SAFEGUARDING ADULTS AT RISK POLICY & PROCEDURES

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1. Commitment to Safeguarding Adults

Koku-Ryu Martial Arts (KRMA) is committed to safeguarding the welfare, dignity, rights and wellbeing of every adult who participates in, works for, volunteers with or visits the organisation.

We believe every adult has the right to participate in martial arts within an environment that is safe, respectful, inclusive and free from abuse, neglect, exploitation, discrimination, harassment or avoidable harm.

KRMA recognises that some adults may have care and support needs that place them at increased risk of abuse or neglect. These needs may arise because of age, disability, illness, mental health, learning disability, neurodivergence, physical impairment, sensory impairment or other circumstances.

Safeguarding adults is everyone's responsibility.

Every instructor, employee, volunteer, contractor and representative of KRMA has a duty to recognise concerns, respond appropriately and report safeguarding issues without delay.

No person needs proof that abuse has occurred before raising a safeguarding concern.

Where there is doubt, the concern should always be reported.

KRMA will:

- place the safety and wellbeing of adults at the centre of all safeguarding decisions;
- promote dignity, respect, independence and choice;
- encourage adults to participate fully in decisions affecting them;
- recognise and respond appropriately to safeguarding concerns;
- recruit staff and volunteers safely;
- provide safeguarding training appropriate to each role;
- maintain accurate safeguarding records;
- share safeguarding information lawfully and proportionately;
- work with statutory agencies and safeguarding partners;

- maintain professional standards of behaviour;
- challenge abuse, discrimination and poor practice;
- support those affected by safeguarding concerns; and
- regularly review safeguarding arrangements to ensure they remain effective.

Failure to comply with this policy may result in disciplinary action, removal from duties, termination of employment or volunteering, exclusion from KRMA activities and, where appropriate, referral to statutory agencies, the police, professional regulators or the Disclosure and Barring Service.

2. Scope

This policy applies to all safeguarding activity involving adults undertaken by or on behalf of KRMA.

It applies to:

- martial arts classes;
- private lessons;
- competitions;
- demonstrations;
- seminars;
- instructor training;
- community programmes;
- outreach work;
- school activities involving adults;
- social events;
- transport arrangements organised by KRMA;
- trips;
- overnight events;
- online tuition;
- digital communications; and
- any activity undertaken under the KRMA name.

This policy applies to:

- employees;
- instructors;
- assistant instructors;
- volunteers;
- contractors;

- visiting instructors;
- officials;
- committee members;
- trustees (where applicable);
- adults participating in KRMA activities; and
- any person acting on behalf of KRMA.

Safeguarding responsibilities extend beyond KRMA premises where conduct indicates that an adult may be at risk or where a representative of KRMA may pose a risk to others.

3. Safeguarding Principles

KRMA adopts the six statutory safeguarding principles established by the Care Act 2014.

Empowerment

Adults should be supported and encouraged to make their own decisions wherever possible.

Safeguarding should be person-led and outcome-focused.

Adults should be asked what they want to happen and supported to make informed choices.

Prevention

It is better to prevent abuse than respond after harm has occurred.

KRMA promotes safe recruitment, professional conduct, appropriate supervision, safeguarding training and a culture where concerns can be raised confidently.

Proportionality

Responses should be appropriate to the level of risk presented.

Safeguarding action should be the least intrusive response consistent with protecting the adult and others from harm.

Protection

KRMA will support adults who are experiencing or are at risk of abuse or neglect.

Immediate action will be taken where necessary to reduce or remove risk.

Partnership

Safeguarding is most effective when organisations work together.

KRMA will cooperate with:

- Adult Social Care;
- Police;
- NHS services;
- Local Authority safeguarding teams;
- other sports organisations;
- schools and colleges where appropriate;
- care providers;
- regulatory bodies; and
- other agencies involved in protecting adults.

Accountability

Safeguarding decisions must be transparent and capable of scrutiny.

KRMA will maintain accurate records, clearly document decisions and review safeguarding practice regularly.

4. Legislation & Statutory Guidance

This policy has been developed having regard to current legislation and statutory guidance applicable in England, including:

- Care Act 2014
- Care and Support Statutory Guidance
- Mental Capacity Act 2005
- Human Rights Act 1998
- Equality Act 2010
- Safeguarding Vulnerable Groups Act 2006
- Protection of Freedoms Act 2012
- Sexual Offences Act 2003
- Domestic Abuse Act 2021
- Modern Slavery Act 2015
- Counter-Terrorism and Security Act 2015
- Data Protection Act 2018
- UK General Data Protection Regulation
- Crime and Policing Act 2026
- Disclosure and Barring Service Guidance
- North Lincolnshire Safeguarding Adults Board Procedures
- Making Safeguarding Personal Guidance

The Care Act 2014 places safeguarding duties on local authorities and establishes the legal framework for protecting adults with care and support needs.

Although KRMA is not a statutory safeguarding authority, it has an important responsibility to identify concerns, respond appropriately and cooperate with safeguarding enquiries.

5. Definitions

Adult

For the purposes of this policy, an adult is any person aged 18 years or over.

Adult at Risk

An adult at risk is someone aged 18 or over who:

- has needs for care and support (whether or not those needs are currently being met);
- is experiencing, or is at risk of, abuse or neglect; and
- because of those care and support needs is unable to protect themselves from abuse, neglect or exploitation.

Not every adult who attends KRMA is an adult at risk.

Each situation must be considered individually.

Safeguarding

Safeguarding means protecting an adult's right to live safely, free from abuse and neglect, while supporting them to make choices about how they wish to live.

Safeguarding is not simply about preventing harm.

It is also about promoting wellbeing, dignity, independence, inclusion and personal choice.

