



Mental Health and Physical Activity Toolkit

Guide 9: Safeguarding and mental health

Created in partnership with

ann craft trust
acting against abuse





About this guide

We've produced this guide to upskill sport, physical activity and mental health providers on how to include adult safeguarding elements in their activities and make them safe for people experiencing mental health problems.

Who is this guide for?

Anyone working or volunteering in sport, physical activity and/or mental health.

What does this guide cover?

Click on the headings below to go straight to the information you're looking for.

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About this guide

The language we use

This guide focuses mainly on adults (over-18s). For support on safeguarding children and young people we recommend visiting the Child Protection in Sport Unit's website.

In this guide we use the following terms:

- Young people – to represent anyone under the age of 18.
- Organisation – to represent any club, association or charity within the sport, physical activity and mental health sectors.
- People/person – to represent participant(s) and member(s).

Someone in urgent need of help

If someone needs urgent help due to their mental health, for example if you think they might attempt suicide or self-harm or have seriously harmed themselves, you can support them by:

- If they are not safe by themselves right now – stay with them and help them call 999 for an ambulance, if you feel able to do so. Or you could help them get to A&E.
- If they can keep themselves safe for a little while – you can get quick medical advice by contacting NHS 111. Or you could help them make an emergency GP appointment to see a doctor. You can also encourage them to call the Samaritans on 116 123 to talk to someone, 24 hours a day.



An overview of safeguarding

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An overview of safeguarding

Club Matters, in partnership with the Ann Craft Trust, has created an [Introduction to Safeguarding Adults video](#) covering many elements of this section.



What is safeguarding?

Safeguarding means protecting people's health, wellbeing and human rights.

In sport and physical activity settings, safeguarding means protecting people from harm by providing a safe and inclusive environment for them to play sport and be active.

Visit the [Ann Craft Trust's website](#) to find out about the six principles of adult safeguarding.

Safeguarding – whose responsibility is it?

It is everyone's responsibility. All organisations and people who provide a service have a duty to safeguard those who may be experiencing or at risk of harm. As a result, all organisations, including clubs, charities and associations, need to have a safeguarding policy and procedures document setting out how they should respond to safeguarding concerns.

Safeguarding young people and adults

There are significant differences between safeguarding adults and young people. These include:

- Young people and adults are likely to face different issues.
- Procedures for reporting abuse and handling cases are not the same for young people and adults.
- There is different legislation and policy relating to young people and adults.

Due to these differences, organisations should have policies and procedures for both groups.



Adults at risk

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Adults at risk

In England, an adult at risk is any person aged 18 years or over who:

- 1** has care and support needs (whether or not the local authority is meeting any of those needs), and
- 2** is experiencing, or at risk of, abuse or neglect, and
- 3** as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience, of abuse or neglect.

This criteria is different for each of the home nations (set out in [Appendix 1](#)).

Are all people experiencing mental health problems ‘adults at risk’?

Not all people who experience mental health problems will be classed as an adult at risk. This is because they:

- do not receive care or support for their mental health problem, or
- they receive care or support for their mental health problem but aren’t experiencing, or at risk of, abuse or neglect.

However, there are people who experience mental health problems who have care or support needs, experience abuse or neglect and are unable to protect themselves. They are classed as adults at risk.

All organisations have a duty to care for the welfare and wellbeing of adults with care and support needs, and to safeguard them from abuse or neglect.

Abuse and neglect of adults

Safeguarding legislation in each home nation lists categories of abuse differently (see [Appendix 2](#)).

However, they all include the following types of abuse:

- Physical
- Sexual
- Psychological
- Neglect
- Financial

Abuse can happen to anyone and in any relationship. There are many contexts in which abuse might take place such as institutional abuse, domestic abuse, forced marriage, human trafficking, modern slavery, sexual exploitation, hate crime and cyber bullying. The [Ann Craft Trust](#) has more information and a short film about the different types of abuse.

Indicators of abuse or neglect

Things to look out for include:

- changes to someone's appearance, behaviour or routines
- weight gain or loss
- appearing frightened in the presence of certain people
- unexplained lack of money or inability to maintain their lifestyle
- appearing withdrawn and isolated
- unexplained marks/bruising to the body.

Abuse and neglect may be carried out by anyone in contact with adults including spouses, friends, family, neighbours, people employed to provide care, paid staff or professionals, volunteers and strangers.

What to do if you are concerned about someone

If you are concerned about someone, don't keep it to yourself. Check your organisation's safeguarding policy and procedures to see the process for dealing with safeguarding concerns. If there is no policy or clear process for dealing with concerns, then see [Ann Craft Trust's guidance](#) and their following tips.

Ann Craft Trust's tips

- **Recognise** – Be able to identify abuse and neglect and raise a concern.
- **Respond** – Reassure the person, be non-judgemental, tell them what you will need to do (you may need to tell someone so don't promise confidentiality), ask them what they want to happen.
- **Refer** – Contact your safeguarding lead. This could be your line manager or welfare officer.
- **Record** – Who, what, where, when – make sure you write down what you see, hear or are told. Keep your record safe and maintain confidentiality.

If you're not sure what to do or don't have a safeguarding lead, you can call your local authority Safeguarding adults team for advice. To find yours, have a look on the [Safeguarding Adults Board or Partnership website](#). You don't need to provide personal details, just the issues. If it needs to be referred to them as a safeguarding issue, they will guide you through the information they require and whether you need consent from the adult involved.

