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**Definition of Terms**

WORD/PHRASE	DEFINITION
Vulnerable Adult	Refers to any person aged 18 or over who for the time being are: A. Are unable to safeguard their own welfare or properly manage their financial affairs, and, B. Are in one or more of the following categories: i. A person in need of care and attention by reason of either infirmity or the effects of ageing ii. A person suffering from illness or a mental disorder iii. A person substantially handicapped by a disability
Child	Refers to any person aged under 18.
Abuse	1 : a corrupt practice or custom 2 : improper or excessive use or treatment 3 : obsolete : a deceitful act : 4 : language that condemns or vilifies usually unjustly, intemperately, and angrily 5 : physical maltreatment 6 ; refer to page 6 for full definitions and examples in sport

## **Introduction**

### **QUEENS PARK FOOTBALL CLUB POLICY STATEMENT ON SAFEGUARDING THE WELFARE OF CHILDREN, VULNERABLE ADULTS AND COACHES**

Every child /vulnerable adult, who plays or participates in football under the Queens Park umbrella, should be able to take part in an enjoyable and safe environment and be protected from abuse and the fear of abuse. This is the responsibility of every adult involved in the physical and mental development of young Queens Park players.

Queens Park Football Club recognises its responsibility to safeguard the welfare of all young players from the dangers of all forms of physical, sexual and emotional abuse and that they do not suffer neglect or are exposed to bullying.

To achieve this aim, Queens Park FC commits to educating its coaches and all staff engaged in and involved with the development of young players, in preventing abuse and taking the appropriate action if there is the suspicion of abuse or a belief that a child is at risk of abuse.

### Objectives and Method

It is vitally important that all young people participating in football with Queens Park Football Club do so in a quality, safe and enjoyable environment. To achieve this aim, the Club has compiled a *Child and Vulnerable Adult and Coach Protection Policy* which details how to take appropriate action if they suspect or believe a child is at risk of abuse. It also provides procedures and guidelines to minimise risk for abuse to develop and provide appropriate safeguards for all concerned in the Club.

- The Club will plan and organise its work with children and vulnerable adults so as to minimise the situations where abuse of young players may occur.
- The Club will introduce a system whereby young players, parents, guardians, carers and coaches may talk with an independent person if so requested.
- The Club will set in place a rigorous recruitment procedure to ensure all reasonable steps have been taken to safeguard children and vulnerable adults.
- The Club will issue guidelines on how to deal with the disclosure of suspicion of abuse.
- The Club will actively encourage its coaches to attend SFA Coach Development Courses.
- The Club will issue guidelines to all coaches and other relevant staff, as well as have in-house training and also highlight their relevant literature to review, in order that coaches and others fully understand the Child and Vulnerable Adult and Coach Protection issues.
- Where appropriate parents will be advised of the existence of these Guidelines and a summary made available.

These guidelines will be put in place in order to protect all young players from potential abuse but also to protect our coaches from false accusations.

## **Types of Abuse and How to Recognise It (including Racism and Bullying)**

It is generally accepted that there are four main forms of abuse. However, in some cases racism and bullying can have severe and adverse effects on a child or vulnerable adult. Queens Park Football Club and The Scottish Football Association are committed to protecting children and vulnerable adults from all forms of abuse.

### **Emotional Abuse**

Emotional abuse is the persistent emotional ill treatment of a child such as to cause severe and adverse effects on the child's emotional development. It may involve conveying to the child that they are worthless or unloved, inadequate or valued only insofar as they meet the needs of another person.

It may feature age or developmentally inappropriate expectations being imposed on children. It may also involve causing children to frequently feel frightened or in danger, or the corruption and exploitation of a child.

Some level of emotional abuse is persistent in all types of treatment although it may exist alone.

### **Emotional Abuse in Sport**

This may include the persistent failure to show self-respect, build self-esteem and confidence, and support children that may be caused by:

- Exposing children to a humiliating, taunting or aggressive behaviour or tone.
- Failure to intervene where a child's self confidence and worth are challenged or undermined.

### **Neglect**

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. It may involve a parent or carer failing to provide adequate food, shelter, warmth, clothing, and cleanliness. It may also include leaving a child home alone, exposing the child in a manner likely to cause them unnecessary suffering or injury and the failure to ensure that a child's receives appropriate medical care or treatment.

### **Neglect in Sport**

This could include the lack of care, guidance, supervision, or protection that may be caused by:

- Exposing the child to unnecessary cold or heat.
- Exposing the child to unhygienic conditions, lack of food, water or medical care.
- Non intervention in bullying or taunting.

Neglect, as well as being the result of a deliberate act can also be caused through omission or the failure to act or protect.

## **Physical Abuse**

Physical abuse may involve the actual or attempted physical injury to a child including hitting, shaking, throwing, poisoning, burning, scalding, drowning, suffocating or otherwise harming a child.

Physical abuse may also be caused when a parent or carer feigns the symptoms of or deliberately causes ill health to a child whom they are looking after. This situation is described as Factitious or Induced Illness Syndrome (previously known as Munchausen Syndrome by Proxy). A person may do this because the need or enjoy the attention they receive through having a sick child.

Physical abuse may also be a deliberate act, omission, or failure to protect.

## **Physical Abuse in Sport**

This may include the bodily harm caused by a lack of care, attention, or knowledge that may be caused by:

- Over training or dangerous training of players
- Over playing an athlete
- Failure to do a risk assessment of physical limits or pre-existing injuries or medical conditions
- Administering, condoning or failure to intervene in drug use

## **Sexual Abuse**

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of, or consents to what is happening. The activities may involve physical contact, including penetrative or non-penetrative acts. They may include no-contact activities such as forcing children to look at or be involved in the production of pornographic material, to watch sexual activities or encouraging children to behave in sexually inappropriate ways.

Boys and girls can be sexually abused by males and/or females, including people to whom they are not related, and by other young people. This includes people from all walks of life.

## **Sexual Abuse in Sport**

This could include contact and non-contact activities and may be caused by:

- Exposure to sexually explicit inappropriate language, jokes or pornographic material
- Inappropriate touching
- Having any sexual activity or relationship
- Creating opportunities to access children's bodies

### More Detailed Signs Of The Abused Child

It is important to remember this list is not definitive or exhaustive. Any of these signs or behaviours has to be seen in the context of the child's whole situation and it is the combination with other information related to the child and his/her circumstances that may indicate abuse. There can also be an overlap between different forms of abuse.

#### Physical Abuse

Signs of possible physical abuse:

- Unexplained injuries or burns, particularly if they are recurrent
- Improbable excuses given to explain injuries
- Refusal to discuss injuries
- Untreated injuries, or delay in reporting them
- Excessive physical punishment
- Arms and legs kept covered in hot weather
- Avoidance of swimming, physical education etc
- Fear of returning home
- Aggression towards others
- Running away

When considering the possibility of non-accidental injury it is important to remember that the injuries may have occurred for other reasons. Among the most important are:

- Genuine accidental injuries, which are common. The nature and site of the bruising relative to the child's age is important
- Bleeding and clotting disorders
- Mongolian blue spots which occur naturally in Asian, Afro-Caribbean and Mediterranean children
- Skin disorders e.g. impetigo
- Rare bone diseases e.g. brittle bone
- Swelling or dislocation of the eye caused by tumour
- Undiagnosed birth injury, e.g. fractured clavicle

**Medical advice must be sought in all cases.**

### **Emotional Abuse**

Signs of possible emotional abuse are:

- Low self esteem
- Continual self-deprecation
- Sudden speech disorder
- Significant decline in concentration
- Immaturity
- "Neurotic" behaviour (e.g. rocking, head banging)
- Self-Mutilation
- Compulsive stealing
- Extremes of passivity or aggression
- Running away
- Indiscriminate friendliness

### **Physical Neglect**

Signs of possible physical neglect:

- Constant hunger
- Poor personal hygiene
- Constant tiredness
- Poor state of clothing
- Frequent lateness and/or unexplained non-attendance at school
- Untreated medical problems
- Low self esteem
- Poor peer relationships
- Stealing

### **Non-Organic Failure to Thrive**

Signs of possible non-organic failure to thrive:

- Significant lack of growth
- Weight loss
- Hair loss
- Poor skin or muscle tone
- Circulatory disorder

## Signs Of The Sexually Abused Child

Not all children are able to tell that they have been sexually assaulted. Changes in a child's behaviour may be a signal that something has happened. It is important to remember that in sexual assault there may be no physical or behavioural signs.