Abuse

Abuse is a violation of an individual's human or civil rights by another person or persons.

Abuse may consist of:

- a single act;
- repeated acts;

- deliberate abuse;
- neglect;
- failure to act;
- discrimination;
- exploitation;
- coercive behaviour; or
- organisational failings.

Abuse may occur:

- in a person's own home;
- within a family;
- within a relationship;
- within a sports organisation;
- within residential care;
- within healthcare;
- within the community;
- online; or
- in any other setting.

Neglect

Neglect includes the failure to meet an adult's physical, emotional or psychological needs.

Within a martial arts environment this may include failing to:

- supervise appropriately;
- respond to injuries;
- recognise medical emergencies;
- provide reasonable adjustments;

- maintain safe equipment;
- act on safeguarding concerns;
- protect vulnerable adults from foreseeable harm; or
- provide appropriate support where it has been agreed.

Wellbeing

The Care Act places wellbeing at the centre of adult safeguarding.

Wellbeing includes:

- personal dignity;
- physical and mental health;
- emotional wellbeing;
- protection from abuse and neglect;
- control over day-to-day life;
- participation in work, education or recreation;
- social wellbeing;
- family relationships;
- suitable accommodation; and
- contribution to society.

Safeguarding decisions should promote wellbeing wherever possible.

6. Recognising Abuse and Neglect

Abuse and neglect can occur anywhere and may be perpetrated by:

- a family member;
- a partner or former partner;
- a friend;
- another student;
- an instructor;
- an employee;
- a volunteer;
- a professional;
- a paid carer;
- another service user;
- a stranger; or
- an organised group.

Abuse may consist of:

- a single incident;
- repeated incidents;
- deliberate acts;
- acts of omission;
- coercive or controlling behaviour;
- discrimination;
- exploitation; or
- organisational failings.

Adults may be subjected to more than one form of abuse at the same time.

All concerns must be treated seriously, regardless of the source of the information.

The absence of physical injury does not mean abuse has not occurred.

Where there is uncertainty, the concern should always be reported.

6.1 Physical Abuse

Physical abuse includes the use of force resulting in pain, injury, impairment or distress.

Examples include:

- assault;
- hitting;
- punching;
- slapping;
- pushing;
- kicking;
- burning;
- inappropriate restraint;
- misuse of medication;
- force-feeding;
- inappropriate physical punishment;
- rough handling; or
- unlawful deprivation of liberty.

Within martial arts, physical abuse may also include:

- deliberately using excessive force;
- unsafe sparring;
- forcing someone to continue despite injury;
- ignoring medical advice;

- deliberately pairing an inexperienced adult with someone significantly beyond their ability where foreseeable harm exists;
- withholding appropriate protective equipment;
- humiliating physical punishments;
- unsafe use of training weapons; or
- intentionally creating unnecessary risk.

Appropriate coaching contact carried out professionally for instruction, safety or injury prevention is not abuse.

6.2 Domestic Abuse

Domestic abuse includes controlling, coercive, threatening, violent or abusive behaviour between people aged 16 or over who are personally connected.

It may include:

- physical abuse;
- sexual abuse;
- emotional abuse;
- psychological abuse;
- financial abuse;
- coercive control;
- stalking;
- harassment;
- intimidation; or
- technology-facilitated abuse.

Staff should be aware that adults attending KRMA may be experiencing domestic abuse without disclosing it directly.

6.3 Sexual Abuse

Sexual abuse includes:

- rape;
- sexual assault;
- indecent exposure;
- inappropriate touching;
- sexual harassment;
- coercion into sexual activity;
- sexual exploitation;
- grooming;
- sexual photography;
- sharing intimate images without consent;
- forced participation in sexual acts; or
- any unwanted sexual behaviour.

Sexual abuse may occur:

- in person;
- online; or
- through a combination of both.

Consent obtained through intimidation, manipulation, coercion or exploitation is not genuine consent.

6.4 Psychological or Emotional Abuse

Psychological abuse includes behaviour that causes emotional harm, fear or distress.

Examples include:

- humiliation;
- intimidation;

- threats;
- isolation;
- controlling behaviour;
- verbal abuse;
- bullying;
- gaslighting;
- manipulation;
- blaming;
- discriminatory treatment;
- degrading comments; or
- persistent criticism.

Psychological abuse may be subtle and develop over time.

6.5 Financial or Material Abuse

Financial abuse includes:

- theft;
- fraud;
- scams;
- coercion regarding money;
- misuse of benefits;
- exploitation of finances;
- pressure relating to wills or property;
- unauthorised use of bank accounts;
- misuse of possessions; or
- preventing someone from accessing their own money.

Staff should also remain alert to online scams targeting vulnerable adults.

6.6 Modern Slavery

Modern slavery includes:

- human trafficking;
- forced labour;
- domestic servitude;
- sexual exploitation;
- criminal exploitation;
- debt bondage; and
- other forms of exploitation.

Adults may be reluctant or unable to disclose exploitation because of fear or coercion.

6.7 Discriminatory Abuse

Discriminatory abuse includes unfair or abusive treatment because of a person's:

- age;
- disability;
- race;
- ethnicity;
- nationality;
- religion;
- belief;
- sex;
- sexual orientation;

- gender reassignment; or
- any protected characteristic.

Discriminatory abuse may involve:

- harassment;
- exclusion;
- ridicule;
- hate crime;
- offensive language;
- unequal treatment; or
- refusal to make reasonable adjustments.

KRMA operates a zero-tolerance approach to discrimination.

6.8 Organisational Abuse

Organisational abuse occurs where poor systems, unsafe cultures or unacceptable organisational practices result in harm.