Safeguarding adults at risk checklists

Use the checklist in [Appendix 3](#) to help you create and integrate policies and procedures on safeguarding adults at risk. Alternatively, use the [Ann Craft Trust's free online Safeguarding Checklist](#) to test your safeguarding knowledge and practices.



Adults at risk from themselves (Risk management)

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Adults at risk from themselves (Risk management)

At Mind, we have developed a separate approach to support adults who are at risk from themselves, rather than someone else. This could be because they are considering self-harm or suicide. This is our Risk management policy¹.

Our approach to supporting adults at risk from themselves will always take account of empowering people to make their own decisions and take action for themselves. However, this is balanced with providing active support when the person requires it (for example, if they are in [crisis](#)).

When creating a Risk management approach for your organisation, consider:

- your existing policies and procedures
- the skills, knowledge and experience of your staff around mental health
- the support available from services such as confidential helplines and mental health professionals (including supervision)
- are out of hours/on-call and emergency procedures in place
- [boundaries](#) for staff, volunteers and participants
- [how and when to break confidentiality](#).

¹ Our adult safeguarding policy focusses on safeguarding from risk from others





Boundaries

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Boundaries

Boundaries are guidelines, rules or limits that define acceptable and unacceptable behaviour for your staff, volunteers and participants. They exist to protect everyone. Setting clear boundaries is necessary for all services, but it's crucial for delivering a physical activity service for people experiencing mental health problems.

Examples of boundaries for sport and physical activity services

Things that may not be appropriate in a sports or physical activity setting include:

- Being contacted outside of club or work hours, including through social media, to provide emotional support with mental health and wellbeing.
- Providing people with lifts to GP or therapy appointments, etc.
- Meeting people in their homes.
- Providing mental health therapy or counselling support.
- Diagnosing people, offering medical or clinical advice or interventions.
- Dealing with challenging behaviour such as abuse or threats.

Top tips for setting and maintaining boundaries

1 Clearly define the role and boundaries of staff and volunteers

Be clear about the role and keep it clearly defined. Identify the activities staff and volunteers are and aren't expected to do in their role (see the [England Athletics' case study and examples of boundaries](#) for more information).

This will depend on how much time staff and volunteers have and their skills, knowledge and experience. Also, the type of service you're providing and the support and expertise within your organisation.

You also need to consider:

- a. Is it appropriate for staff and volunteers to share personal contact details with other people? To overcome this, your organisation could set up a separate email address and/or provide a 'work' mobile phone for staff and volunteers.
- b. Does your organisation have a policy on interactions with people online and through social media? It's common for people to reach out for support through social media so guidelines may need to be developed or updated to support staff and volunteers if this situation arises. Use [AVA's Digital Safeguarding Resource Pack](#) to help you with this.
- c. Is it appropriate for staff and volunteers to provide one-to-one sessions for people? If yes, your organisation will need to provide appropriate training, have policies and procedures on lone working along with risk management procedures and provide out of hours support to the staff and volunteers involved.

2 Inform everyone of these boundaries to manage expectations

Be clear about the activities staff and volunteers will be doing as part of their role. For example, they could say “my role is to share information that promotes awareness of how to keep yourself mentally well through physical activity.”

3 If required, communicate the reason for these boundaries

If a person asks for direct advice or help beyond the limits of the role, staff and volunteers could say: “sorry, I’m not the best person to advise you on that as I do not have the right knowledge, skills or experience to help you with this. I am not a mental health professional and stepping outside of my abilities might be unhelpful to you. But I can suggest other sources of help and support you may wish to access.”

4 Signpost to further information and support

If the person is looking for advice or help, it is best to signpost to professional mental health support (see [Guide 1: An introduction to mental health](#) for available support). It may also be good to ask: “what would you like to happen in this situation?”. This will help to empower people and encourage them to take the course of action that seems right to them.

5 Don’t make promises you may not be able to keep

Be clear on what staff and volunteers can and cannot keep confidential, and the circumstances in which things that have been revealed to them may need to be shared elsewhere. Find more information on this in [Confidentiality – when and how to break it](#).

6 Provide ongoing support to staff and volunteers

What support is available to staff and volunteers to support them in their role? To help with this, your organisation could use [Wellness Action Plans](#), an Employee Assistance Programme or provide regular catch up or supervision meetings for staff and volunteers.

Defining boundaries in a peer support relationship

Peer support, when people use their own experiences to help each other, can be an effective way of engaging participants in activities. However, it is important to define boundaries in peer support relationships to protect the volunteer and participant.

Think about:

- the purpose of the volunteer’s role
- the remit of the volunteer’s role including what they will and won’t do
- agreed methods of communication (for example, what to do when people are running late or need to cancel)
- situations when safeguarding concerns supersede confidentiality, such as if either the volunteer or participant discloses information that poses a danger to themselves or others.

Our [Peer support webpage](#) and [Guide 6: Engaging volunteers in a physical activity and mental health service](#), provides more information on what peer support is and the different types. Our agreement between a participant and peer volunteer (Appendix 3 in Guide 6) may help to establish boundaries in a peer support relationship.

Case study

Boundaries for England Athletics' Mental Health Champions

England Athletics' [#RunAndTalk programme](#) has recruited over 1,000 volunteers as Mental Health Champions. Their role is to support people to access the wellbeing benefits of running, reduce stigma and get people talking about mental health.

Given the importance of the role, England Athletics has established clear boundaries for what Mental Health Champions will and won't do.