**NB A child who is distressed may have some of these signs which should alert you that to a problem. It is the combination and frequency of these signs that may indicate sexual abuse. Always seek advice. Try to notice changes in usual behaviour.**

### Signs of Possible Sexual Abuse

#### Behavioural

- Lack of trust in adults or over familiarity with adults
- Fear of a particular individual
- Social Isolation -withdrawal or introversion
- Sleep disturbance (nightmares, bed-wetting, fear of sleeping alone, needing a night light).
- Running away from home
- Girls taking over the mothering role
- Sudden school problems e.g. falling standards truancy
- Reluctance or refusal to participate in physical activity or to change clothes for games
- Low self-esteem
- Drug, alcohol or solvent abuse
- Display of sexual knowledge beyond the child's age e.g. French kissing
- Unusual interest in the genitals of adults or children or animals
- Fear of bathrooms, showers, closed doors
- Abnormal sexual drawings
- Fear of medical examinations
- Developmental regression
- Poor peer relationships
- Over sexualised behaviour
- Compulsive masturbation
- Stealing
- Irrational fears
- Psychosomatic factors e.g. recurrent abdominal or headache pain
- Sexual Promiscuity
- Eating disorders

#### Physical/Medical

- Sleeping problems, nightmares, and fear of the dark.
- Bruises, scratches, bite marks to the thighs or genital areas
- Anxiety/Depression
- Eating disorder e.g. anorexia nervosa or bulimia
- Discomfort/difficulty in walking or sitting
- Pregnancy - particularly when reluctant to name father
- Pain on passing urine, recurring urinary tract problem, vaginal infections or genital damage

- Venereal disease/sexually transmitted diseases.
- Soiling or wetting in children who have been trained
- Self mutilation, suicide attempts
- Itch, soreness, discharge, unexplained bleeding from the rectum, vagina or penis
- Stained underwear
- Unusual genital odour

## **Race and Racism**

The Scottish Football Association has in place an on-going campaign called Show Racism the Red Card, which is fully supported by Queens Park Football Club, aimed at raising awareness on racism and equal opportunities. Children and vulnerable adults from black minority and ethnic groups (and their parents) may have experienced harassment, racial discrimination, and institutional racism. Although not in itself a category of abuse, racism may be categorised as emotional abuse under local child protection procedures.

All organisations, including football, working with children and vulnerable adults including those operating where black and ethnic communities are numerically small, should address institutional racism, defined in the Macpherson Inquiry Report on Stephen Lawrence as:

*“The collective failure by an organisation to provide appropriate and professional service to people on account of their race, culture and/or religion”*

## **Bullying**

### **Managing Bullying**

The lives of many people are made miserable by bullying. Victims of bullying can feel lonely, isolated and deeply unhappy. It can have a devastating effect on a child or vulnerable adult's self-esteem, destroy their self-confidence and concentration. They may also become withdrawn and insecure, more cautious, less willing to take any sort of risk. They may feel it is somehow their fault or that there's something wrong with them and at the worst cause depression and/or feelings of worthlessness that lead to suicide.

As a result of the above and to ensure Queens Park Football Club creates an atmosphere where bullying of children and vulnerable adults is unacceptable the Guidelines for identifying and managing bullying have been developed.

Any suspicions or allegations of bullying of a child or vulnerable adult against a staff member will be dealt with through the Queens Park Football Club Disciplinary Procedures.

Bullying can be difficult to pick up because it often happens away from others and victims do not tend to tell. However you can watch for signs that may indicate the presence of bullying. The following provides common victim of bullying behaviour.

If a child or vulnerable adult:

- Hesitates to come to training/programme/session.
- Is often the last one picked for a team or group activity for no apparent reason, or gets picked on when they think your back is turned.
- Is reluctant to go to certain places or work with a certain individual/s.
- Has clothing or personal possessions go missing or are damaged.
- Has bruising or some other injury.
- Keeps 'losing' their pocket money.
- Is quite nervous, withdraws from everybody else and becomes quiet and shy, especially in the case of those who are normally noisy and loud.
- A usually quiet person becomes suddenly prone to lashing out at people, either physically or verbally.

Important Note: Remember that victims of bullying may be adults and that a child or vulnerable adult's aggressor may not be a peer.

#### **Action to Help the Victim/s and Prevent Bullying:**

- Take all signs of bullying very seriously.
- Encourage all children to speak and share their concerns. Help the victim to speak out and tell the person in charge or someone in authority. Create an open environment.
- Take all allegations seriously and take action to ensure the victim is safe. Speak with the victim and the bully/ies separately.
- Reassure the victim/s that you can be trusted and will help them, although you cannot promise to tell no one else.
- Keep records of what is said i.e. what happened, by whom and when.
- Report any concerns to the person in charge at the organisation where the bullying is occurring.

#### **Action towards the Bully/ies:**

- Talk with the bully/ies, explain the situation and try to get the bully/ies to understand the consequences of their behaviour.
- Seek an apology from the bully to the victim/s.
- Inform the bully's parents/guardians.
- If appropriate, insist on the return of 'borrowed' items and that the bully/ies compensate the victim.
- Impose sanctions as necessary.
- Encourage and support the bully/ies to change behaviour.
- Keep a written record of action taken.

### **Minimise Situations Where the Abuse of Young Players Will Occur**

Queens Park Football Club has adopted and implemented a policy for **all youth teams** to have at least two coaches present at all home and away matches as well as training/coaching sessions. In a situation where a child may need hospital attention, this method will allow one coach to travel to the hospital with the player, while the remaining coach will look after the team.

Two coaches present will also provide appropriate safeguards for children and coaches and minimise the opportunity for abuse.

### **Code of Conduct in the Care of Children, Vulnerable Adults and Young People**

To minimise risk, the following guidelines for all Queens Park Football Club staff involved with the development of young players must be followed:

#### **DOs**

- Treat everyone with respect.
- Avoid physical 'horse play' such as tickling or wrestling.
- Recognise that caution is required even in sensitive moments of counselling, such as dealing with bullying, bereavement or abuse.
- Always be public and open when working with children, vulnerable adults or young people. Avoid situations where a coach and young player are completely unobserved.
- Always treat players in an open environment, and not behind closed doors, to avoid a situation where false accusations may be made and to minimise risk.
- If groups have to be supervised in changing rooms, it is advised that coaches work in pairs.
- Encourage children and adults to feel comfortable in pointing out attitudes of behaviour they do not like.

