

GCRA Ltd trading as Grampian Heart & Health

Safeguarding Adults Policy

Policy Owner: GCRA Ltd trading as Grampian Heart & Health

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legislation

CONTENTS

Section 1: Safeguarding Adults Policy Introduction Policy Statement Purpose Scope Commitments Implementation	2 3 3 3 3 4
Section 2: Supporting Information Key Points Safeguarding Adults Legislation Definition of an Adult at Risk Abuse and Neglect Signs and Indicators of Abuse and Neglect Wellbeing Principle Person Centred Safeguarding / Making Safeguarding Personal The Principles of Adult Safeguarding in Scotland Mental Capacity and Decision Making Recording and Information Sharing Multi-Agency Working 	6 6 7 7 9 9 10 11 12 13
Appendix 1 ➤ Example Role Description: Safeguarding Lead	15
Appendix 2 ➤ Case Management Groups	16
Appendix 3 ➤ Further Information and Useful Contacts	17
Appendix 4 ➤ Additional Sources of Information and Support	18

SECTION 1: SAFEGUARDING ADULTS POLICY

INTRODUCTION

Grampian Heart & Health is committed to Safeguarding Adults in line with national legislation and relevant local/national guidelines

- We will safeguard adults by ensuring that our activities are delivered in a way which keeps all adults safe
- Grampian Heart & Health is committed to creating a culture of zero-tolerance of harm to adults which necessitates:
 - the recognition of adults who may be at risk and the circumstances which may increase risk
 - o knowing how adult abuse, exploitation or neglect manifests itself
 - o being willing to report safeguarding concerns
- This extends to recognising and reporting harm experienced anywhere, including:
 - within our activities
 - o within other organised community or voluntary activities
 - o in the community
 - o in the person's own home
 - o in any care setting
- Grampian Heart & Health is committed to best safeguarding practice and to uphold the rights of all adults to live a life free from harm from abuse, exploitation and neglect.

Policy Statement

Grampian Heart & Health is committed to ensuring every person involved with our organisation is able to participate in an enjoyable and safe environment which promotes inclusion and protects them from harm, poor practice, exploitation, bullying and abuse. While this policy provides for all adults, it is acknowledged that there are certain groups within our adult membership that may have higher risk factors. We recognise our responsibility to promote safe practice and to protect all members, especially adults at risk.

Grampian Heart & Health believes everyone has the right to live free from abuse or neglect regardless of age, ability or disability, sex, race, religion, ethnic origin, sexual orientation, marital or gender status. We acknowledge that safeguarding is everybody's responsibility and recognise that health, well-being, ability, disability and need for care and support can affect a person's resilience. We understand that some people experience barriers, for example, to communication in raising concerns or seeking help. We also recognise that these factors can vary at different points in people's lives.

Actions taken by Grampian Heart & Health will be consistent with the principles of adult safeguarding ensuring that any action taken is prompt, proportionate and that it includes and respects the voice of the adult concerned. We also recognise that there is a legal framework within which sports and physical activities need to work to safeguard adults who have needs for care and support, and for protecting those who are unable to take action to protect themselves, and will act in accordance with the relevant safeguarding adult legislation and with local statutory safeguarding procedures.

Purpose

The purpose of this policy is to demonstrate the commitment of Grampian Heart & Health to safeguarding adults and to ensure that everyone involved in Grampian Heart & Health is aware of:

- The legislation, policy and procedures for safeguarding adults
- Their role and responsibility for safeguarding adults
- What to do or who to speak to if they have a concern relating to the welfare or wellbeing of an adult within the organisation.

Scope

This Safeguarding Adult Policy and associated procedures apply to all individuals involved in Grampian Heart & Health including the Board, Staff, Instructors and Members, and to all concerns about the safety of adults whilst taking part in our organisation, its activities and in the wider community.

Any reference made to the term sport throughout this document is used in its wider sense and includes physical activity such as specialist group exercise classes.