Champions will:

- **Support:** Working with other people in their running club/group to proactively support the mental wellbeing of members.
- **Engage:** Build links with their local mental health groups and organisations, and encourage their members to start running.
- **Promote:** Promote #RunAndTalk on social media and share posts from England Athletics, RunTogether, Mind and other Mental Health Champions.
- **Talk:** Start conversations about mental health with members and share good news stories to get people talking about mental health.
- **Advocate:** Share guidance and information with their club/group about mental health issues related to running.

See [Appendix 4](#) for guidance on how to have conversations around mental health.





Confidentiality – when and how to break it

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Confidentiality – when and how to break it

Breaking confidentiality (telling someone else about information that has been disclosed to you) can be a grey area. So, it's important to have an agreed policy on how and when to break confidentiality.

Recommendations for when and how to break confidentiality

We suggest your policy enables you to break confidentiality if:

- There is immediate danger. If a person has clearly told you that they plan to take their life within the next 24 hours, or has already taken action which puts their life in danger, but does not want to seek support themselves and does not give their consent for you to do so – call 999.
- The person is physically present at your club or group and is experiencing a crisis. You should act immediately to get them support. This may involve contacting their emergency contact* or a mental health professional.
- The person is planning to take action that will put others at risk (for example, stepping in front of a train). We suggest calling 999.
- The person is under 18. In these situations, the young person's welfare should come first and we suggest contacting their emergency contact* and seeking support from 999.
- There is a safeguarding concern that may have a wider impact. For example, if someone alleges that they have been abused by a volunteer but asks you not to say anything. You would have to report this as it's in the public interest that it's investigated.
- There is a safeguarding issue that concerns a child. Follow your safeguarding policy for children and young people.
- If you think that the person is an adult at risk and they do not want you to make a safeguarding referral, still follow your safeguarding adults' process and discuss with your safeguarding lead or anonymously with your [Safeguarding Adults Board or Partnership](#).

* Don't contact their emergency contact if the disclosure is linked to that person. Only contact their emergency contact if it is safe to do so.

Recommendations for when and how to break confidentiality

You should always discuss breaking confidentiality with the person, and encourage them to seek help and support. See the [Social Care Institute for Excellence's advice](#) on if a person does not want you to share their information.

If you need to break confidentiality and inform someone such as a medical professional, safeguarding adults' team or the person's emergency contact about your concerns without their consent, we recommend you do this with the support of a Welfare Officer, committee member or member of management.

There's a lot of uncertainty around breaking confidentiality and it's much better to make a decision with the support of a colleague or manager. It's important to continue to discuss this decision after it has been taken and to look out for the wellbeing of the staff or volunteer involved. We also recommend keeping confidential notes of discussions, reporting the incident if appropriate and logging any follow up.





Support available

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Support available

Useful contacts

Below are organisations who can provide safeguarding support:

- [The Ann Craft Trust \(ACT\)](#) – provide information, resources and training on safeguarding adults at risk in sport.
- [Local authority Safeguarding Adults Board or Partnership](#) – offer training and guidance regarding safeguarding adults.
- Local Authority Designated Officer (LADO) – is an officer or team of officers involved in the management and oversight of individual cases of allegations of abuse made against those who work with children. Visit your local authority's website to find the LADO in your area.
- [NSPCC Child Protection in Sport Unit](#) – provide a range of resources and tools for organisations working with children and young people.
- [Sport England](#) – their safeguarding webpages offer guidance for anyone working in sport and physical activity. Visit each of the home nation's websites for guidance relevant to their country - [Sport Wales](#), [Sport Scotland](#) and [Sport NI](#).
- [Club Matters](#) – provides information and resources around safeguarding and welfare in sport and physical activity.
- [UK Coaching](#) – provides information, resources, workshops and training as part of their Duty to Care Safeguarding pillar.

Training for those responding to safeguarding concerns

Consider providing extra training or guidance for staff involved in responding to safeguarding concerns.

Different levels of training are available including:

Level	Course	Overview
Introductory	Mental Health Awareness for Sport and Physical Activity+ eLearning	<p>This online course is aimed at everyone who works in clubs, community sport and physical activity – such as coaches, activators, front of house staff, administrators and volunteers.</p> <p>This course aims to give you the knowledge, skills and confidence to better understand and support people experiencing mental health problems, and create a positive environment that ensures they enjoy the benefits of being active and keep coming back for more.</p>

The following courses haven't been developed by Mind but we feel they may help to increase your knowledge and confidence around mental health.

Level	Course	Overview
Introductory	Ann Craft Trust's Safeguarding eLearning	<p>The Ann Craft Trust offer two short online training courses:</p> <ul style="list-style-type: none"> • An Introduction to Safeguarding Adults • Safeguarding Adults in Sport – Setting Club Standards.
	UK Coaching's Safeguarding Adults	This online course for people delivering sport and activity sessions aims to increase your knowledge and confidence to safeguard adults at your sessions, including those identified as 'at risk', and how to create a safe environment in which all adults can enjoy sport and physical activity.
	UK Coaching's Safeguarding and Protecting Children	This workshop aims to raise your awareness of the signs of abuse, and give you the tools and confidence you need to deal with any issues sensitively, appropriately and effectively should the need ever arise.
	Zero Suicide Alliance's training	Free online awareness course, which aims to provide a better understanding of the signs to look out for and the skills required to approach someone who may be having suicidal thoughts.