Examples include:

- unsafe staffing;
- ignoring safeguarding concerns;
- inadequate supervision;
- unsafe coaching practices;
- excessive training demands;
- failure to investigate complaints;
- cultures based upon fear;
- misuse of authority;
- bullying by leaders;
- poor record keeping; or

- repeated breaches of safeguarding procedures.

KRMA will challenge organisational abuse wherever it is identified.

6.9 Neglect and Acts of Omission

Neglect includes failing to provide appropriate care, supervision or support.

Examples include:

- ignoring medical needs;
- withholding food or drink;
- failing to provide reasonable adjustments;
- ignoring injuries;
- failing to maintain safe equipment;
- inadequate supervision;
- failing to respond to safeguarding concerns;
- exposing adults to foreseeable harm; or
- failing to seek appropriate medical assistance.

6.10 Self-Neglect

Self-neglect refers to behaviour that threatens an adult's own health or safety.

Examples include:

- refusing essential medical treatment;
- severe self-neglect;
- hoarding;
- poor personal hygiene;
- refusing food or fluids;
- unsafe living conditions; or

- behaviour creating serious risk.

Self-neglect does not automatically trigger safeguarding duties, but concerns should still be reported where appropriate.

6.11 Additional Safeguarding Concerns

Staff should also remain alert to:

- mate crime;
- hate crime;
- radicalisation;
- exploitation;
- coercive control;
- cyber abuse;
- image-based abuse;
- stalking;
- misuse of technology;
- inappropriate physical contact;
- abuse by another student;
- abuse by professionals;
- abuse within sports organisations; and
- repeated boundary violations.

7. Recognising the Signs of Abuse

Adults experiencing abuse may display one or more indicators.

Possible indicators include:

- unexplained injuries;
- repeated injuries;
- fear of a particular individual;
- sudden withdrawal;
- anxiety;
- depression;
- loss of confidence;
- unusual aggression;
- becoming unusually quiet;
- reluctance to attend training;
- deterioration in appearance;
- poor personal hygiene;
- unexplained weight loss;
- sudden financial difficulties;
- repeated requests to borrow money;
- appearing controlled by another person;
- unusual secrecy;
- sudden changes in relationships;
- inappropriate sexual behaviour;
- distress around mobile phones;
- fear of going home;
- inconsistent explanations for injuries;

- reluctance to speak openly;
- missed medical appointments;
- unexplained absences; or
- another person repeatedly speaking on behalf of the adult.

The presence of one indicator does not prove abuse.

Likewise, the absence of indicators does not mean abuse is not occurring.

Staff must report concerns rather than attempt to investigate.

8. Responsibilities

Safeguarding adults is everyone's responsibility.

Every instructor, employee, volunteer and representative of KRMA has a duty to:

- promote wellbeing;
- maintain professional boundaries;
- recognise safeguarding concerns;
- report concerns immediately;
- follow this policy;
- attend safeguarding training;
- challenge unsafe behaviour;
- maintain appropriate confidentiality;
- cooperate with safeguarding enquiries;
- record concerns accurately; and
- place the welfare of adults first.

No person should assume someone else has reported a concern.

8.1 Designated Safeguarding Lead

The Designated Safeguarding Lead for KRMA is:

Kayleigh Humphreys

The DSL is responsible for:

- receiving safeguarding concerns;
- assessing immediate risk;
- ensuring appropriate action is taken;
- making referrals where appropriate;
- liaising with Adult Social Care;

- liaising with Police;
- seeking PiPoT advice where appropriate;
- maintaining safeguarding records;
- providing safeguarding advice;
- supporting instructors;
- monitoring recurring concerns;
- arranging safeguarding training;
- reviewing safeguarding procedures; and
- reporting safeguarding matters to senior leadership.

The DSL is **not** responsible for conducting statutory safeguarding investigations.

8.2 Deputy Designated Safeguarding Lead

The Deputy DSL is:

Andrew Banks

The Deputy DSL will:

- support the DSL;
- act in the DSL's absence;
- assist with safeguarding referrals;
- support safeguarding records;
- provide advice to instructors; and
- undertake safeguarding duties where delegated.

If the concern involves the DSL, it must be reported to the Deputy DSL or directly to Adult Social Care or Police.

If the concern involves the Deputy DSL, it should be reported to the DSL or directly to Adult Social Care.


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9. Responding to a Concern or Disclosure

If an adult discloses abuse or neglect, the person receiving the information should:

- remain calm;
- listen carefully;
- allow the adult to speak freely;
- avoid interrupting;
- avoid expressing disbelief;
- reassure the adult they have done the right thing;
- explain that information may need to be shared to keep people safe;
- avoid promising complete confidentiality;
- ask only enough open questions to clarify the concern;
- avoid leading questions;
- avoid investigating;
- avoid confronting the alleged abuser;
- record the information as soon as possible; and
- report the concern immediately to the DSL.

Suitable questions include:

- "Can you tell me what happened?"
- "Can you explain what you mean?"
- "Is there anything else you want me to know?"
- "What would you like to happen next?"

Where possible, the adult's wishes and desired outcomes should be established.

10. Reporting Procedures

Immediate danger

If an adult is in immediate danger or requires urgent medical attention:

1. Call **999**.
2. Take reasonable action to reduce immediate risk.
3. Provide first aid where appropriate.
4. Inform the DSL as soon as practicable.
5. Record the incident.

Emergency action always takes priority over internal reporting.

Non-emergency safeguarding concerns

Where there is no immediate danger:

- report the concern to the DSL immediately;
- complete the Adult Safeguarding Concern Form;
- preserve relevant evidence;
- maintain confidentiality;
- follow any advice provided by Adult Social Care or Police.

The DSL will consider:

- immediate safety;
- the adult's wishes;
- consent;
- mental capacity;
- referral to Adult Social Care;
- referral to Police;
- PiPoT advice where appropriate;

- support required; and
- ongoing risk management.