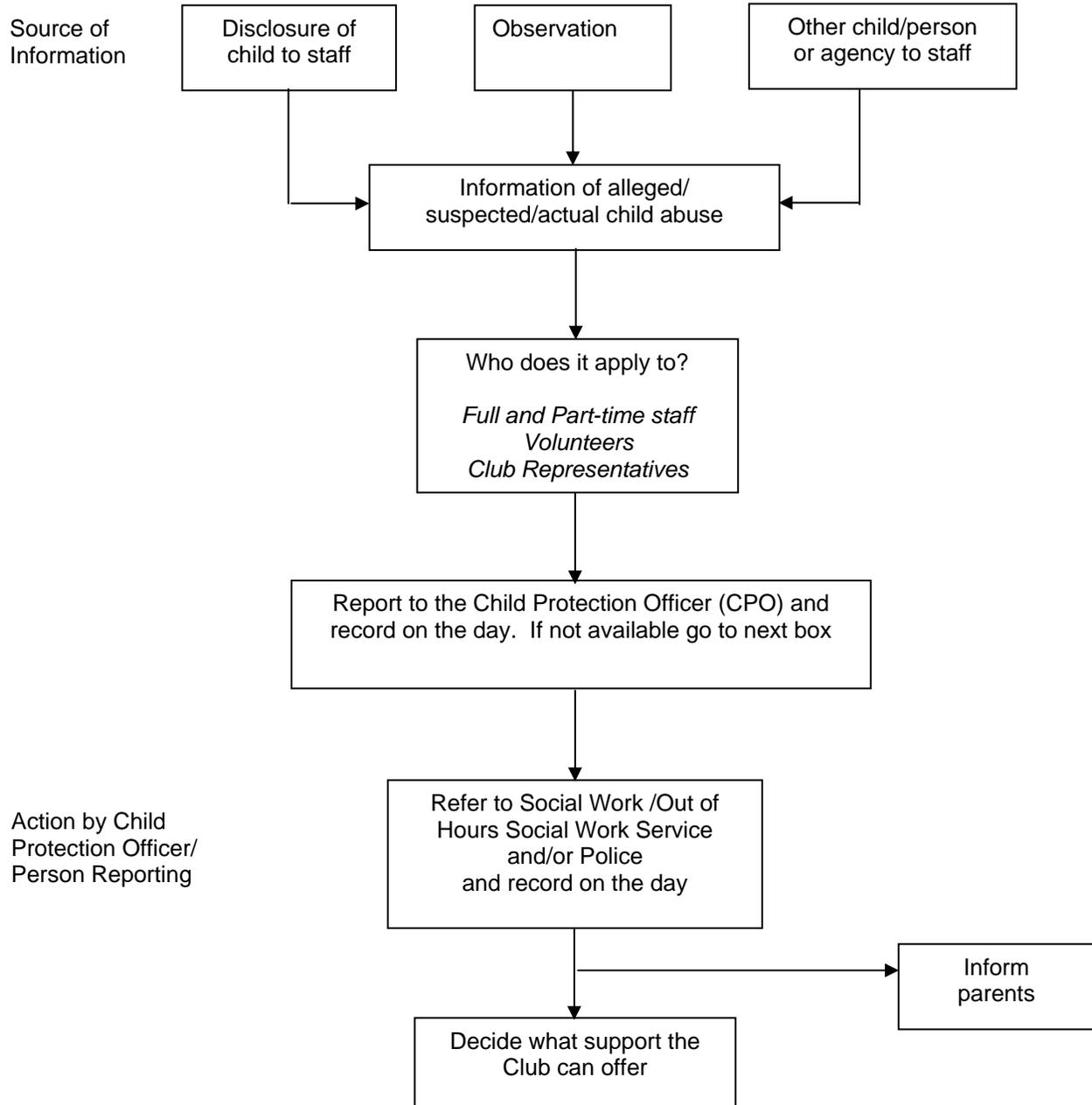
**DON'Ts**

- Spend excessive time alone with a child or vulnerable adult.
- Invite children/vulnerable adults to your home.
- Have children, vulnerable adults or young people alone in the front seat of your car. If you do have to transport children, ensure the last person to leave is in the back of the car.
- Take children, vulnerable adults or young people to your home where they will be alone with you unless in an Emergency which should be done with the consent of the parent and someone else in the Club
- Allow or engage in 'horse play' such as tickling or wrestling.
- Share a bedroom with a child or vulnerable adult unless in an Emergency which should be done with the consent of the parent and someone else in the Club.
- Allow or engage in any inappropriate touching.
- Make sexually suggestive comments, even in fun.
- Allow allegations made by a child or vulnerable adult to go unchallenged, unrecorded or not acted upon.
- Jump to conclusions about others without first checking all the facts.
- Allow yourself to be drawn into inappropriate attention seeking behaviour such as tantrums or crushes.
- Exaggerate or trivialise child or vulnerable adult abuse.
- Show favouritism to any individual.
- Rely on just your good name to protect you.
- Believe "it could never happen to me".
- Meet with children outside of organised football.

The reasoning behind these guidelines is to ensure that all reasonable steps have been taken to minimise risk to players, coaches and club representatives.

### Flow Chart 1: Guidelines on how to deal with the disclosure of suspicion of abuse

People can become aware of abuse or the suspicion of abuse either through their own observations, through a third party or if a child informs someone directly.



**NB.** In the very exceptional circumstances if a child requires immediate medical attention as a result of abuse, phone the Social Work Department and seek further advice.

Flow Chart 1: Guidelines on how to deal with the suspicion of abuse

Flowchart 1 represents the action to be taken when managing allegations or suspicions of Child Abuse. The guidelines which follow are more detailed to specific situations and cover both disclosure of abuse within a football setting and also disclosure of abuse at home.

## Responding to a Disclosure

On receiving information concerning a disclosure follow the steps below:

- React calmly so as not to frighten the child/vulnerable adult.
- Listen to the child/vulnerable adult.
- Do not show disbelief.
- Tell the child/vulnerable adult that he/she is not to blame and that he/she was right to tell.
- Take what the child/vulnerable adult says seriously while recognising the difficulties inherent in interpreting what a child/vulnerable adult says especially if they have a speech disability and/or differences in language.
- Do not pre-suppose that the experience was bad or painful – it may have been neutral or even pleasurable. Always avoid projecting your own reactions onto the child.
- If you need to clarify, keep questions to the absolute minimum to ensure a clear and accurate understanding of what has been said.
- If you need to clarify or the statement is ambiguous use open-ended, non-leading questions e.g. what happened; where did it happen; when did it happen; who did it?
- Do not introduce personal information from either your own experiences or those of other children.
- Reassure the child.
- Pass your concerns on the day to the Child Protection Co-ordinator and/or the Social Work Department or the Police in the area where the abuse is alleged to have occurred (these services are available 24 hours a day).
- Make a full record of what has been said, heard and/or seen as soon as possible in the child/vulnerable adult's own words. If available, include the following information:
  - Name of child/vulnerable adult
  - Age, date of birth of child/vulnerable adult
  - Home address and telephone number of the child/vulnerable adult
  - The nature of the allegation in the child's own words.
  - Any times, dates or other relevant information.
  - Whether the person making the report is expressing their own concern or the concerns of another person
  - The child/vulnerable adult's account, if it can be given, of what has happened and how any bruising or other injuries occurred.
  - Details of any witnesses to the incident
  - Whether the child/vulnerable adult's parent or guardian have been contacted
  - Details of anyone else who has been consulted and the information obtained from them
  - If it is not the child/vulnerable adult making the report, whether the child/vulnerable adult been spoken to, if so what was said
- Record, sign and date on the day what you have seen or been told, using Referral Form (Appendix 1).
- If making an electronic copy do not save to the hard drive or floppy disk. Print off the record, sign and date, then delete electronic copy, all on the day.