Level	Course	Overview
Intermediate	Mental Health First Aid (MHFA)	Mental Health First Aid aims to help you learn how to identify, understand and support someone who may be experiencing problems with their mental health. The courses are delivered by a range of organisations including many local Minds .
	Washington Mind's A LIFE Worth Living training	A community-focused training programme which aims to train people who are best-placed in the heart of communities to offer support and information to people experiencing suicidal thoughts.
Advanced	ASIST: Applied Suicide Intervention Skills Training	A two-day interactive workshop that focuses on how to provide suicide first aid interventions. It aims to upskill participants to recognise when someone may have thoughts of suicide and work with them to create a plan that will support their immediate safety.

The National Suicide Prevention Alliance has created guidance on how to respond to online posts about suicide. [Responding to suicidal content online: Best-practice guidelines](#) highlights how to provide a safe and supportive response to someone in crisis online.

Supporting your own mental health

Being a point of contact for conversations about mental health can be very rewarding. However, it can also be time consuming and emotionally overwhelming. You might also find that discussing subjects or traumatic events close to your own experiences, or that of others close to you, can have an impact on your own mental health, especially if you're feeling unwell. This is often called 'triggering'.

As a result, it's important that everyone looks after their own mental health and wellbeing and has the appropriate support in place if needed.

Tools to support your own mental health

Support	Information
<u>Wellness Action Plans</u>	Wellness Action Plans are an easy and practical tool to help you support your own mental health. It will help you reflect on the causes of stress and poor mental health, and what practical steps can address these. Everyone can complete a Wellness Action Plan: you don't need to experience a mental health problem to benefit from it.
<u>Wellbeing Kitbag</u>	The kitbag at the end of the Get Set to Go plan is a more informal version of a Wellness Action Plan. It aims to support you to make a plan around getting active and the support you may require.
<u>Side by Side</u>	Side by Side is a supportive online community where you can feel at home talking about mental health and connect with others who understand what you are going through. Whether you're feeling good or having a hard time, it's a safe place to share experiences and listen to others. Side by Side is available to everyone and is moderated by the team at Mind.
<u>Wellbeing and self-care tips</u>	Our website includes information and tools to help with improving <u>mental wellbeing</u> and <u>self-care</u> .
<u>Doctor/GP or health care professional</u>	For many, local GP practices are the first place they go when they're not feeling well. They can potentially make a diagnosis, offer support and treatments, refer to a mental health specialist or recommend local support options.

Support	Information
Mind	If you need urgent help visit our website and click the yellow button at the top of each page which says ‘Get help now’. Mind’s Infoline (call 0300 123 3393) provides information and signposting around mental health. Available 9am to 6pm, Monday to Friday (except for bank holidays).
Samaritans (call 116 123)	Call their helpline on 116 123. Lines are open 24 hours a day, 365 days a year.
Shout (text 85258)	Shout 85258 is a free, confidential, 24/7 text messaging support service for anyone who is struggling to cope.

Support from your organisation

Many organisations offer independent support to help their workforce manage their wellbeing. This can be through an Employee Assistance Programme.

It is also good practice to offer staff and volunteers regular supervision meetings or catch-ups. It may be appropriate to arrange clinical supervision from colleagues in the NHS if you’re delivering programmes in partnership with them.

What does good practice look like?

- Many local Minds use a “text you are home” system for volunteers and staff who are leading sports and physical activity sessions out of hours.
- England Athletics have developed a [Mental Health Champions handbook](#).
- The FA’s Mental Health Champions Scheme for referees provide bespoke training, access to their Employee Assistance Programme (EAP) and a safe space to reflect and share best practice.
- Mind offer monthly reflective practice sessions for staff to discuss any issues they are having personally or with their work with a trained counsellor.
- Middlesbrough and Stockton Mind meet people who have been referred to them ahead of inviting them to join services to help to understand their goals and aspirations, support needs and any areas of risk.