Commitments

In order to implement this policy Grampian Heart & Health will ensure that:

- Everyone involved with Grampian Heart & Health is aware of the Safeguarding Adult Procedures and knows what to do and who to contact if they have a concern relating to the welfare or wellbeing of an adult.
- Any concern that an adult is not safe is taken seriously, responded to promptly, and followed up in line with Grampian Heart & Health's Safeguarding Adults Policy and Safeguarding Adults Procedures.
- The well-being of those at risk of harm will be put first and the adult actively supported to communicate their views and the outcomes they want to achieve. Those views and wishes will be respected and supported unless there are overriding reasons not to (see the Safeguarding Adults Procedures).
- Any actions taken will respect the rights and dignity of all those involved and be proportionate to the risk of harm.
- Confidential, detailed and accurate records of all safeguarding concerns are maintained and securely stored in line with the Grampian Heart & Health Data Protection Policy.
- Grampian Heart & Health acts in accordance with best practice advice, for example, from the Ann Craft Trust, Adult Protection Teams etc.
- Grampian Heart & Health will cooperate with the Police and the relevant Local Authorities in taking action to safeguard an adult.
- The Board, Staff and Instructors understand their role and responsibility for safeguarding adults and have completed and are up to date with safeguarding adult training and learning opportunities appropriate for their role.
- Grampian Heart & Health uses safe recruitment practices and continually assesses
 the suitability of Board members, Staff and Instructors to prevent the
 employment/deployment of unsuitable individuals in this organisation and within the
 specialist group exercise community.
- Grampian Heart & Health shares information about anyone found to be a risk to adults with the appropriate bodies. For example: Disclosure Scotland, Police, Local Authority/Social Services.
- When planning activities, Grampian Heart & Health includes an assessment of, and risk to, the safety of all adults from abuse and neglect and offers relevant safeguarding training to the Board, Staff and Instructors responsible for the activities.
- Actions taken under this policy are reviewed by the Board and Case Management Group (Sub Management Group) on an annual basis.

This policy, related policies (see below) and the Safeguarding Adults Procedures are reviewed no less than on a two-yearly basis and whenever there are changes in relevant legislation and/or government guidance as required or as a result of any other significant change or event.

Implementation

Grampian Heart & Health is committed to developing and maintaining its capability to implement this policy and procedures. In order to do so, the following will be in place:

- A clear line of accountability within the organisation for the safety and welfare of all adults
- Safeguarding Adult Procedures that deal effectively with any concerns of abuse or neglect, including those caused through poor practice.
- Access to relevant legal and professional advice.
- Updates to the Board detailing how risks to adult safeguarding are being addressed

- A Safeguarding Lead (see Appendix 1).
- A delegated Safeguarding Lead for any events organised by Grampian Heart & Health.
- A standing Case Management Group with an appointed Chair and clear Terms of Reference. This function will be undertaken by the Sub Management Group of Grampian Heart & Health.
- Arrangements to work effectively with other relevant organisations to safeguard and promote the welfare of adults, including arrangements for sharing information.
- Codes of Conduct for the Board, Staff, Instructors, Members, Carers/Spectators that specify zero tolerance of abuse in any form.
- Risk assessments that specifically include safeguarding of adults.
- Grampian Heart & Health policies and procedures are consistent with this Safeguarding Adults policy.

SECTION 2: SUPPORTING INFORMATION

Key Points

- There is a legal duty on Local Authorities to provide support to 'adults at risk'.
- Adults at risk are defined in legislation and the criteria applied is that used in the Adult Support and Protection (Scotland) act 2007 (see definition on page 7).
- The safeguarding legislation applies to all forms of abuse that harm a person's wellbeing.
- The law provides a framework for good practice in safeguarding that makes the overall well-being of the adult at risk a priority of any intervention.
- The law emphasises the importance of person-centred safeguarding.
- The law provides a framework for making decisions on behalf of adults who can't make decisions for themselves (**Mental Capacity**).
- The law provides a framework for sports organisations to share concerns they have about adults at risk with the Local Authority.
- The law provides a framework for all organisations to **share information and cooperate** to protect adults at risk.

Safeguarding Adults Legislation

Safeguarding Adults in all home nations is compliant with United Nations directives on the rights of disabled people and commitments to the rights of older people. It is covered by:

- The Human Rights Act 1998
- The Data Protection Act 2018
- General Data Protection Regulations 2018

The practices and procedures within this policy are based on the relevant legislation and government guidance.