**Remember: Listen, Respond, Report and Record**

## Actions to Avoid

On receiving information concerning a disclosure:

- Do not panic.
- Do not allow shock or distaste to show.
- Do not probe for more information than is offered.
- Do not speculate or make assumptions.
- Do not make negative comments about the alleged abuser.
- Do not approach the alleged abuser.
- Do not make promises or agree to keep secrets.
- Do not give a guarantee of confidentiality

## Sharing concerns with Parents, Guardians or Carers

### Where the information suggests a concern

There is always a commitment to work in partnership with parents/guardians/carers where there are concerns about their children/vulnerable adults. Therefore in most situations **not involving the possibility of child or vulnerable adult abuse**, it would be important to talk to parents/guardians/carers to help clarify any initial concerns. For example, if a child or vulnerable adult seems withdrawn, there may be a reasonable explanation. He/she may have experienced an upset in the family, such as a parental separation, divorce or bereavement.

### Where the information suggests abuse

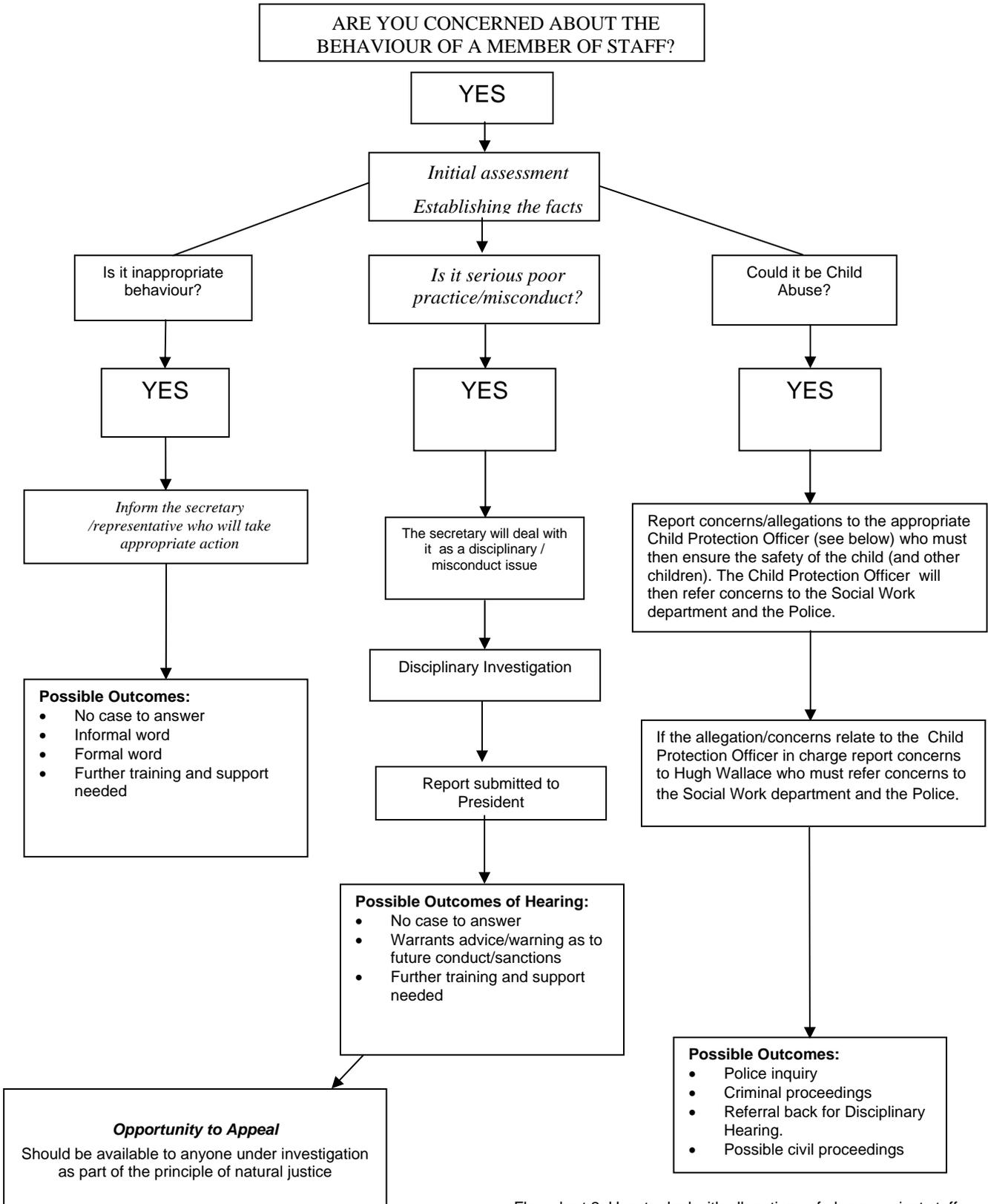
However there are circumstances in which a child or vulnerable adult might be placed at even greater risk if concerns are shared e.g. where a parent/guardian/carer may be responsible for the abuse or not able to respond to the situation appropriately. In these situations or where concerns still exist, any suspicion, allegation or incident of abuse must be reported to the Child & Vulnerable Adult Protection Co-ordinator and/or follow Flowchart 1 as soon as possible and record (see **Appendix 1** for referral form).

***In all cases of alleged abuse, advice and guidance is to be sought from the local Social Work Department or Police as to who contacts the parents.***

## Allegations of Abuse against a Member of Staff or Volunteer

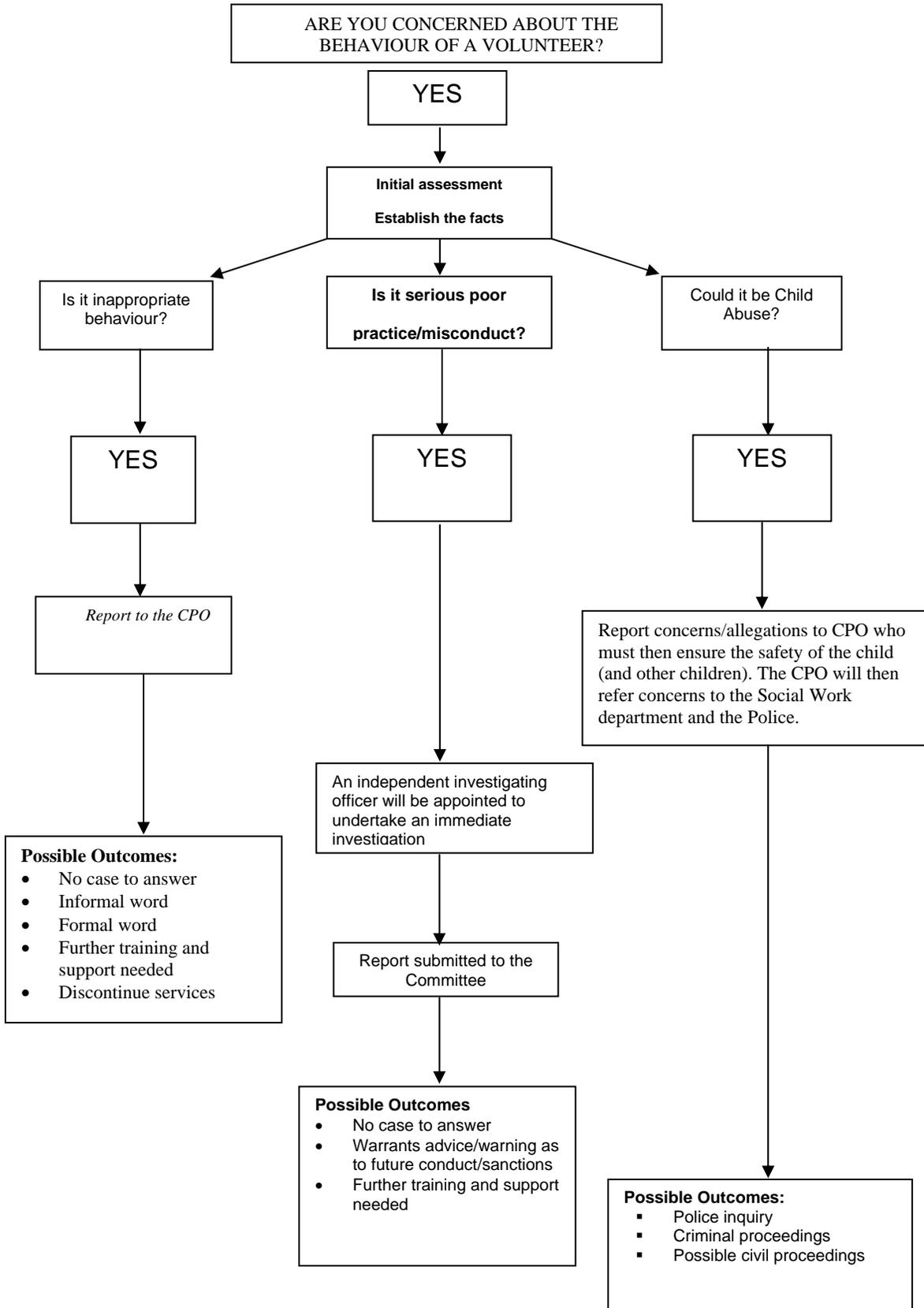
It is important to acknowledge that the feelings caused by the discovery of potential abuse by a member of staff or volunteer will raise different issues e.g. people may feel that it could not possibly happen by the person who is alleged to have done it. It is not the responsibility of a staff or voluntary member to take responsibility or to decide whether or not the child or vulnerable adult has been abused. However, as with allegations of non-staff members, it is the responsibility of the individual to act on any concerns.