Frequently Asked Questions

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Frequently Asked Questions

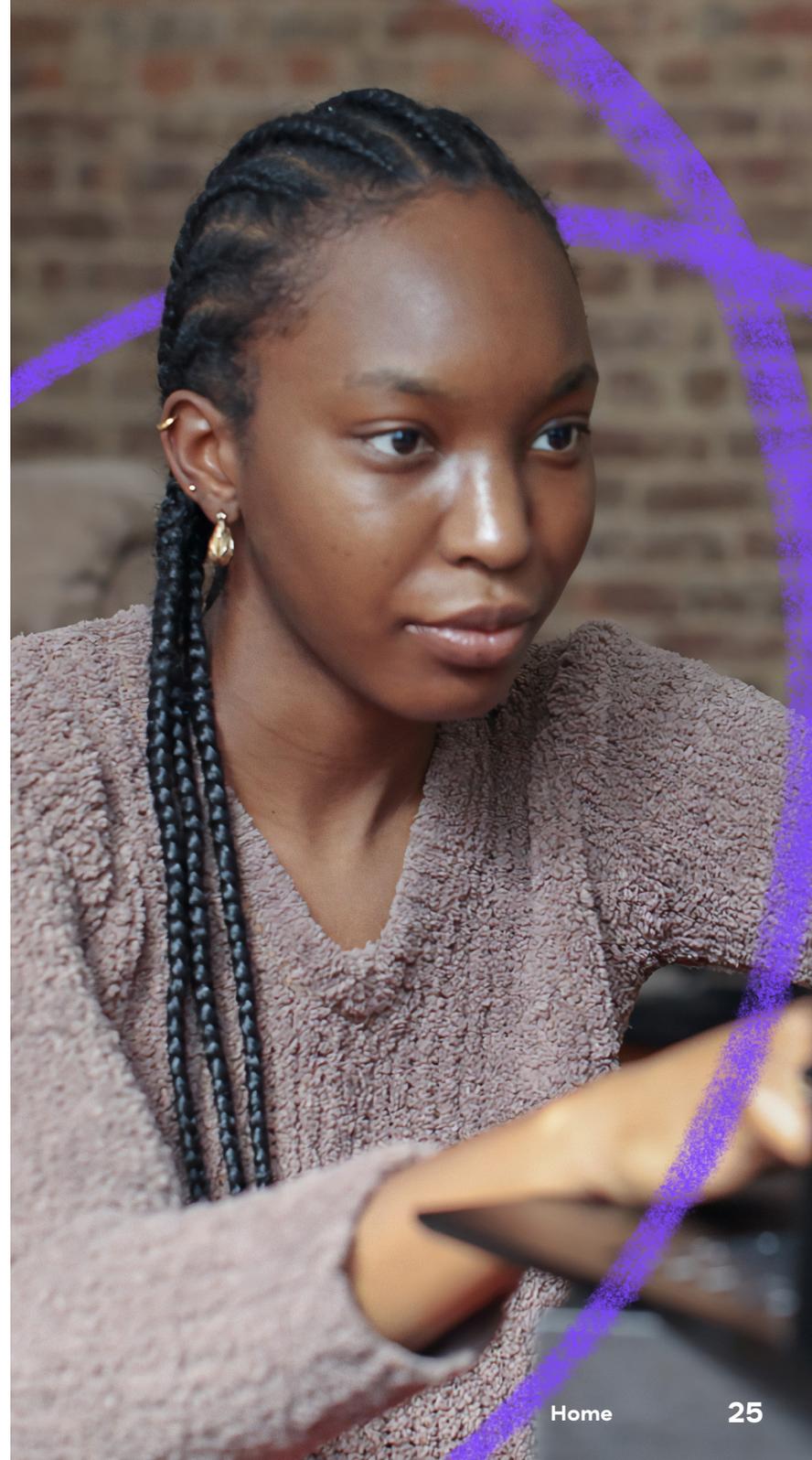
1 **If someone discloses a mental health problem to me, should I tell other people, such as other leaders, coaches, committee members or managers, in the club/group/organisation what I know?**

No, unless you have very serious concerns about somebody's safety, then being discreet and respecting someone's confidentiality is essential. If you think that sharing the information with one or two other people such as the Welfare Officer/coach/manager for a very clear and specific reason could help the person, seek their clear and specific consent to do this.

Follow these principles:

- Encourage the person to share information themselves with the people who need to know (like the coach or leader).
- Focus on how it affects their involvement in the club, group or activity.
- Should you need to tell other people, explain to the person why this is required.

It is important that information is treated as confidential as far as is reasonably possible, to build trust and respect. See [Confidentiality – when and how to break it](#).



2 A participant has contacted one of our volunteers out of hours on Facebook and via text stating that they have harmed themselves and are having suicidal thoughts. The volunteer feels out of their depth. What should I do?

This is a distressing situation for both the volunteer and the participant. It is important to reassure the volunteer to look after their own mental wellbeing and for them to confirm their boundaries with the participant while also being empathetic to their situation. In the immediate moment the volunteer should signpost and encourage the participant to access emergency services.

- For urgent medical attention, their options are Accident & Emergency (A&E) and Emergency GP appointments.
- For urgent medical advice, they can call NHS 111 (England) or NHS Direct (Wales).

It is important that the volunteer is clear on your organisation's policy on when and how to break confidentiality. This will help you determine what further action to take should the participant not wish to seek help independently. The volunteer should also be supported to report and record the incident following your organisation's reporting mechanisms.

You should offer the volunteer the opportunity to talk this through with their manager or the Welfare Officer as well as signposting them to further support for their own mental wellbeing such as your Employee Assistance Programme (if this is available to your volunteers). Agree what follow up is needed with the participant and who this should come from. As part of the review, revisit your guidance around boundaries and social media contact. Do you need to make any changes to your procedures as a result of this situation?

3 There are lots of different mental health helplines, what ones should I signpost people to?

At Mind, we recommend signposting people to the services below.

Support	Information
<u>Mind's Infoline</u>	Call the Infoline on 0300 123 3393. Available 9am to 6pm, Monday to Friday (except for bank holidays).
<u>Samaritans (call 116 123)</u>	Call their helpline on 116 123. Lines are open 24 hours a day, 365 days a year. Alternatively, email jo@samaritans.org .
<u>Shout (text 85258)</u>	Shout 85258 is a free, confidential, 24/7 text messaging support service for anyone who is struggling to cope.
Alternatively signpost them to their GP/ doctor or the NHS through 111 or 999.	

For more information on different helplines available to people experiencing mental health problems, please visit our [website](#).

4 A new participant who has been referred to our mental health sports programme has informed us they have a criminal conviction that means they are not allowed to attend a leisure centre or place where children and young people are present. Should I allow them to take part in our service?

Firstly, it is positive that the participant has been open and honest with you about their conviction. While it is not your place to ask probing questions, you do have a duty to safeguard everyone in your service. A follow-up question would be to ask how they feel they could be involved in the programme or which sessions they feel are appropriate for them to attend. Your response to this will depend on logistics. Do you offer sessions that would be appropriate for the participant to attend, e.g. held at an appropriate closed venue, or in small groups?