- Adult Support and Protection (Scotland) Act 2007
- Adult Support and Protection (Scotland) Act 2007 Code of Practice 2022

Many other pieces of UK and home nation legislation also affect adult safeguarding. These include legislation about different forms of abuse and those that govern information sharing. For example:

- Human Trafficking and Exploitation (Scotland) Act 2015
- Protection of Vulnerable Groups (Scotland) Act 2007
- Sexual Offences (Scotland) Act 2009
- Hate Crime and Public Order (Scotland) Act 2021
- Domestic Abuse (Scotland) Act 2018

Scotland also has legislation about the circumstances in which decisions can be made on behalf of an adult who is unable to make decisions for themselves:

Adults with Incapacity (Scotland) Act 2000

There are specific offences applying to the mistreatment of and sexual offences against adults who do not have Mental Capacity and specific offences where mistreatment is carried out by a person who is employed as a carer: e.g. wilful neglect and wilful mistreatment.

Definition of an Adult at Risk

The Safeguarding Adults legislation creates specific responsibilities on Local Authorities, Health and the Police to provide additional protection from abuse and neglect to Adults at Risk.

When a Local Authority has reason to believe there is an adult at risk, they have a responsibility to find out more about the situation and decide what actions need to be taken to support the adult. In Scotland, the Local Authority can gain access to an adult to find out if they are at risk of harm for example, if that access is being blocked by another person.

The actions that need to be taken might be by the Local Authority (usually social services) and/or by other agencies, for example the Police and Health. A sporting organisation may need to take action as part of safeguarding an adult, for example, to use the disciplinary procedures in relation to a member of staff who has been reported to be harming a member. The Local Authority role includes having multi-agency procedures which coordinate the actions taken by different organisations.

An Adult at risk is:

Adult Support and Protection (Scotland) Act 2007

An adult at risk is an individual aged 16 years and over who:

- is unable to safeguard their own well-being, property, rights or other interests,
- is at risk of harm

and

 because they are affected by disability, mental disorder, illness or physical or mental infirmity, is more vulnerable to being harmed than adults who are not so affected.

Abuse and Neglect

Abuse is a violation of an individual's human and civil rights by another person or persons. It can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it. Any or all of the following types of abuse may be perpetrated as the result of deliberate intent, negligence, omission or ignorance.

There are different types/patterns of abuse and neglect and different circumstances in which they may take place. Safeguarding legislation in each home nation lists categories of abuse differently however, they all include the following types of abuse:

- Physical
- Sexual
- Psychological
- Neglect
- Financial

Abuse can take place in any relationship and there are many contexts in which abuse might take place; e.g. Institutional Abuse, Domestic Abuse, Forced Marriage, Human Trafficking, Modern Slavery, Sexual Exploitation, County Lines, Radicalisation, Hate Crime, Mate Crime, Cyber Bullying, Scams. Some of these are named specifically within home nation legislations.

Abuse can take place within a sporting context and the person causing harm might be any other person. For example: the Board, Staff, Instructors, a class member or a carer/spectator.

Some examples of abuse within sport and physical activity include:

- Harassment of a class member because of their (perceived) disability or other protected characteristics.
- An Instructor not meeting the needs of the member e.g. exercising without building in breaks.
- A Board/Staff member who sends unwanted sexually explicit text messages to a class member with learning disabilities.
- A class member threatens another class member with physical harm and persistently criticises them for poor technique.
- Abuse or neglect outside sport and physical activity could be carried out by:
 - o A spouse, partner or family member
 - Neighbours or residents
 - o Friends, acquaintances or strangers
 - o People who deliberately exploit adults they perceive as vulnerable
 - o Paid staff, professionals or volunteers providing care and support

Often the perpetrator is known to the adult and may be in a position of trust and/or power.

The Safeguarding Adults Legislation in Scotland defines categories of adult abuse and harm as follows:

Adult Support and Protection (Scotland) Act 2007

- Physical
- Psychological
- Financial
- Sexual
- Neglect

Signs and Indicators of Abuse and Neglect

An adult may confide to a member of Staff, an Instructor, a Board member or another class member that they are experiencing abuse inside or outside of the organisation's setting. Similarly, others may suspect that this is the case.