**Flow chart 2: Guidelines in relation to concerns about a member of staff concerning alleged/suspected Child Abuse.**



Flow chart 2: How to deal with allegations of abuse against staff

**Flow Chart 3: Guidelines in relation to concerns about a volunteer concerning alleged/suspected Child Abuse.**



## **Procedures for managing allegations of abuse of a child or vulnerable adult made against a member of staff or Volunteer**

### **Purpose and status of the procedures**

- These procedures aim to ensure that all allegations of abuse involving a child or vulnerable adult are dealt with in a timely and appropriate manner by following Flowchart 2.
- These procedures do not stand-alone and should be read in conjunction with QPFC'S Disciplinary Procedures where the allegation relates to a member of staff.

### **Scope**

- These procedures apply to all QPFC staff and volunteers who have contact with children and/or vulnerable adults.
- Any allegation of abuse concerning a child or vulnerable adult will be taken seriously and appropriate action taken in accordance with the procedures detailed below.

### **Principles**

- Any information that raises concern about the behaviour of a member of staff or volunteer towards a child or vulnerable adult must be passed on as soon as possible in accordance with the procedures detailed below. No member of staff or a member or volunteer in receipt of such information shall keep that information to himself or herself, or attempt to deal with the matter on their own.

### **Initial Reporting of Information – Staff & Volunteers**

- Any concerns for the welfare of a child or vulnerable adult arising from the behaviour of a member of staff/volunteer must be reported to the secretary/Child Protection Officer immediately on the day, as soon as is practically possible.
- Where the concern is about the secretary/Child Protection Officer it must be reported to the independent person (see P. 25 Provide Children and Vulnerable Adults with an independent person to talk with) and he/she must be consulted before any action is taken where there is uncertainty about whether the information constitutes possible abuse or not and/or it is unclear about what action should be taken.
- Where allegations concern poor practice rather than possible abuse, the secretary must be consulted and appropriate action taken as soon as is practically possible.
- Where information received suggests a complaint against a member of staff/volunteer, before any formal procedure is entered into an initial assessment of the facts (see Procedure: Establishing the Basic Facts P.20) will be carried out which could result in a formal investigation.

- There may be three types of formal investigation: -
  - i. A disciplinary investigation (not applicable for volunteers)
  - ii. A criminal investigation
  - iii. Civil proceedings (to sue or charge in the event of an unsuccessful prosecution) may also be initiated by the person/family who alleged the abuse
- The results of a criminal investigation may well influence the disciplinary investigation, but not in all cases.

### **Procedure – Establishing the Basic Facts**

- Following receipt of information that may support an allegation of abuse, it is essential to establish the basic facts in order to determine the appropriate route by which to deal with the allegation.
- In a large proportion of cases it will be appropriate for an initial assessment to be carried out by the secretary/Child Protection Officer (This is because it is more likely that the information will be ambiguous or borderline, or where the facts do not support an allegation of abuse).
- The purpose of the initial assessment is to clarify the nature of the incident, or misgivings that have led to the information being received and to establish whether there is reasonable cause to suspect or believe that a child or vulnerable adult is at risk.
- The initial assessment must be conducted before any formal action is taken.
- A decision has to be made at this point which route to follow. The various options concerning a member of staff are depicted in Flowchart 2 (see page 17). The various options concerning a volunteer are depicted in Flowchart 3 (see page 18).
- External agencies such as the Police and Social Work Department may be consulted for advice. This is important because they have an overview of child protection issues and may well have other information that together causes concern.
- An independent investigating officer i.e. a person who has no direct involvement in the situation from which the investigation arises, will be appointed by the secretary to undertake an immediate investigation into all the circumstances of the case.
- Following advice from the police, cases that also involve a criminal investigation, will not preclude disciplinary action being taken provided sufficient information is available to enable the secretary to make a decision.

### **Procedure – Managing Allegations of Abuse**

- In all cases of suspected abuse an initial assessment of the facts must be carried out.
- If the initial information received gives reasonable cause to suspect or believe that a child or vulnerable adult has been abused by a member of staff/volunteer, this must be reported to the secretary or his representative as soon as possible on the day.

### **Conducting an initial assessment where information may suggest an allegation of abuse**

- In all cases where the facts support a possible allegation of abuse, the initial assessment may also form part of the disciplinary investigation /investigation for volunteers.
- If appropriate, the member of staff/volunteer about whom the allegation has been made may be approached as part of the information gathering process.
- Where the nature and seriousness of the initial information suggests that a criminal offence may have been committed, or to assess the facts may jeopardise the evidence, in these circumstances, advice should be sought from the Police before any approach is made to the member of staff/volunteer.
- As each situation is unique, guidance cannot be prescriptive. Assessment of the basic facts, however, may require that the child(ren) or vulnerable adult involved are asked some basic, open-ended, non- leading questions solely with a view to clarifying the basic facts. It may also be necessary to ask similar basic questions of other children, or other appropriate individuals e.g. coaches.
- If it is necessary to speak to the child or vulnerable adult in order to clarify the basic facts best practice suggests that consent from the parent/guardian be obtained.

### **Making a referral in cases of suspected abuse**

- The secretary or his representative will refer the allegation to the Social Work Department and the Police. Appropriate steps will be taken to ensure the safety of the child(ren) or vulnerable adult who may be at risk.
- Where known, all information passed to the Police and Social Work Department should include the following:
  - Name of child/vulnerable adult
  - Age, date of birth of child/vulnerable adult
  - Home address and telephone number of the child/vulnerable adult
  - Whether the person making the report is expressing their own concern or the concerns of another person
  - The nature of the allegation (include all of the information obtained during the initial investigation e.g. time, date, location of incident).
  - Details of any witnesses to the incident
  - The child/vulnerable adult's account, if it can be given, of what occurred and how any injuries/bruising occurred. Great care should be taken not to conduct an investigation but to establish the basic facts.
  - Whether the child/vulnerable adult's parent or guardian have been contacted,
  - Details of anyone else who has been consulted and the information obtained from them
  - If it is not the child/vulnerable adult making the report, has the child/vulnerable adult been spoken to, if so what was said?
  - Details of the member of staff/volunteer against whom the allegation has been made
- *Reporting of the matter to the Police or Social Work Department must not be delayed by attempts to obtain more information.*

- Where possible any referral telephoned to the Police and Social Work Department should be confirmed in writing by the secretary or his representative within 24 hours.
- A record should be made of the name and designation of the social work member of staff or the Police Officer to whom the concerns were passed together with the time and date of the call, in case any follow up is required.
- The parents or carers of the child will be contacted as soon as possible following advice from the Social Work Department and or Police in line with child protection procedures.