It is good practice to conduct risk assessments for people who are at risk of harm to self or others. These should be written in partnership with the person and other professionals who have referred the participant into the service, and identify ways to keep everyone safe.

[Nacro's criminal record support service](#) provides guidance to people, employers and practitioners on situations involving people with a criminal conviction.

5 A volunteer has disclosed that they have a criminal conviction on their application form – can I still allow them to volunteer as a peer volunteer?

Firstly, it is positive that the volunteer has openly disclosed their conviction on the form. While it is not your place to ask probing questions, you do have a duty to safeguard everyone in your service. It is important to understand the nature of the conviction including when it took place and whether it will affect the person's ability to undertake the role and the safeguarding of others.

Before recruiting volunteers, it's important to define the volunteer role clearly using a volunteer role description. This will help your organisation to determine whether this is regulated activity and appropriate for a Disclosure and Barring Check. It will also help you decide if the role is covered under the [Rehabilitation of Offenders Act](#) and help you assess what training and supervision is required.

It may be necessary to create a risk assessment for the volunteer, and determine the roles that are appropriate for them to do. We recommend discussing this with your Welfare Officer and senior management as well as seeking independent advice from agencies such as the police or probation service, or charities such as the [NSPCC](#), the [Ann Craft Trust](#) or Nacro (their [criminal record support service](#) provides guidance to people, employers and practitioners on situations involving people with a criminal conviction).



Appendices

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Appendix 1 – adult at risk criteria for each of the home nations

Nation	Criteria
<p>England (Care Act 2014)</p>	<p>A person aged 18 years and over who:</p> <ol style="list-style-type: none"> 1. has needs for care and support (whether or not the local authority is meeting any of those needs), and 2. is experiencing, or at risk of, abuse or neglect, and 3. as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of, abuse or neglect.
<p>Scotland (Adult Support and Protection Act 2007)</p>	<p>A person aged 16 years and over who:</p> <ol style="list-style-type: none"> 1. is unable to safeguard their own wellbeing, property, rights or other interests, and 2. is at risk of harm, and 3. 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.
<p>Wales (Social Services and Well Being Act 2014)</p>	<p>A person aged 18 years and over who:</p> <ol style="list-style-type: none"> 1. is experiencing or is at risk of abuse or neglect, and 2. has needs for care and support (whether or not the authority is meeting any of those needs), and 3. as a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it.

Nation	Criteria
<p>Northern Ireland (Adult Safeguarding Prevention and Protection in Partnership 2015)</p>	<p>An adult at risk of harm is a person aged 18 or over, whose exposure to harm through abuse, exploitation or neglect may be increased by their 1) personal characteristics and/or 2) life circumstances.</p> <ol style="list-style-type: none"> 1. Personal characteristics may include but are not limited to age, disability, special educational needs, illness, mental or physical frailty or impairment of, or disturbance in, the functioning of the mind or brain. 2. Life circumstances may include, but are not limited to, isolation, socio-economic factors and environmental living conditions. <p>An adult in need of protection is a person aged 18 or over, whose exposure to harm through abuse, exploitation or neglect may be increased by their personal characteristics and/or life circumstances and:</p> <ol style="list-style-type: none"> 3. Who is unable to protect their own well-being, property, assets, rights or other interests, and 4. Where the action or inaction of another person or persons is causing, or is likely to cause, him/her to be harmed. <p>In order to meet the definition of an adult in need of protection either 1) or 2) must be present, in addition to both elements 3) and 4).</p>

Appendix 2 – descriptions of abuse and harm

The Safeguarding Adults Legislation in each home country defines categories of adult abuse and harm as follows:

Nation	Abuse and harm		
England (Care Act 2014)	Physical Neglect and acts of omission Organisational / institutional Modern slavery	Sexual Financial or material abuse Self-neglect Emotional / psychological / mental	Discriminatory Domestic abuse (including coercive control)
Scotland (Adult Support and Protection Act 2007)	Physical Sexual Psychological	Neglect Financial	
Wales (Social Services and Well Being Act 2014)	Physical Sexual Psychological	Neglect Financial	
Northern Ireland (Adult Safeguarding Prevention and Protection in Partnership 2015)	Physical Financial Exploitation Hate crime	Sexual violence Institutional Domestic abuse Human trafficking	

Issues which are not included in the legislation but also relevant to safeguarding adults include:

Cyberbullying

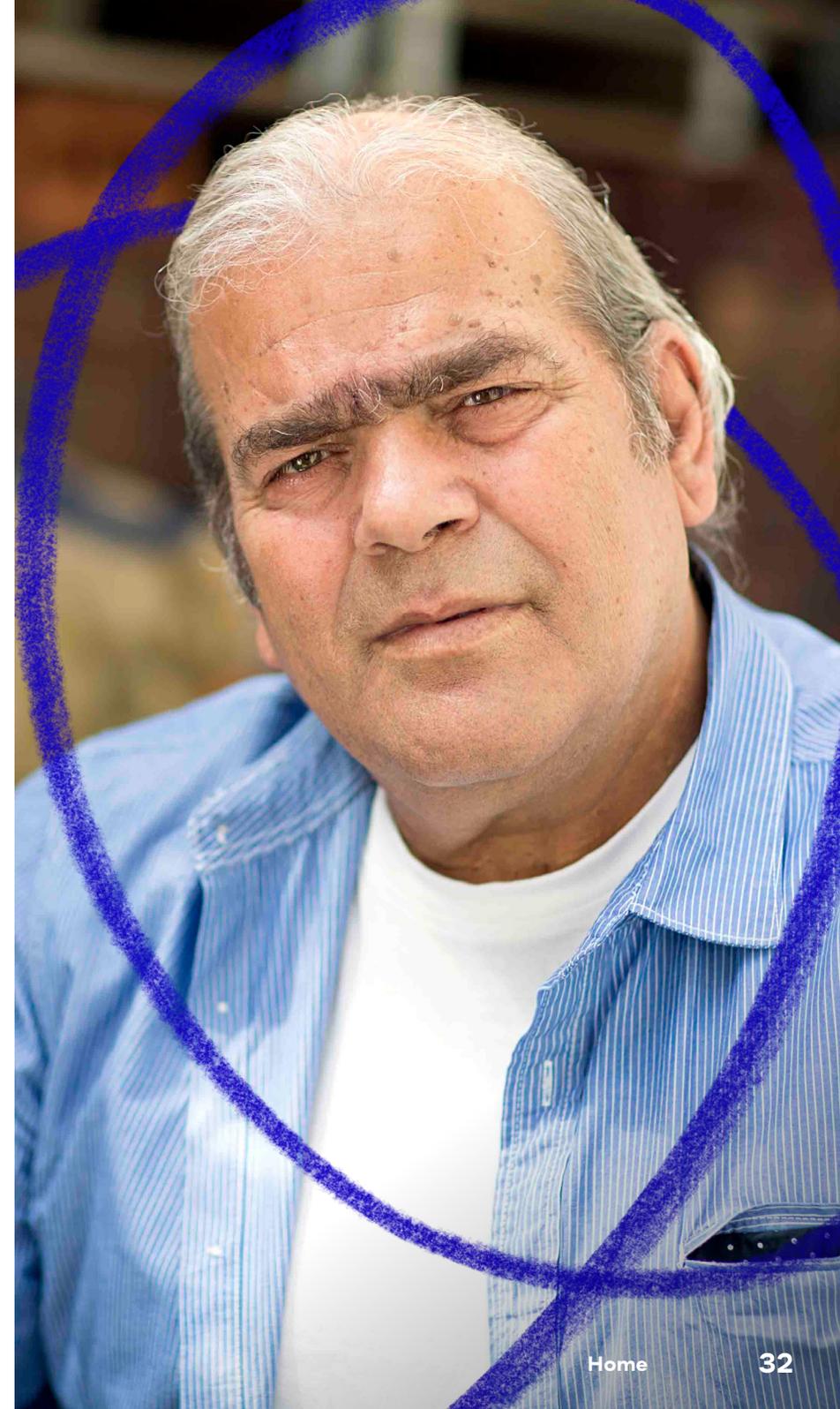
Cyberbullying occurs when someone repeatedly makes fun of another person online, repeatedly picks on another person through emails or text messages, or uses online forums with the intention of harming, damaging, humiliating or isolating another person. It can be used to carry out many different types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

Forced marriage

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

Mate crime

A ‘mate crime’ is when someone pretends to be friends with a person with learning disabilities or care and support needs but then goes on to exploit or abuse them. The way they are exploited may not be illegal, but it still has a negative impact on the person. ‘Mate crime’ is carried out by someone the person knows, and often happens in private.



Appendix 3 – Safeguarding adults at risk checklist

This checklist will help you create and integrate policies and procedures on safeguarding adults at risk.

Alternatively, use the [Ann Craft Trust's free online Safeguarding Checklist](#) to test your safeguarding knowledge and practices.

Question	Completed	Advice if unticked
<p>Do you have a designated safeguarding lead or group?</p>		<p>A safeguarding lead or group has the responsibility for overseeing the safeguarding practice in your organisation. This can include data collection, training, governance and creating policies and procedures. The Ann Craft Trust has an example of a safeguarding lead role description.</p>
<p>Do you have an up to date safeguarding adults at risk policy and procedures? This should cover existing and new activities as well as coaches, volunteers and participants.</p>		<p>Check with the person responsible for safeguarding at your organisation if you have one. If you don't, use the Ann Craft Trust's templates to create them.</p> <p>Tip: include examples or scenarios that are relevant to your service or activities.</p>
<p>Do you have a process and timelines for updating your safeguarding adults at risk policy and procedures?</p>		<p>Your policy and procedures should be kept up to date with relevant definitions and legislation. We suggest reviewing these at least annually.</p>
<p>Have you considered how everyone (staff, volunteers and participants) in your organisation follows the policy and procedures? Does everyone have the contact details for the safeguarding lead or group?</p>		<p>You could do this by:</p> <ul style="list-style-type: none"> ● Building it into training for staff and volunteers. ● Discussing it in team meetings and supervision sessions. ● Informing new and existing participants of where all policy and procedures are saved.