There are many signs and indicators that may suggest someone is being abused or neglected. There may be other explanations, but they should not be ignored. The signs and symptoms include but are not limited to:

- Unexplained bruises or injuries or lack of medical attention when an injury is present.
- Person has belongings or money going missing.
- Person is not attending / no longer enjoying their classes. You may notice that a member has been missing and is not responding to contact from staff or instructors.
- Someone losing or gaining weight / an unkempt appearance. This could be a member whose appearance becomes unkempt, does not wear suitable exercise kit and there is a deterioration in hygiene.
- A change in the behaviour or confidence of a person. For example, a member may be looking quiet and withdrawn when their family member comes to collect them from classes in contrast to a friend whom they greet with a smile.
- Self-harm.
- A fear of a particular group of people or individual.
- A carer always speaks for the person and doesn't allow them to make their own choices.
- They may tell you / another person they are being abused – i.e. a disclosure.

Wellbeing Principle

The success of sport, in terms of helping people achieve their potential, making the most of existing talent, and attracting new people to sport relies on putting people – their safety, wellbeing and welfare – at the centre of what sport does.

Duty of Care in Sport Independent Report to Government Baroness Tanni Grey-Thompson DBE, DL.

The concept of 'well-being' is threaded throughout UK legislation and is part of the Law about how health and social care is provided. Our well-being includes our mental and physical health, our relationships, our connection with our communities and our contribution to society.

Being able to live free from abuse and neglect is a key element of well-being.

The legislation recognises that statutory agencies have sometimes acted disproportionately in the past. For example, removing an adult at risk from their own home when there were other ways of preventing harm. In the words of Justice Mumby 'What good is it making someone safe when we merely make them miserable?' What Price Dignity? (2010)

For that reason any actions taken to safeguard an adult must take their whole well-being into account and be proportionate to the risk of harm.

Person Centred Safeguarding / Making Safeguarding Personal

The legislation also recognises that adults make choices that may mean that one part of our well-being suffers at the expense of another – for example we move away from friends and family to take a better job. Similarly, adults can choose to risk their personal safety; for example, to provide care to a partner with dementia who becomes abusive when they are disorientated and anxious.

None of us can make these choices for another adult. If we are supporting someone to make choices about their own safety we need to understand 'What matters' to them and what outcomes they want to achieve from any actions agencies take to help them to protect themselves.

The concept of 'Person Centred Safeguarding' / 'Making Safeguarding Personal' means engaging the person in a conversation about how best to respond to their situation in a way that enhances their involvement, choice and control, as well as improving their quality of life, well-being and safety. Organisations work to support adults to achieve the outcomes they want for themselves. The adult's views, wishes, feelings and beliefs must be taken into account when decisions are made about how to support them to be safe. There may be many different ways to prevent further harm. Working with the person will mean that actions taken help them to find the solution that is right for them. Treating people with respect, enhancing their dignity and supporting their ability to make decisions also helps promote people's sense of self-worth and supports recovery from abuse.

If someone has difficulty making their views and wishes known, then they can be supported or represented by an advocate. This might be a safe family member or friend of their choice or a professional advocate (usually from a third sector organisation).

The Principles of Adult Safeguarding in Scotland

The Adult Support and Protection (Scotland) Act 2007 principles are:

- The overarching principle underlying Part 1 of the Act is that any intervention in an
 individual's affairs should provide benefit to the individual and should be the least
 restrictive option of those that are available which will meet the purpose of the
 intervention.
- This is supported by a set of guiding principles which, together with the overarching principle, must be taken account of when performing functions under Part 1 of the Act. These are:
 - o The wishes and feelings of the adult at risk (past and present).
 - The views of other significant individuals, such as the adult's nearest relative;
 their primary carer, guardian, or attorney; or any other person with an interest in the adult's well-being or property.
 - The importance of the adult taking an active part in the performance of the function under the Act.
 - o Providing the adult with the relevant information and support to enable them to participate as fully as possible.
 - The importance of ensuring that the adult is not treated less favourably than another adult in a comparable situation.
 - The adult's abilities, background and characteristics (including their age, sex, sexual orientation, gender, religious persuasion, racial origin, ethnic group and cultural and linguistic heritage).