### **Procedure for managing the staff member/volunteer against whom the allegation has been made**

- Where the information gives reasonable cause to suspect or believe that alleged abuse has occurred the Police and Social Work Department must be notified as soon as possible on the day the information is received.
- Following advice from the Police, if the decision is made that the staff member/volunteer against whom the allegation has been made is to be informed, the member of staff/volunteer should be told that information has been received which may suggest an allegation of abuse. As the matter will be subjudice, no details will be given unless advised by the police.
- At the same time, there must be an awareness of the need to preserve best evidence for any criminal proceedings while at the same time safeguarding the rights of the employee/volunteer.
- The Scottish Office has recommended that the general rule should be that anyone charged with this responsibility, after applying basic tests of logic and credibility, should always notify the Police before interviewing the person against whom the allegation has been made.

### **Suspension**

- A precautionary suspension is not a form of disciplinary action (member of staff) or sanction (volunteer). The member of staff/volunteer may be suspended whilst an investigation is carried out.
- For an allegation made against a member of staff, the office bearer dealing with the disciplinary situation will normally carry out suspension. However in exceptional circumstances, any office bearer may suspend a member of staff on the basis of the criteria outlined in the previous paragraph.
- At the suspension interview the employee will be informed of why the suspension is taking place (within the confines detailed in paragraph 2 in *Procedure for managing the staff member against whom the allegation has been made*) and given the opportunity to give a statement should he/she wish. Notification of the suspension and the reasons for it will be conveyed in writing to the employee within three working days of being informed of their suspension.

### **Allegations of Previous Abuse (Historical Abuse)**

An adult who was abused may make allegations of abuse some time after the event e.g. as a child or by a member of staff/volunteer who is still currently working with children. Where such an allegation is made, the club should follow these procedures and report the matter to the Social Work Department or the police. This is because other children, either within or outside football, may be at risk from this person.

### **False or Malicious Allegations**

Where an investigation of abuse has been conducted and is unfounded the staff member/volunteer will receive an account of the circumstances and/or investigation and a letter confirming the conclusion of the matter. Where after reviewing the details of the account of the circumstances or the investigation it is clear that the allegation has been malicious or unfounded, the person may wish to seek legal advice where appropriate.

Queens Park Football Club will take all reasonable steps to support the individual in this situation. In these circumstances the Club reserves the right to discontinue a child's access to that activity.

Data collected for the investigation will be destroyed in accordance with the requirements of the Data Protection Act 1998.

## **Medical Help**

It is crucial for the purposes of establishing child abuse that the appropriate medical is done, appropriate consents obtained and (as recommended in the Clyde Report) that a child is not subjected to multiple medicals e.g. for sexual abuse it is a forensic medical requiring two doctors.

Other than in rape cases, these are usually planned and are child centred. It is very important to note that immediate medical treatment is not required in many child abuse cases. It will not always be a requirement to take the child to a hospital.

The medical examination for the purposes of establishing child abuse is normally done under the auspices of the Local Authority Child Protection Guidelines and arranged by the police/health and social work department.

In the very exceptional circumstances, unless the child requires immediate medical help, then this shall be dealt with by the relevant authorities.

## The Law and Medical Consent: Children and Vulnerable Adults

In some cases it may be necessary to obtain consent for medical examination, treatment or procedure to a child or vulnerable adult e.g. where an injury has occurred in the course of training or competition or where it is alleged that the child has been abused.

The purpose of this guidance is to provide an overview of the Law in Scotland in relation to medical consent and to advise staff members on the best practice that must be followed.

### Children - Who can give consent?

#### The child

The Age of Legal Capacity (Scotland) Act 1991 allows children **under the age of 16** to give their own consent in certain circumstances. Section 2(4) states:

*" A person under the age of 16 shall have legal capacity to consent on his/her own behalf to any surgical, medical or dental procedure or treatment where, in the opinion of a qualified medical practitioner attending him, he is capable of understanding the nature and possible consequences of the procedure or treatment"*

The decision about competence is entirely one for the doctor or other medical practitioner to make.

**This means where a child is assessed as being capable of providing consent, the consent of a parent/guardian is not required.**

The Scottish Executive recommend that efforts should always be made to persuade the child that his/her parents/guardians or carers should be informed, except where it is clearly not in the child's best interests to do so. If a child refuses to allow parents/guardians or carers to be informed, then this must be respected.

**Consent from the following categories would only be required where the child is assessed as incapable of providing consent:**

#### Person with Parental Responsibilities in relation to the child.

The consent of a person who has parental responsibility towards the child should normally be required under the Children (Scotland) Act 1995 as this responsibility includes a duty to safeguard and promote the child's health, development, and welfare.

If a child's parents are or have been married to each other, both have parental responsibility and either can give consent. If the parents have not been married to each other, normally only the mother has automatic parental responsibility including the right to consent. The father will have the right to consent if either:

- he has obtained an order from the court awarding him parental responsibilities
- he and the child's mother have a registered parental responsibilities agreement

### Person who has care and control of the child

Section 5 of the Children (Scotland) Act 1995 also allows consent to be given by those who have care or control of a child but who do not have either parental responsibilities or parental rights in respect of the child e.g. a grandparent who is the child's main carer. These people have a duty to do what is reasonable in all the circumstances to safeguard the child's health, development, and welfare. This includes giving consent to treatment or procedures.

Such consent would not be effective however, where:

- The child is capable of consenting
- The person knew that the parent would not consent e.g. a parent who is a Jehovah Witness
- The medical examination was for the purpose of establishing child abuse

If the child is looked after by the Local Authority, the authority can give consent only if it has obtained a Parental Responsibilities Order from the court or consent is authorised by conditions attached to an order or warrant issued by a Court or Children's hearing.

### Vulnerable Adults- who can give consent?

As with children, where a vulnerable adult is capable of consenting to medical treatment, consent will not be required from any other individual such as parent/guardian or carer. Again, it is for the medical profession to determine whether the vulnerable adult is capable of understanding the proposed treatment and consequences.

There are safeguards where a vulnerable adult may not be capable of consenting to medical treatment. This is dealt with in Part 5 of the Adults with Incapacity (Scotland) Act 2000. A medical practitioner must certify that he is of the opinion that an adult is incapable in relation to a decision about medical treatment. They shall then have the authority to do *what is reasonable in the circumstances* in relation to the proposed medical treatment to *safeguard or promote the physical and/or mental health of the adult*.

### Provide Children and Vulnerable Adults with an independent person to talk with

The following points of contact have been established for children and vulnerable adults needing to talk to someone independent of the Club.

Childline Scotland	0800 44 1111
Social Work Department- Glasgow South	0141-420-8000 out of hours <b>0800 811505</b>
Strathclyde Police – Helen Street	0141-532-5400
Rev Hugh Wallace – Independent person	0141-589-5381

## Coach Recruitment

### **APPLY AGREED PROCEDURES FOR YOUNG PLAYERS TO ALL COACHES AND VOLUNTEERS**

In order to minimise risk and to ensure appropriate safeguards are in place, Queens Park Football Club will take all necessary steps to ensure that all applicants go through a rigorous recruitment programme (as shown in **Appendix 2**) which involves taking all necessary steps to ensure that young players are protected. **Appendix 3** is the Coach Employment Checklist which the Club uses to mark each stage of the recruitment process as it is completed for each coach.