Question	Completed	Advice if unticked
<p>Have you outlined the roles, responsibilities and accountability of staff and volunteers?</p>		<p>Involve staff and volunteers in this.</p> <p>Also think about how you will communicate these with everyone within your organisation (for example, they could be saved on your shared drive and/or in a handbook).</p>
<p>Do staff and volunteers feel confident and comfortable with their roles and responsibilities? Do they require training to complete their role?</p>		<p>Ask staff and volunteers what support they require to do their role. If training is required then see Training for those responding to safeguarding concerns for more information.</p>
<p>Do you have an up to date whistleblowing and raising concerns policy?</p>		<p>Staff should never feel nervous to speak out and raise concerns. Your whistleblowing policy should provide them with details about the support they will receive if they raise concerns.</p> <p>Protect provide a free whistleblowing advice line as well as training and guidance.</p>
<p>Do you have a complaints procedure or right to appeal within your policy and procedures?</p>		<p>A person should have the right to complain if their concern is not followed up or is ignored by the organisation. This right should apply whether the concern is about themselves or another person. Templates and examples of a complaint or right to appeal procedure can be found online.</p>
<p>Do you know where to get advice on a safeguarding adult issue or to make a referral?</p>		<p>Every local authority has a Safeguarding Adults Board or Partnership who offer advice and training. To find yours visit the Safer Activities for Everyone website.</p>
<p>Contact the Ann Craft Trust for advice and support – call 0115 951 5400 or email ann-craft-trust@nottingham.ac.uk.</p>		

Appendix 4 – How to have conversations about mental health

Depending on your role or service, you may have varying amounts of time and space to have conversations about mental health. But even small steps to challenge stigma and help people can make a big difference. Here are some tips to help you with having conversations about mental health.

Someone in urgent need of help

If someone [needs urgent help](#) due to their mental health, for example if you think they might attempt suicide or self-harm or have seriously harmed themselves, you can support them by:

- If they are not safe by themselves right now – stay with them and help them call 999 for an ambulance, if you feel able to do so. Or you could help them get to A&E.
- If they can keep themselves safe for a little while – you can get quick medical advice by contacting NHS 111. Or you could help them make an emergency GP appointment to see a doctor. You can also encourage them to call the Samaritans on 116 123 to talk to someone, 24 hours a day.

Starting conversations about mental health

Sometimes starting a conversation about mental health is the hardest task, and it's important not to be discouraged by negative experiences.

Here are some tips to help start conversations:

- If someone approaches you wanting to talk, it may not be possible for you to give them the time they need there and then. Instead, show them you recognise that they've taken a positive step by speaking to you, explain why you can't talk now and arrange a better time to have the conversation. If they are in urgent need of help, be sure to signpost them to support (see Someone in urgent need of help).
- Find a quiet place with an informal atmosphere, such as a café. A conversation about mental health shouldn't feel like a formal interview.
- Ask someone how they are doing or feeling. Encourage them to engage with an open question focused on them and their wellbeing.
- Use your own personal experiences as a conversation starting point. Be clear on what you're happy to share, before you get started.
- Talk about how you maintain personal wellbeing, relax or de-stress (for example, how you may use sport or physical activity as part of your daily or weekly routine).
- Use topical news stories to highlight interesting points.

Managing conversations about mental health

- Actively listen to the person by giving them your undivided attention. Leave any questions or comments until the person has finished, so you don't interrupt them.
- Once someone knows they're being given the space and time to talk, they're more likely to open up.
- Reflecting the words they've used can encourage them to open up more.
- Use empathetic statements such as: "I appreciate this must be difficult for you...".
- Avoid clichés. Comments like "pull yourself together" or "you're just having a bad day" are unhelpful.
- Remind them that mental health problems are more common than people think, and that they can affect anyone at any time.
- Avoid asking too many questions, especially closed questions (which require a 'yes' or 'no' answer) and those that begin with the word 'why.' Ask open questions to invite a more detailed response:
 - Can you describe how you're feeling?
 - How do you look after yourself?
 - What support do you have in place?
- Reassure them it's positive they want to talk about their experience, and that they've acknowledged they want support (if this is the case).
- Ask if they're aware of sources of support, and signpost them to relevant information and help. It may be helpful to ask "What would you like to happen in this situation?" This will help to empower and encourage them to take the course of action that seems right to them. Be clear about what you can do, as well as what you can't.

- The important thing is to listen rather than give advice – the person needs to be able to act for themselves. Signpost them to sources of support, rather than telling them what you think is best.

Closing conversations about mental health

Closing conversations effectively helps to reassure the person that their thoughts and feelings have been listened to, and helps to clarify next steps.

- Sometimes conversations will come to a natural end. If this doesn't happen, provide a gentle indication that the conversation needs to come to an end. You could say something like: "It's been good to talk. We've covered a lot and we will have to wrap up soon because I have another session," or something similar.
- Summarise the conversation and anything you've both agreed to do. For example: "You've told me you're going to speak to your GP about how you're feeling, and I will email you details of your local Mind."
- Ask practical questions such as "Will someone be there when you get home?" or "Is there a friend you can go and see?"
- Offering a listening ear and showing your acceptance, warmth and regard can go a long way to help someone. It may not be possible to get a clear idea of the next steps they'll take as a result of talking to you. Ending the conversation by inviting them to take some time to reflect on what you've discussed, and to consider what they may want to do next could be the best way to bring the conversation to a close. This is especially true if you feel there's nothing more you can say at that time.
- If you feel it would be helpful, that it's appropriate within the boundaries of your role, and you're able to commit to giving more of your time in this way, you may want to arrange another time to meet and talk.



Have a question or would like more information?

You can find more information at [mind.org.uk](https://www.mind.org.uk).
Or why not take a look at the other guides in our
[Mental Health and Physical Activity Toolkit](#).

If you have any further questions, please contact
our Physical Activity team at sport@mind.org.uk.

Produced with support from



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Registered Charity No. 219830