Mental Capacity and Decision Making

We make many decisions every day, often without realising. UK Law assumes that all people over the age of 16 have the ability to make their own decisions, unless it has been proved that they can't. It also gives us the right to make any decision that we need to make and gives us the right to make our own decisions even if others consider them to be unwise.

We make so many decisions that it is easy to take this ability for granted. The Law says that to make a decision we need to:

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

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

Most adults have the ability to make their own decisions given the right support however, some adults with care and support needs have the experience of other people making decisions about them and for them.

Some people can only make simple decisions like which colour T-shirt to wear or can only make decisions if a lot of time is spent supporting them to understand the options. If someone has a disability that means they need support to understand or make a decision, this must be provided. A small number of people cannot make any decisions. Being unable to make a decision is called "lacking mental capacity".

Mental capacity refers to the ability to make a decision at the time that decision is needed. A person's mental capacity can change. If it is safe/possible to wait until they are able to be involved in decision making or to make the decision themselves, this should be considered. For example:

- A person with epilepsy may not be able to make a decision following a seizure.
- Someone who is anxious may not be able to make a decision at that point.
- A person may not be able to respond as quickly if they have just taken some medication that causes fatigue.

Mental Capacity is important for safeguarding for several reasons.

Not being allowed to make decisions one is capable of making is abuse. For example, a disabled adult may want to take part in an activity but their parent who is their carer won't allow them to and will not provide the support they would need. Conversely, the adult may not seem to be benefiting from an activity other people are insisting they do.

Another situation is where an adult is being abused and they are scared of the consequences of going against the views of the person abusing them. It is recognised in the law as coercion and a person can be seen not to have mental capacity because they cannot make 'free and informed decisions'.

Mental Capacity must also be considered when we believe abuse or neglect might be taking place. It is important to make sure an 'adult at risk' has choices in the actions taken to safeguard them, including whether or not they want other people informed about what

has happened, however, in some situations the adult may not have the mental capacity to understand the choice or to tell you their views.

Each home nation has legislation that describes when and how we can make decisions for people who are unable to make decisions for themselves. The principles are the same.

- We can only make decisions for other people if they cannot do that for themselves at the time the decision is needed.
- If the decision can wait, wait e.g. to get help to help the person make their decision or until they can make it themselves.
- If we have to make a decision for someone else then we must make the decision in their best interests (for their benefit) and take into account what we know about their preferences and wishes.
- If the action we are taking to keep people safe will restrict them then we must think of the way to do that which restricts to their freedom and rights as little as possible.

Many potential difficulties with making decisions can be overcome with preparation. A person needing support to help them make decisions whilst taking part in a sports organisation will ordinarily be accompanied by someone e.g. a family member or formal carer whose role includes supporting them to make decisions.

It is good practice to get as much information about the person as possible. Some people with care and support needs will have a 'One page profile' or a 'This is me' document that describes important things about them. Some of those things will be about how to support the person, their routines, food and drink choices etc. but will also include things they like and don't like doing. It's also important to have an agreement with the person who has enrolled the adult in the sports activity about how different types of decisions will be made on a day to day basis.

If a person who has a lot of difficulty making their own decisions is thought to be being abused or neglected you will need to refer the situation to the Local Authority, and this should result in health or social care professionals making an assessment of mental capacity and/or getting the person the support they need to make decisions.

There may be times when a sporting organisation needs to make decisions on behalf of an individual in an emergency. Decisions taken in order to safeguard an adult who cannot make the decision for themselves could include:

- Sharing information about safeguarding concerns with people that can help protect them.
- Stopping them being in contact with the person causing harm.

Recording and Information Sharing

All sports organisation must comply with the Data Protection Act (DPA) and the General Data Protection Regulations (GDPR).

Information about concerns of abuse includes personal data. It is therefore important to be clear as to the grounds for processing and sharing information about concerns of abuse.

Processing information includes record keeping. Records relating to safeguarding concerns must be accurate and relevant. They must be stored confidentially with access only to those with a need to know.

Sharing information, with the right people, is central to good practice in safeguarding adults. However, information sharing must only ever be with those with a 'need to know'. This does **NOT** automatically include the persons spouse, partner, adult, child, unpaid or paid carer. Information should only be shared with family and friends and/or carers with the consent of the adult or if the adult does not have capacity to make that decision and family/ friends/ carers need to know in order to help keep the person safe.