Any member of KRMA may contact Adult Social Care or Police directly if:

- immediate action is required;
- the DSL is unavailable;
- the concern involves the DSL;
- the concern has not been acted upon appropriately; or
- delay would increase the risk of harm.

No person will suffer detriment for making a safeguarding referral in good faith.

11. Information Sharing

KRMA recognises that timely and appropriate information sharing is essential to effective safeguarding.

Information will be shared lawfully, fairly and proportionately in accordance with:

- Data Protection Act 2018;
- UK General Data Protection Regulation (UK GDPR);
- Care Act 2014;
- Human Rights Act 1998; and
- relevant statutory safeguarding guidance.

Data protection legislation does **not** prevent the sharing of information where there is a lawful basis to protect an adult or another person from abuse or neglect.

Whenever practicable, the adult should be informed:

- what information is being shared;
- why it is being shared;
- who it will be shared with; and
- how it may help to protect them.

However, information may be shared without consent where this is necessary to:

- prevent serious harm;
- protect another adult or child;
- prevent or detect crime;
- comply with a legal obligation;
- protect someone who lacks mental capacity;
- fulfil safeguarding duties; or
- meet an overriding public interest.

Only information that is:

- relevant;
- necessary;
- proportionate;
- accurate;
- timely; and
- secure

should be shared.

All decisions regarding information sharing, including decisions **not** to share information, must be recorded together with the reasons for the decision.

Safeguarding records will be stored securely and access restricted to authorised personnel only.

12. Mental Capacity and Consent

KRMA recognises that adults are presumed to have capacity to make their own decisions unless it is established otherwise.

This policy follows the **Mental Capacity Act 2005**, which is based upon five statutory principles.

Principle One

Every adult must be assumed to have capacity unless it is established that they lack capacity.

Principle Two

An adult must be given all practicable support before anyone concludes that they are unable to make a particular decision.

Support may include:

- providing information in an accessible format;
- allowing additional time;
- using visual aids;
- involving a trusted person where appropriate; or
- reducing environmental distractions.

Principle Three

An adult is not to be treated as lacking capacity simply because they make a decision that others consider to be unwise.

Adults have the right to make decisions that others may disagree with, provided they have the mental capacity to do so.

Principle Four

Any act carried out on behalf of an adult who lacks capacity must be undertaken in their best interests.

Principle Five

Before taking action on behalf of an adult who lacks capacity, consideration must be given to whether the intended purpose can be achieved in a less restrictive way.

Assessing Capacity

KRMA staff are **not expected to carry out formal mental capacity assessments**.

However, staff should recognise situations where capacity may be affected and seek appropriate advice from statutory agencies or healthcare professionals where necessary.

Capacity is:

- decision-specific;
- time-specific; and
- may fluctuate.

An adult may have capacity to make one decision but not another.

Consent

Where an adult has mental capacity, safeguarding should normally be undertaken with their knowledge and consent.

The adult should be asked:

- what has happened;
- what they are worried about;
- what they would like to happen;
- what support they want; and
- whether they consent to information being shared.

Consent should be recorded.

However, consent is **not always required** before information is shared.

Information may still be shared where:

- another adult is at risk;
- a child may be at risk;
- a serious crime has occurred or may occur;
- coercion or control is suspected;
- the adult lacks capacity;
- there is a legal duty to disclose information; or
- public interest outweighs confidentiality.

Where information is shared without consent, the reasons must be clearly documented.

13. Making Safeguarding Personal

KRMA is committed to the principles of **Making Safeguarding Personal (MSP).**

Making Safeguarding Personal places the adult at the centre of safeguarding.

Safeguarding should be:

- person-led;
- outcome-focused;
- proportionate;
- respectful;
- empowering; and
- based upon the wishes of the adult wherever possible.

Adults should be supported to make informed decisions about safeguarding interventions.

Staff should ask:

- What are you worried about?
- What would you like to happen?
- What would help you feel safe?
- What outcome are you hoping for?

Possible outcomes may include:

- feeling safe;
- receiving support;
- stopping unwanted behaviour;
- obtaining medical assistance;
- involving Police;
- receiving advocacy;
- improving communication;

- remaining independent; or
- simply being listened to.

KRMA recognises that the adult's preferred outcome may not always be achievable.

Where this occurs, the reasons should be explained respectfully and recorded.

Safeguarding should never unnecessarily remove an adult's independence or dignity.

Advocacy

Some adults may require support to participate fully in safeguarding processes.

Where appropriate, consideration should be given to whether the adult requires:

- an advocate;
- communication support;
- an interpreter;
- assistance from a trusted individual; or
- another reasonable adjustment.

Where statutory advocacy duties apply, referrals should be made through the appropriate local authority processes.

14. Concerns About Staff, Instructors and Volunteers (PiPoT)

KRMA recognises that safeguarding concerns may arise regarding individuals who work or volunteer with adults.

This includes:

- instructors;
- assistant instructors;
- employees;
- volunteers;
- contractors;
- visiting coaches;
- committee members; and
- any person acting on behalf of KRMA.

Concerns may relate to behaviour:

- during KRMA activities;
- outside KRMA;
- online; or
- within another organisation.

Examples include:

- abuse;
- exploitation;
- inappropriate relationships;
- financial abuse;
- coercive behaviour;
- bullying;
- discriminatory conduct;
- boundary violations;

- unsafe practice;
- criminal behaviour;
- misuse of authority; or
- behaviour indicating that the individual may pose a risk to adults with care and support needs.

Any concern regarding a member of staff or volunteer must be reported immediately to the Designated Safeguarding Lead.