### **TREAT ALL APPLICANTS FOR ANY POSITION INVOLVING CONTACT WITH YOUNG PLAYERS OR VULNERABLE ADULTS IN THE SAME WAY**

On issuing the Job Description, person specification and application form, the applicants should submit their Application Form (**Appendix 4**) detailing previous experience in working with young players and also identifying at least two references. It is advised that one should be associated with former work with children or young people and one with previous sport involvement. They should also complete and return their Self Declaration Form (**Appendix 5**).

### **GAIN A DEGREE OF BACKGROUND KNOWLEDGE FROM A PERSON WHO HAS EXPERIENCE OF THE COACH WORKING WITH YOUNG PLAYERS**

Queens Park Football Club will investigate each reference given (Referee's will be sent a reference form to complete (**Appendix 6**) and also the coach's previous experience.

Where the coach has no previous experience of voluntary or paid contact with young people, two references will be sought from reputable persons (not relatives) who can comment on the applicant's character and relationships with others.

In addition, successful candidates will be asked to complete a Disclosure Scotland Application and provide a Disclosure Certificate which allow Queens Park Football Club to scrutinise the applicants suitability.

### **EXPLORE ALL APPLICANTS' EXPERIENCE OF WORKING OR CONTACT WITH YOUNG PEOPLE IN AN INTERVIEW BEFORE APPOINTMENT**

On successful completion of the Application process, the applicant will be invited for an interview, at which the applicants' level of experience with working with young people will be explored.

### **MAKE VOLUNTARY APPOINTMENTS CONDITIONAL ON THE SUCCESSFUL COMPLETION OF A PROBATIONARY PERIOD**

Once selected for the position, the coach goes through an Induction Programme and has their roles and responsibilities (**Appendices 7 [i] & 7 [ii]**) clearly marked out for them. An experienced person will then mentor the new recruit for a probationary period of 3 months. In addition, a Personal Details Form (**Appendix 8**) is required to be filled out to be kept on file.

On completing a successful probationary period, the new recruit will be established as a coach/manager/official/volunteer and supervision and performance review will be undertaken on the normal course of coaching management.

## Policy on the Recruitment of Ex Offenders

Part V of the Police Act 1997 is aimed at helping employers and other organisations assess the suitability of applicants for particular posts and to make safer recruitment decisions in relation to positions of trust by widening access to criminal record information. To this end, the Act provides for the issue of criminal conviction certificates, criminal record certificates, and enhanced criminal record certificates. In Scotland, these certificates will be issued by Disclosure Scotland. In practice, the certificates will be known as Basic, Standard and Enhanced Disclosures.

The Act also provides for a Code of Practice to be published by Ministers governing the use of all information issued in respect of Standard and Enhanced Disclosures. The Code requires all recipients of such Disclosure information to comply with the Code and to use that information properly and fairly. Where conviction or other information is revealed as part of the Disclosure process, that information must not be used to unfairly discriminate against individuals when considering them for positions.

Employers and others who make use of the Disclosure scheme are expected to have a written policy on the recruitment of such individuals, which can be given to applicants for positions where a Disclosure is requested, and to ensure that any body or individual, at whose request applications for Standard and Enhanced Disclosures are countersigned, has such a written policy. Disclosure Scotland has designed the following sample policy statement to assist organisations which do not already have such a policy in complying with the spirit of the Code of Practice.

### ***Policy Statement***

1. Queens Park Football Club (QPFC) complies fully with the Code of Practice, issued by Scottish Ministers, in connection with the use of information provided to registered persons and other recipients of information by Disclosure Scotland under Part V of the Police Act 1997, for the purposes of assessing applicants' suitability for positions of trust. We undertake to treat all applicants for positions fairly and not to discriminate unfairly against the subject of a Disclosure on the basis of conviction or other information revealed.
2. We have a written policy on the recruitment of ex-offenders, which is made available to all Disclosure applicants at the outset of the recruitment process.
3. We are committed to equality of opportunity, to following practices, and to providing a service which is free from unfair and unlawful discrimination. We ensure that no applicant or member of staff is subject to less favourable treatment on the grounds of gender, marital status, race colour, nationality, ethnic or national origins, age, sexual orientation, responsibilities for dependants, physical or mental disability, or offending background, or is disadvantaged by any condition which cannot be shown to be relevant to performance.
4. QPFC actively promotes equality of opportunity for all with the right mix of talent, skills and potential, and welcomes applications from a wide range of candidates, including those with criminal records. The selection of candidates for interview will be based on skills, qualifications and experience.
5. We will request a Standard or Enhanced Disclosure only where this is considered proportionate and relevant to the particular position. This will be based on a thorough risk assessment of that

position. Where a Disclosure is deemed necessary for a post or position, all applications forms, job adverts, careers literature, website, and any other appropriate literature will contain a statement that a Disclosure will be requested in the event of the individual being offered the position.

6. Where a Disclosure is to form part of the recruitment process, QPFC will encourage all applicants selected for interview to provide details of their criminal record at an early stage in the application process. We ask that this information be sent under separate, confidential cover, to a designated person within QPFC and we guarantee that this information will only be seen by those who need to see it as part of the recruitment process.

7. In line with the Rehabilitation of Offenders Act 1974, QPFC will only ask about convictions which are defined as "unspent" in terms of that Act, unless the nature of the position is such that we are entitled to ask questions about an individual's entire criminal record.

8. At interview, or under separate discussion, we undertake to ensure an open and measured discussion on the subject of any offences or other matters that might be considered relevant for the position concerned. Failure to reveal information that is directly relevant to the position sought could lead to withdrawal of an offer of employment.

9. We undertake to discuss any matter revealed in a Disclosure with the subject of that Disclosure before withdrawing a conditional offer of employment.

10. We ensure that all those in QPFC who are involved in the recruitment process have been suitably trained to identify and assess the relevance and circumstances of offences. We also ensure that they have received appropriate guidance and training in the relevant legislation relating to employment of ex-offenders (e.g. the Rehabilitation of Offenders Act 1974).

11. We undertake to make every subject of a Disclosure aware of the existence of the Code of Practice, and to make a copy available on request.

HAVING A CRIMINAL RECORD WILL NOT NECESSARILY DEBAR YOU FROM WORKING WITH QUEENS PARK FOOTBALL CLUB. THIS WILL DEPEND ON THE NATURE OF THE POSITION, TOGETHER WITH THE CIRCUMSTANCES AND BACKGROUND OF YOUR OFFENCES.

## **Policy on the Secure Handling, Use, Storage and Retention of Disclosure Information**

Part V of the Police Act 1997 is aimed at helping employers and other organisations assess the suitability of applicants for particular posts and to make safer recruitment decisions in relation to positions of trust by widening access to criminal record information. To this end, the Act provides for the issue of criminal conviction certificates, criminal record certificates, and enhanced criminal record certificates. In Scotland, these certificates will be issued by Disclosure Scotland. In practice, the certificates will be known as Basic, Standard and Enhanced Disclosures.

The Act also provides for a Code of Practice to be published by Ministers governing the use of all information issued in respect of Standard and Enhanced Disclosures. The Code requires all recipients of such Disclosure information to comply with the Code and to handle, store and dispose of that information appropriately.