The purpose of Data Protection legislation is not to prevent information sharing but to ensure personal information is only shared appropriately. Data protection legislation allows information sharing within an organisation. For example:

- Anyone who has a concern about harm can make a report to an appropriate person within the same organisation.
- Case management meetings can take place to agree to co-ordinate actions by the organisation.

There are also many situations in which it is perfectly legal to share information about adult safeguarding concerns outside the organisation. Importantly, personal information can be shared with the consent of the adult concerned. However, the adult may not always want information to be shared. This may be because they fear repercussions from the person causing harm or are scared that they will lose control of their situation to statutory bodies or because they feel stupid or embarrassed. Their wishes should be respected unless there are over-riding reasons for sharing information.

The circumstances when we need to share information without the adult's consent include those where:

- it is not safe to contact the adult to gain their consent i.e. it might put them or the person making contact at further risk.
- you believe they or someone else is at risk, including children.
- you believe the adult is being coerced or is under duress.
- it is necessary to contact the police to prevent a crime, or to report that a serious crime has been committed.
- the adult does not have mental capacity to consent to information being shared about them.
- the person causing harm has care and support needs.

When information is shared without the consent of the adult this must be explained to them, when it is safe to do so, and any further actions should still fully include them.

If you are in doubt as to whether to share information seek advice e.g. seek legal advice and/or contact the Local Authority and explain the situation without giving personal details about the person at risk or the person causing harm.

Any decision to share or not to share information with an external person or organisation must be recorded together with the reasons to share or not share information.

Multi-Agency Working

Safeguarding adults' legislation gives the lead role for adult safeguarding to the Local Authority. However, it is recognised that safeguarding can involve a wide range of organisations.

Sports bodies may need to cooperate with the Local Authority and the Police including to:

- Provide more information about the concern you have raised.
- Provide a safe venue for the adult to meet with other professionals e.g. Police, Social Workers, Advocates.
- · Attend safeguarding meetings.
- Coordinate internal investigations (e.g. complaints, disciplinary) with investigations by the police or other agencies.
- Share information about the outcomes of internal investigations.
- Provide a safe environment for the adult to continue their sporting activity / their role in the organisation.

Appendix 1 - Example Role Description: Safeguarding Lead

The designated person within a sports organisation has primary responsibility for putting into place procedures to safeguard adults at risk where relevant and for managing concerns about adults at risk. Duties and responsibilities include:

- Working with others within the organisation to create a positive inclusive environment.
- Play a lead role in developing and establishing the organisation's approach to safeguarding adults and in maintaining and reviewing the organisation's implementation plan for safeguarding adults in line with current legislation and best practice.
- Coordinate the dissemination of the safeguarding adult policy, procedures and resources throughout the organisation.
- Contribute to ensuring other policies and procedures are consistent with the organisation's commitment to safeguarding adults.
- Advise on the organisation's training needs and the development of its training strategy.
- Receive reports of and manage cases of poor practice and abuse reported to the organisation – including an appropriate recording system.
- Support the Chair to co-ordinate the Case Management process.
- Manage liaison with, and referrals to, external agencies for example adult social-care services and the police.
- Create a central point of contact for internal and external individuals and agencies concerned about the safety of adults within the organisation.
- Provide advice and support to the organisation.
- Represent the organisation at external meetings related to safeguarding.

Appendix 2 - Case Management Groups

Case Management Groups comprise of a select number of individuals with identified and relevant skills, knowledge experience and/or status within the organisation and include at least one member with safeguarding adult expertise. The group's role and decision-making powers need to be embedded within the organisation's governance structure and be linked to related organisational functions such as codes of conduct, and the disciplinary policy and procedures.

The Sub Management Group of the Board will undertake the function of Case Management Group, summarising the cases that have been addressed and their outcomes, as well as any issues that require action by GCRA e.g. changes to policy or procedures.