Where the concern relates to the DSL, it must be reported to the Deputy DSL or directly to the Local Authority Safeguarding Adults Team.

Where the concern relates to the Deputy DSL, it must be reported to the DSL or directly to Adult Social Care.

Where concerns involve both safeguarding leads, the concern should be reported directly to the appropriate statutory authority.

People in Positions of Trust (PiPoT)

KRMA will follow the North Lincolnshire **People in Positions of Trust (PiPoT)** procedures where concerns arise regarding someone who works with adults and whose behaviour indicates they may pose a risk.

KRMA will:

- seek appropriate advice before commencing any internal investigation;
- cooperate with safeguarding agencies;
- preserve evidence where appropriate;
- maintain confidentiality;
- support affected individuals;
- keep accurate records; and
- consider disciplinary, regulatory and DBS responsibilities.

A person must not be permitted to resign or leave quietly in order to avoid safeguarding processes.


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15. Safer Recruitment and DBS

KRMA is committed to safer recruitment.

Reasonable and proportionate steps will be taken to reduce the risk of unsuitable individuals working with adults.

Depending upon the role, recruitment may include:

- written applications;
- interviews;
- identity verification;
- right-to-work checks;
- qualification checks;
- references;
- employment history;
- explanation of employment gaps;
- role-specific DBS checks;
- safeguarding declarations;
- induction;
- probation;
- safeguarding training;
- supervision; and
- ongoing monitoring.

Disclosure and Barring Service

KRMA will assess each role individually to determine the appropriate level of DBS check.

Not every role is eligible for the same level of DBS check.

Where legally permitted, KRMA will obtain:

- Basic DBS Checks;
- Standard DBS Checks; or
- Enhanced DBS Checks

according to the eligibility criteria applicable to the role.

Where regulated activity is undertaken, KRMA will obtain the appropriate barred list information where legislation permits.

DBS checks form only one part of safer recruitment.

They do not replace:

- references;
- supervision;
- safeguarding training;
- professional boundaries;
- induction; or
- continuing assessment of suitability.

DBS Referrals

Where the legal criteria are met, KRMA has a duty to consider making a referral to the Disclosure and Barring Service.

This may arise where an individual has been removed from regulated activity because they:

- harmed an adult;
- placed an adult at risk of harm;
- engaged in relevant conduct; or
- satisfied the statutory harm test.

This duty may continue even if the individual resigns or ceases volunteering before disciplinary procedures have concluded.

Recruitment of Volunteers

Volunteers are subject to safeguarding expectations equivalent to paid staff.

All volunteers must:

- receive induction;
- understand this policy;
- receive safeguarding training appropriate to their role;
- understand reporting procedures;
- work within professional boundaries;
- be supervised appropriately; and
- report safeguarding concerns immediately.

Volunteers must never assume that safeguarding responsibilities rest solely with paid employees.

16. Professional Boundaries

All KRMA employees, instructors, assistant instructors, volunteers, contractors and representatives occupy positions of trust and are expected to maintain the highest standards of professional conduct at all times.

Professional boundaries exist to protect both the adult at risk and the member of staff.

All relationships with adults participating in KRMA activities must remain appropriate, respectful and professional.

Representatives of KRMA must not:

- exploit their position of trust;
- form relationships that could impair professional judgement;
- engage in inappropriate emotional dependency;
- use their position for personal, financial or sexual gain;
- bully, intimidate or manipulate an adult;
- misuse confidential information;
- abuse authority;
- engage in discriminatory behaviour;
- use degrading, humiliating or offensive language;
- communicate inappropriately through social media or private messaging;
- give or receive inappropriate gifts;
- request personal favours;
- borrow or lend money;
- enter into financial arrangements with adults they support without appropriate authorisation; or
- behave in any way likely to undermine confidence in KRMA.

Staff should avoid situations where their conduct could reasonably be misinterpreted.

Any concerns regarding professional boundaries must be reported to the Designated Safeguarding Lead.

Repeated boundary concerns may indicate a developing safeguarding risk and should not be dismissed as isolated incidents.

17. One-to-One Lessons

KRMA recognises that one-to-one tuition can provide valuable support for learning and development.

However, one-to-one teaching presents additional safeguarding considerations.

Private lessons should therefore be planned and delivered in a manner that protects both the instructor and the adult participant.

Where reasonably practicable:

- lessons should take place in an observable area;
- another responsible adult should be present within the building;
- doors should remain open or fitted with viewing panels where appropriate;
- lesson times should be recorded;
- the location should be known to KRMA management;
- unnecessary isolation should be avoided;
- communication should remain professional at all times; and
- safeguarding procedures should remain identical to those used during normal classes.

One-to-one arrangements must never create:

- secrecy;
- dependency;
- favouritism;
- inappropriate emotional attachment; or
- circumstances that place either party at unnecessary risk.

Where a lesson is delivered remotely using online platforms, the requirements contained within the Online Safety section of this policy must also be followed.

18. Physical Contact During Martial Arts Instruction

Martial arts teaching inevitably involves appropriate physical contact.

Examples include:

- correcting stance;
- correcting posture;
- demonstrating techniques;
- preventing injury;
- supporting balance;
- assisting mobility;
- administering first aid;
- separating individuals where safety requires intervention; or
- responding to an emergency.

Such contact must always be:

- necessary;
- proportionate;
- explained where reasonably practicable;
- respectful;
- appropriate to the activity;
- limited to the minimum required;
- consistent with recognised coaching practice; and
- capable of being observed by others whenever possible.

Whenever practicable, instructors should explain why contact is necessary before making physical corrections.

The wishes of the adult should be respected.

Where an adult indicates that they do not wish to be touched, instructors should seek alternative coaching methods wherever this is reasonably possible.