Registered Bodies are therefore required to have a written policy on the handling, holding and destroying Disclosure information, and to ensure that any body or individual, at whose request applications for Standard and Enhanced Disclosures are countersigned, has such a written policy.

### ***Policy Statement***

#### **General Principles**

1. Queens Park Football Club (QPFC) complies fully with the Code of Practice, issued by Scottish Ministers, regarding the correct handling, holding and destroying Disclosure information provided by Disclosure Scotland under Part V of the Police Act 1997, for the purposes of assessing applicants' suitability for positions of trust. It also complies fully with the Data Protection Act 1998 and other relevant legislation pertaining to the safe handling, use, storage, retention and disposal of Disclosure information and has a written policy on these matters. This policy is available to anyone who wishes to see it on request.

#### **Usage**

2. We use Disclosure information only for the purpose for which it has been provided. The information provided by an individual for a position QPFC is not used or disclosed in a manner incompatible with the purpose. We process personal data only with the express consent of the individual. We notify the individual of any non-obvious use of the data, including further disclosure to a third party, identifying the Data Controller, the purpose for the processing, and any further relevant information.

#### **Handling**

3. QPFC recognises that, under section 124 of the Police Act 1997, it is a criminal offence to disclose Disclosure information to any unauthorised person. We, therefore, only pass Disclosure information to those who are authorised to see it in the course of their duties. QPFC will not disclose information provided under section 115(8) of the Act, namely information which is not included in the Disclosure, to the applicant.

### **Access and Storage**

4. We do not keep Disclosure information on an individual's personnel file. It is kept securely, in lockable, non-portable storage containers. Access to storage units is strictly controlled to authorised and named individuals, who are entitled to see such information in the course of their duties.

### **Retention**

5. We do not keep Disclosures or Disclosure information for any longer than is required after a recruitment (or any other relevant) decision has been taken. In general, this is no longer than six months. This is to allow for the resolution of any disputes or complaints. Disclosure information will only be retained for longer than this period in exceptional circumstances, and in consultation with Disclosure Scotland. The same conditions relating to secure storage and access will apply during any such period.

### **Disposal**

6. Once the retention period has elapsed, we will ensure that Disclosure information is immediately destroyed in a secure manner i.e. by shredding, pulping or burning. QPFC will not keep Disclosure information which is awaiting destruction in any insecure receptacle (e.g. a waste bin or confidential waste sack). We will not retain any image or photocopy or any other form of the Disclosure information. We will, however, keep a record of the date of issue of the Disclosure, the name of the subject, the Disclosure type, the position for which the Disclosure was requested, the unique reference number of the Disclosure and details of the recruitment decision taken.

## Policy For Use Of Photographic & Video Equipment

### Consent - Photographs (including Digital Images), Videoing and Filming of Children and Vulnerable Adults and Web-sites

In all circumstances where children and vulnerable adults are likely to be photographed or video-recorded or digital images taken, it is necessary to obtain appropriate consent. Staff should ask all parents to complete the standard Consent Form (**Appendix 9 [i]**) when enrolling in an Queens Park Football Club youth activity or going on a trip. Although children can consent to having their photographs taken from 12 years of age so long as the child understands the implications (see **Appendix 9 [ii]**), consent should also be provided by parents; this will ensure that both parties legal rights are met. A judgement call will have to be made for some children with learning difficulties over 12 and vulnerable adults. If in doubt parental consent should be sought. Records should be kept in a secure and confidential file. It will be the responsibility of the Parent/Guardian to inform of any change in circumstances.

### Storage

#### Photographs and videos

These should be stored in line with the Data Protection Act i.e. all negatives and master copies should be in a secure place and labelled clearly. The video/photographs should not be kept for a longer period than is necessary i.e. the purpose for which they were taken.

#### Digital images

The files should be stored on a **secure system** and deleted when they are no longer required. If the images are to be stored on a fileserver then access should be controlled by a password.

### Video, Film or Photographs (including digital images) as an Educational Aid

Consent is collected from the parents/guardian of the child or vulnerable adult (**Appendices 10 [i] & [ii]**) and they should be informed:

- The reason for use of the video, film or photographs
- How the equipment will be used
- How the video, film or photograph will be processed
- Who will have access to the video, film or photographs
- Where the film, video or photographs will be stored
- How long the film, video or photographs will be kept

### Concerns about Photographers, Video or Film Operators

Any concerns with the manner in which or the products of photographers or video or film operators are to be reported to secretary or the Child Protection Officer.

## Children or Vulnerable Adults in Publications and on the Internet

Football websites and publications provide excellent opportunities to broadcast achievements of individuals to the world and to provide a showcase for the activities of young people or vulnerable adults. It can however, also provide information about children and vulnerable adults that could put them at risk. The following procedure is to be followed to ensure publications and the Internet do not put children and vulnerable adults at risk.

Publications and the Internet must adhere to the following:

- At no time is a publication or Internet site to include personal information that could identify a child or vulnerable adult e.g. home address, e-mail address, telephone number of a child or vulnerable adult. Any contact information needs to be directed to either a general Queens Park Football Club address or another relevant organisation's address e.g. a governing body or club.
- Before publishing any information, written consent needs to be obtained from the child or vulnerable adult's parent/guardian. If the material is changed from the time of consent, the parents/guardians must be informed and consent provided for the changes.
- Pictures or videos of children or vulnerable adults or a picture giving limited additional information may be used.
- The content of pictures or videos of children or vulnerable adults are to be reviewed to ensure they are not portraying the child or vulnerable adult in a demeaning or tasteless manner. Where there are concerns about identifying a child per se who is to be included use photographs or shots that show the child or vulnerable adult:
  - In profile
  - With their backs to the cameras
  - Their faces are not clearly visible
- The content of photographs or videos must not depict a child or vulnerable adult in a provocative pose or in a state of partial undress other than when depicting a football activity. Where relevant, a tracksuit may be more appropriate attire.
- For photographs or videos of groups or teams of children or vulnerable adults ensure that only the group or team is referred to, not individual members.
- All published events involving children or vulnerable adults will require review to ensure the information will not put children or vulnerable adults at risk. Any publications of specific meetings or child events e.g. team coaching sessions, are not to be distributed to any individuals other than to those directly concerned.
- Particular care is to be taken in publishing photographs, films or videos of children or vulnerable adults who are considered particularly susceptible e.g. a child who may be the subject of a child protection case or a matrimonial dispute where it is known.
- Particular care is to be taken in publishing photographs, films or videos of children or vulnerable adults with physical, learning and/or communication or language disabilities, as they could be particularly susceptible to abuse (Morgan, 1979; Watson, 1984<sup>1</sup>).

**Important Note:** Any concerns or enquiries about publications or Internet information are to be discussed with Child Protection Co-ordinator.

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<sup>1</sup> Morgan S R (1979), *Psycho-Educational Profile of Emotionally Disturbed Abused Children*, Journal of Clinical Psychology, 8(1) pp3-6. Watson G (1984), *Sexual Attitudes and Knowledge of Children with Mild and Moderate Learning Difficulties*, G Campbell (ed.) Health Education and Youth, Falmer Press.

**Organised Events - Photographs (including Digital Images), Videoing and Filming of Children and Vulnerable Adults**

There is evidence that some people have used football venues as an opportunity to take inappropriate photographs or film footage of children and vulnerable adults. The following procedures have been developed to protect children and vulnerable adults and to minimise risk.

- Coaches should be aware of any adult taking photographs or film footage
- Coaches should establish nature and purpose of filming
- Where there is a suspicion of inappropriate photographing or filming, the police should be informed.

**NB Queens Park Football Club has no control over who can take photographs or video in a public space unless they present themselves as a demonstrable risk to children or vulnerable adults.**

**Reviewed:- August 2006**