidence from a recent assault or online abuse Preserve it safely. Do not clean, delete, forward widely or investigate.

Adult refuses help Respect their wishes where they have capacity, but seek safeguarding advice where risk is serious, others may be at risk, coercion is suspected or another lawful reason applies.

Appendix B: Safeguarding concern record form

Name of adult concerned:

Date of birth or approximate age (if known):

Contact details (if appropriate):

Date, time and location of concern/disclosure:

Name and role of person completing this record:

People present:

Communication or accessibility needs:

Factual account of what was seen, heard or disclosed (use the adult's exact words where possible):

Questions asked and responses:

	Visible injuries or immediate safety/medical concerns:
	What the adult said they want to happen:
	Consent to share information - what was discussed and decided:
	Action taken, including emergency action:
	Who was informed, date and time:
	Decision and reasons, including any decision not to refer:
	Further action or follow-up required:

Signature:

Date:

Appendix C: Key contacts

St Martins Karate Group Designated

Safeguarding Lead

Paul Turner | 07984 912668

Deputy Safeguarding Lead

Chris Haggan | 07739 669326

Safeguarding email safeguarding@stmartinsjuniorkarateclub.co.uk Cobra Martial Arts Association (CMAA) Central safeguarding contact: Andrew Morrell | 07909 673894 | cmaauk@hotmail.com

Lancashire Adult Social Care

Safeguarding concerns: 0300 123 6720 | Out of hours: 0300 123 6722 | Online concern form via

Lancashire County Council

Police

Emergency: 999 | Non-emergency: 101

Ann Craft Trust

Adult safeguarding in sport and activity: 0115 951 5400 | ann-craft-trust@nottingham.ac.uk

Hourglass

Support relating to abuse of older people: 0808 808 8141

National Domestic Abuse Helpline

0808 2000 247 Men's Advice Line 0808 801 0327

Rape Crisis England & Wales

24/7 Rape and Sexual Abuse Support Line: 0808 500 2222

Victim Support

0808 168 9111 Everyone has a right to be treated with respect and dignity.

Everyone deserves to be safe.

Document control

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Safeguarding email	safeguarding@stmartinsjuniorkarateclub.co.uk
General enquiries	info@stmartinsjuniorkarateclub.co.uk