Physical contact must never be:

- sexual;
- intimidating;
- punitive;
- degrading;
- excessive;
- unnecessary;
- secretive; or
- used to demonstrate authority.

Where an adult raises concerns regarding physical contact, those concerns must be treated seriously, recorded and reported in accordance with this policy.

Use of Reasonable Force

Reasonable physical intervention should only be used where it is immediately necessary to:

- prevent injury;
- prevent serious damage;
- stop violence;
- prevent criminal behaviour; or
- protect another individual.

Any use of force must be:

- lawful;
- proportionate;
- necessary;
- recorded; and
- reported to senior management.


INTEGRITY
PERSEVERA

19. Online Safety

Safeguarding responsibilities extend to all online communication undertaken on behalf of KRMA.

This includes:

- email;
- messaging platforms;
- online learning;
- video conferencing;
- social media;
- websites;
- discussion groups; and
- any other digital communication.

Staff must:

- use approved communication methods wherever possible;
- maintain professional standards;
- communicate only for legitimate KRMA purposes;
- avoid inappropriate personal conversations;
- report concerning online behaviour;
- preserve relevant digital evidence where safeguarding concerns arise; and
- follow KRMA's Online Safety Policy.

Staff must not:

- engage in inappropriate conversations;
- send offensive or discriminatory material;
- share confidential safeguarding information through insecure platforms;
- request intimate photographs;

- use digital communication to manipulate or exploit adults;
- communicate through dating applications; or
- deliberately conceal communication from KRMA where safeguarding concerns exist.

Online safeguarding concerns must be reported in exactly the same way as concerns arising during face-to-face activities.

20. Photography and Video Recording

KRMA recognises that photographs and video recordings can support learning, promotion and celebration of achievement.

However, images must always be used safely, lawfully and respectfully.

Images should only be taken where:

- there is a legitimate organisational purpose;
- appropriate consent has been obtained where required;
- the dignity of the individual is respected; and
- safeguarding considerations have been taken into account.

Staff must not:

- take images for personal use without authorisation;
- use images to embarrass or ridicule;
- publish confidential information alongside images;
- manipulate images inappropriately;
- secretly photograph participants; or
- continue photographing where an individual has clearly objected.

Photographs must never be taken:

- within toilets;
- within changing facilities;
- during personal care;
- in situations likely to compromise dignity; or
- where safeguarding concerns indicate photography should not occur.

Storage of images must comply with KRMA's Data Protection Policy.

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21. Changing Facilities and Personal Care

Adults are entitled to privacy, dignity and respect when using changing facilities.

Staff should only enter changing areas where there is a legitimate reason.

Whenever reasonably practicable:

- individuals should be informed before entry;
- more than one member of staff should be present where appropriate;
- time spent within changing areas should be minimised; and
- unnecessary observation should be avoided.

Mobile phones, cameras or recording devices must never be used within changing facilities.

Personal Care

Some adults attending KRMA may require assistance because of disability, illness or other care needs.

Where personal care is required:

- arrangements should be agreed in advance wherever possible;
- the wishes of the adult must be respected;
- dignity must be maintained;
- reasonable adjustments should be made;
- support should only be provided by an appropriate person;
- unnecessary physical contact should be avoided; and
- safeguarding considerations should remain central throughout.

Where emergency assistance becomes necessary, reasonable action may be taken to protect the person's health and safety.

Such incidents should be recorded.

22. Transport

Transport arranged by KRMA should be planned to minimise safeguarding risks.

Where transport is organised:

- journeys should be authorised;
- drivers should be appropriately licensed and insured;
- vehicles should be roadworthy;
- emergency contact details should be available;
- journey details should be known to KRMA where appropriate; and
- unnecessary one-to-one transport should be avoided wherever reasonably practicable.

Where unavoidable one-to-one transport occurs, the reasons should be capable of explanation and, where appropriate, recorded.

Staff must not place themselves or others in situations likely to give rise to safeguarding concerns.

23. Trips, Competitions and External Events

Safeguarding arrangements apply equally to activities held away from KRMA premises.

Before external events, consideration should be given to:

- supervision arrangements;
- venue suitability;
- accessibility;
- emergency procedures;
- first aid provision;
- transport;
- communication;
- safeguarding contacts;
- accommodation where relevant;
- individual support needs;
- medication;
- risk assessments; and
- responsibilities of instructors and volunteers.

Adults with care and support needs should be enabled to participate as independently as possible whilst receiving appropriate safeguarding support.

Where overnight accommodation is used, arrangements should promote:

- privacy;
- dignity;
- safety;
- appropriate supervision; and
- safeguarding.

All safeguarding incidents occurring during external events must be reported using normal KRMA safeguarding procedures.

Lone Working

Where employees or volunteers undertake lone working activities on behalf of KRMA, appropriate risk assessments should be completed.

Lone workers should:

- maintain communication with colleagues where appropriate;
- avoid unnecessary safeguarding risks;
- follow KRMA procedures;
- know emergency arrangements; and
- report concerns immediately.

Lone working should never compromise safeguarding standards.

24. Recording Safeguarding Concerns

Accurate, timely and factual recording is an essential part of safeguarding.

Whenever a safeguarding concern is identified, a written record must be completed as soon as reasonably practicable and, wherever possible, on the same day.

Safeguarding records should include:

- the full name of the adult;
- date of birth, where known;
- date and time of the concern;
- location of the incident;
- date and time the concern was reported;
- the name and role of the person making the report;
- the names of any witnesses;
- the exact words used by the adult wherever possible;
- a clear factual description of what was observed or disclosed;
- any visible injuries or signs of distress;
- immediate action taken;
- whether emergency services were contacted;
- whether Adult Social Care or Police were contacted;
- advice received from external agencies;
- the wishes and desired outcomes of the adult;
- whether consent was obtained or declined;
- reasons for sharing information without consent where applicable;
- decisions made by the Designated Safeguarding Lead;
- follow-up actions required;
- dates of subsequent reviews; and

- the names of those responsible for completing further actions.