Case Management Groups should have clear Terms of Reference. They may be 'standing committees' who meet regularly or can be brought together as the need arises. Case Management Group roles include:

- to ratify any actions already taken by Safeguarding Lead.
- to initially assess and agree immediate response to a safeguarding case (does there appear to be a case to answer?)
- to identify appropriate 'route' for case (e.g. internal/ disciplinary action alone or referral to statutory agencies plus internal / disciplinary action).
- to decide the level (from local to national) at which the organisation will deal with the concern.
- to consider the need for temporary / interim suspension order (some organisations' Case Management Group issue suspensions directly, while others can only make recommendations to their disciplinary group).
- to review progress of case(s).
- to identify / communicate learning from cases.

Case Management Groups' membership should include:

- A designated Chair
- A secretary (often the designated Safeguarding Lead).
- Leads from relevant parts of the organisation e.g. Trustees, Team Lead
- Co-opted independent safeguarding expertise (e.g. from another Sport or relevant profession such as the Police or Social services).

Appendix 3: Further Information and Useful Contacts

Grampian Heart & Health Safeguarding Lead

Name	Caroline Ness
Email	safeguarding@gcra.org.uk
Telephone	07736 489 516

Grampian Heart & Health Services Coordinator/Safeguarding Officer

Name	Lindsay Milligan
Email	lindsay.milligan@gcra.org.uk
Telephone	07865 731 196

Grampian Heart & Health Chairperson

Name	Bert Lyon
Email	abielyon@hotmail.co.uk
Telephone	07899 394 477

The above telephone numbers are for non-urgent concerns but for concerns where individuals are at immediate/serious risk of harm, contact the police/on duty adult protection teams (then contact the above).

Grampian Adult Protection Teams

Aberdeen City Council	Tel : 0800 731 5520 (24 hours)	
	Email: apsw@aberdeencity.gov.uk	
Aberdeenshire Council	Tel : 01467 533100	
	Tel : 0345 6081206 (out of hours)	
	Email : adultprotectionnetwork@aberdeenshire.gov.uk	
Moray Council	Tel : 01343 563999	
_	Email: accesscareteam@moray.gov.uk	

Other Useful Contacts

	T
Police Scotland	Non-emergency: 101
	Emergency: 999
NHS Board	
NHS Grampian	Tel: 0345 456 6000
➤ NHS 24	Tel: 111
NHS Grampian Public Protection	Email: gram.publicprotection@nhs.scot
Advocacy	
Aberdeen City	Tel: 01224 332314
Aberdeenshire	Tel : 01467 652604
Moray	Tel: 01343 556546
Ann Craft Trust - Safeguarding Adults in	Website: www.anncrafttrust.org
Sport and Activity	Email: Ann-Craft-
	Trust@nottingham.ac.uk
	Tel : 0115 951 5400

Appendix 4 – Additional Sources of Information and Support

Women's Aid

Website: www.womensaid.org.uk/information-support/

Email: helpline@womensaid.org.uk

Link to: Livechat

Modern Slavery Helpline

Website: www.modernslaveryhelpline.org/

Tel: 0300 0121 700 (24 hours)

Hourglass Scotland (previously Action on Elder Abuse)

Website: www.wearehourglass.scot/scotland

Tel: 0808 808 8141 **Free Text**: 078 6005 2906

Email: scotland@wearehourglass.org

Age Scotland Helpline

Website: www.agescotland.org.uk/

Tel: 0800 12 44 222

Forced Marriage

Website: www.gov.uk/guidance/forced-marriage

Tel: 0207 008 0151

Men's Advice Line

Website: www.mensadviceline.org.uk/

Tel: 0808 801 0327

National LGBT+ Domestic Abuse Helpline

Website: www.galop.org.uk/ Email: help@galop.org.uk

Tel: 0800 999 5428

Refuge – National Domestic Abuse Helpline

Website: www.refuge.org.uk/ **Tel**: 0808 2000 247 (24 hours)

Victim Support Scotland

Website: www.victimsupport.scot/

Tel: 0800 160 1985 **Link to**: Self-referral

Respond

Website: www.respond.org.uk/

Tel: 020 7383 0700

Email: admin@respond.org.uk

Hate Crimes, Scotland

Website: www.safer.scot/hate-crime/support/#where-to-get-support

Care Information Scotland

Website: www.www.careinfoscotland.scot/

Tel: 0800 011 3200

Mental Welfare Commission for Scotland

Website: www.mwcscot.org.uk/looking-help/your-rights

Tel: 0800 389 6809

Email: mwc.enquiries@nhs.scot