Safeguarding records must:

- distinguish clearly between fact and opinion;
- avoid speculation or personal judgement;
- be signed and dated;
- be stored securely;
- be retained in accordance with KRMA's Data Protection Policy and legal retention requirements; and
- only be accessible to authorised individuals with a legitimate need to know.

Original notes should be retained where appropriate.

Safeguarding records must never be altered retrospectively. Where additional information becomes available, this should be added as a new dated entry.

25. Confidentiality

KRMA recognises the importance of maintaining confidentiality.

However, safeguarding information must not be kept confidential where doing so would place an adult or another person at risk of harm.

Information relating to safeguarding concerns will only be shared:

- on a need-to-know basis;
- with appropriate statutory agencies;
- with those directly responsible for safeguarding decisions; or
- where required by law.

All staff, volunteers and instructors must understand that:

- safeguarding information is confidential;
- confidentiality does not prevent safeguarding referrals;
- information should only be shared through appropriate channels; and
- gossip or informal discussion of safeguarding matters is unacceptable.

Failure to maintain appropriate confidentiality may result in disciplinary action.

26. Whistleblowing

KRMA is committed to promoting a culture where safeguarding concerns can be raised openly and without fear of retaliation.

Every employee, volunteer, instructor and contractor has a responsibility to report unsafe practice.

Concerns may include:

- safeguarding concerns being ignored;
- repeated unsafe practice;
- breaches of professional boundaries;
- abuse of authority;
- inappropriate relationships;
- failure to report safeguarding concerns;
- falsification of safeguarding records;
- bullying or intimidation;
- discriminatory conduct;
- unsafe organisational culture;
- attempts to discourage reporting; or
- any behaviour that places adults at risk.

Concerns should normally be reported to:

Designated Safeguarding Lead
Kayleigh Humphreys

or

Deputy Designated Safeguarding Lead
Andrew Banks

Where the concern involves either of those individuals, or where the concern has not been addressed appropriately, it should be reported directly to:

- North Lincolnshire Adult Social Care;

- the Police;
- the Disclosure and Barring Service where appropriate; or
- another relevant statutory authority.

No individual who raises a genuine safeguarding concern in good faith will suffer detriment, victimisation or retaliation.

Malicious allegations made knowingly may be dealt with through disciplinary procedures.

27. Complaints

KRMA operates an open and transparent complaints procedure.

Adults, family members, carers, employees, volunteers and members of the public may raise concerns regarding safeguarding practice.

Any complaint indicating abuse, neglect or exploitation must immediately be treated as a safeguarding concern.

Safeguarding concerns take precedence over routine complaints procedures.

Where a complaint raises safeguarding issues:

- immediate safety will be considered;
- the Designated Safeguarding Lead will be informed;
- statutory agencies will be contacted where appropriate;
- records will be maintained; and
- the complainant will be updated where appropriate and lawful.

No person should be discouraged from contacting Adult Social Care or the Police directly.

28. Supporting Adults

Experiencing abuse or neglect can have significant physical, emotional and psychological consequences.

KRMA recognises the importance of providing appropriate support following safeguarding concerns.

Support may include:

- listening respectfully;
- providing reassurance;
- making reasonable adjustments;
- signposting to specialist organisations;
- facilitating communication with statutory services;
- assisting with participation in KRMA activities where appropriate;
- implementing agreed safeguarding plans; and
- reviewing ongoing support needs.

Support should always respect:

- dignity;
- independence;
- confidentiality;
- choice;
- wellbeing; and
- the wishes of the adult wherever possible.

Where an adult declines support but has capacity to make that decision, their decision should generally be respected unless there is an overriding safeguarding reason requiring further action.

Support for Staff and Volunteers

Safeguarding incidents may also have an emotional impact upon employees, instructors and volunteers.

KRMA will, where appropriate:

- provide safeguarding advice;
- offer management support;
- provide supervision;
- facilitate debriefing following serious incidents;
- identify additional training needs; and
- signpost individuals to appropriate support services.

Support should not compromise ongoing safeguarding enquiries or criminal investigations.

29. Monitoring, Quality Assurance and Policy Review

The Designated Safeguarding Lead will monitor safeguarding arrangements throughout KRMA.

Monitoring may include:

- safeguarding records;
- referrals;
- incident trends;
- complaints;
- training records;
- DBS compliance;
- supervision arrangements;
- policy compliance;
- lessons learned from incidents;
- risk assessments; and
- safeguarding audits.

The purpose of monitoring is to identify:

- emerging safeguarding risks;
- improvements required;
- training needs;
- recurring themes;
- organisational learning; and
- opportunities to improve safeguarding practice.

Policy Review

This policy will be reviewed:

- annually;

- following significant safeguarding incidents;
- following changes in legislation;
- following changes to statutory guidance;
- following changes to local safeguarding procedures;
- following organisational changes affecting safeguarding;
- following recommendations arising from safeguarding reviews; or
- whenever considered necessary by senior management.

Each review will record:

- version number;
- review date;
- legislation considered;
- summary of amendments;
- approving officer; and
- next review date.

Updated versions will be communicated to all relevant staff and volunteers.

30. Continuous Improvement

KRMA is committed to maintaining high standards of safeguarding practice.

Safeguarding arrangements will continue to evolve through:

- legislative updates;
- guidance from safeguarding partners;
- learning from incidents;
- staff feedback;
- participant feedback;
- external advice;
- safeguarding audits;
- professional development; and
- regular policy review.

Safeguarding is an ongoing process rather than a one-off exercise.

Every member of KRMA has a role in creating a culture where adults feel:

- respected;
- listened to;
- valued;
- protected; and
- able to raise concerns confidently.

By working together, KRMA aims to provide an environment where all adults can participate in martial arts safely, confidently and with dignity.

31. Useful Contacts

The following contact details should be used when safeguarding concerns arise.

Koku-Ryu Martial Arts

Designated Safeguarding Lead (Adults)

Kayleigh Humphreys

Email:
safeguarding@krma.co.uk

Telephone:
01652 653560

Deputy Designated Safeguarding Lead

Andrew Banks

Email:
safeguarding@krma.co.uk

Telephone:
01652 653560

North Lincolnshire Adult Social Care

Adult Safeguarding Team

Telephone:
01724 297000

Email:
safeguardingadultreferrals@northlincs.gov.uk

Website:
https://www.northlincs.gov.uk

Emergency Services

Emergency

999

Call immediately where:

- an adult is in immediate danger;
- a serious crime is taking place;
- urgent medical assistance is required; or
- immediate Police attendance is necessary.

Police (Non-Emergency)

101

Disclosure and Barring Service (DBS)

Website:

https://www.gov.uk/disclosure-barring-service-check

Ann Craft Trust

The Ann Craft Trust provides specialist safeguarding advice relating to adults at risk within sport and activity organisations.

Website:

https://www.anncrafttrust.org

BMABA Safeguarding

Email:

safeguarding@bmaba.org.uk

Website:

https://bmaba.org.uk

32. Adult Safeguarding Referral Flowchart

A safeguarding concern is identified

↓

Is the adult in immediate danger or in need of emergency medical treatment?

YES

- Call **999**
- Protect the adult where safe to do so
- Administer first aid if appropriately trained
- Preserve evidence where possible
- Inform the Designated Safeguarding Lead as soon as practicable
- Complete the Adult Safeguarding Concern Report Form

↓

Continue to cooperate with Police, Adult Social Care and any other statutory agencies.

NO

↓

Listen carefully.

Take the concern seriously.

Remain calm.

Do not investigate.

Do not ask leading questions.

Do not promise complete confidentiality.

Record the information accurately.

↓

Report immediately to:

Kayleigh Humphreys
Designated Safeguarding Lead

or

Andrew Banks
Deputy Designated Safeguarding Lead

↓

The Designated Safeguarding Lead will consider:

- immediate safety;
- the wishes of the adult;
- consent;
- mental capacity;
- risk to others;
- referral to Adult Social Care;
- referral to Police;
- PiPoT procedures where appropriate;
- support required; and
- ongoing safeguarding arrangements.

↓

Record all decisions.

↓

Review outcomes.

↓

Continue monitoring where appropriate.

If the concern involves the Designated Safeguarding Lead

Report directly to:

- Andrew Banks; or
- North Lincolnshire Adult Social Care; or
- Police.

If the concern involves the Deputy Designated Safeguarding Lead

Report directly to:

- Kayleigh Humphreys; or
- North Lincolnshire Adult Social Care.

If the concern involves both safeguarding leads

Report directly to:

- Adult Social Care; or
- Police.

No internal permission is required before making an emergency safeguarding referral.

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33. Adult Safeguarding Concern Report Form

Confidential Safeguarding Record

Reference Number

Section A – Adult Details

Full Name

Date of Birth

Address (if known)

Telephone Number

Programme / Class

Venue

Section B – Reporting Person

Name

Role

Contact Details

Date Report Completed

Time Report Completed

Section C – Details of Concern

Date of Incident

Time of Incident

Location

How did the concern arise?

☐ Disclosure

☐ Observation

☐ Third Party Information

☐ Injury

☐ Behaviour

☐ Online

☐ Other

Please describe the concern in full.

(Record facts only.)

Please record the adult's own words wherever possible.

Were any questions asked?

If yes, record them below.

Were there any witnesses?

Yes / No

If yes, please record names.

Section D – Immediate Action Taken

Was anyone in immediate danger?

Yes / No

Were Emergency Services called?

Yes / No

If yes, Incident Number

Immediate action taken

Section E – Consent

Did the adult consent to information being shared?

Yes / No

If No, please explain.

Does the adult appear to have capacity regarding this decision?

Yes

No

Unsure

Reason

Section F – Internal Reporting

Reported to

Date

Time

Method

☐ Face to Face

☐ Telephone

☐ Email

☐ Other

Advice received

Section G – External Referrals

Adult Social Care contacted?

Yes / No

Date

Reference Number

Police contacted?

Yes / No

Crime Reference

PiPoT Advice Requested?

Yes / No

Other Agency

Reference Number

Section H – Designated Safeguarding Lead Decision

Risk Assessment Summary

Decision Made

Actions Required

Person Responsible

Review Date

Section I – Signatures

Reporting Person

Name

Signature

Date

Designated Safeguarding Lead

Name

Signature

Date

Recording Guidance

When completing this form:

- Record facts, not opinions.
- Record the adult's own words wherever possible.
- Do not investigate.
- Do not make assumptions.
- Clearly distinguish between observed facts and professional opinion.
- Sign and date every page if additional sheets are attached.
- Store this form securely.
- Submit the completed record to the Designated Safeguarding Lead as soon as possible.

Policy Approval

Policy Title: Safeguarding Adults at Risk Policy & Procedures

Organisation: Koku-Ryu Martial Arts (KRMA)

Version: 3.0

Approved By: Andrew Banks – CEO & Chief Instructor

Policy Owner: Kayleigh Humphreys – Designated Safeguarding Lead

Effective Date: 13 July 2026

Review Date: 13 July 2027