



SAFE ACTIVITIES GUIDANCE

Ensuring the safety of children and adults at risk during activities is paramount. Here is a structured guide to help design and implement safe activities:

1. Planning Safe Activities

a. Understand Participant Needs:

- Identify the age, abilities, and specific needs (e.g., physical, cognitive, emotional) of participants.
- Collect relevant medical and emergency contact information.

b. Risk Assessment:

- Conduct a thorough risk assessment before the activity (e.g., hazards, supervision, environment).
- Develop control measures to address identified risks.

c. Activity Suitability:

- Choose activities appropriate to the age and developmental level of participants.
- Avoid overly complex or high-risk activities without proper expertise and safety measures.

2. Staffing and Supervision

a. Police Checks and Training:

- Ensure all staff and volunteers are background-checked (e.g., police checks) and trained in safeguarding practices.
- Provide specific training on the activity and emergency procedures.

b. Adequate Supervision:

- Maintain appropriate adult-to-participant ratios (e.g., 1:8 for children aged 6–8).
- Assign roles to supervisors for clear accountability.

c. Communication:

- Use clear and age-appropriate language when explaining rules and expectations.
- Ensure participants know how to ask for help or report discomfort.

3. Safe Environments

a. Physical Safety:

- Check that the location is safe, accessible, and free from hazards (e.g., secure equipment, safe flooring).
- Ensure emergency exits are visible and accessible.

b. Emotional Safety:

- Promote inclusivity and prevent bullying or discrimination.
- Create an environment where participants feel respected and heard.

c. Privacy and Boundaries:

- Ensure separate and appropriate facilities (e.g., restrooms) for different age groups and genders.
- Avoid activities that require unnecessary physical contact.

4. Health and Emergency Preparedness

a. Medical Considerations:

- Collect information on allergies, medical conditions, and required medications.
- Ensure first aid kits are readily available, and have a trained first-aider on-site.

b. Emergency Procedures:



- Have clear plans for fire, medical, or other emergencies.
- Ensure all staff and participants are briefed on evacuation and safety procedures.

5. Consent and Safeguarding

a. Parental/Guardian Consent:

- Obtain written consent for participation, including permission for specific activities (e.g., photography, off-site trips).
- Provide clear information about the activity and any associated risks.

b. Reporting Procedures:

- Establish clear procedures for reporting safeguarding concerns.
- Ensure all staff know how to recognize signs of abuse or neglect.

6. Monitoring and Evaluation

a. Active Monitoring:

- Continuously monitor participants for signs of discomfort or distress.
- Address issues promptly and adjust activities as needed.

b. Post-Activity Review:

- Evaluate the success and safety of the activity.
- Gather feedback from participants, parents, and staff to identify areas for improvement.

Examples of Safe Activities

Indoor Activities:

- Arts and crafts using non-toxic materials.
- Board games or puzzles in supervised settings.
- Storytelling or reading sessions in small groups.

Outdoor Activities:

- Nature walks on safe trails with supervision.
- Non-contact sports with clear rules and safety gear.
- Gardening activities using child-friendly tools.

Skill-Building Activities:

- Cooking or baking with simple, safe recipes.
- Music or dance classes with age-appropriate instructions.
- Educational workshops tailored to participants' interests and abilities.

By following these guidelines, you can design and execute activities that are not only enjoyable but also safe for children and adults at risk. Always prioritize their physical, emotional, and psychological well-being.

To build a safe and solid environment for children and adults at risk, each ministry must strive to be child/adults at risk -centred in their practice and behaviour.

In practical terms, this will include the following:

- A. Completion of the Risk Assessment
- B. Consent Form (See Template Form)
- C. Register of Attendance (If applicable, See Template)



- D. Adequate Supervision Ratios; In planning a trip or activity, it is critically important to consider how many adults are needed to supervise children/adults at risk in a safe manner. It is recommended that a certain number of adults be available to supervise a certain number of children/adults at risk; however, this is also dependent on whether they have specific needs or requirements, and on the duration of the activity. At a minimum, two adults are required for each activity. If it is an overnight activity, additional staff should be considered. If the group is mixed, a gender balance should be maintained.
- E. Dealing with Accidents; It is essential that all to whom this policy applies are familiar with the procedures outlined below. If a child/adult has an accident and injures himself/herself while attending a community/ministry-run event, these procedures should be followed: Assess the injury and reassure the child/adult at risk. If the injury is severe or the child/adult at risk has lost consciousness, please contact the emergency services immediately by phoning If the emergency services are to be called, contact with the child's parents/guardians must be made urgently and/or carer for the adult at risk. Contact information should be found on the membership/consent form. If the parents/guardians are not available, it may be necessary for a leader to travel with the person to the hospital. If medical treatment is required, persons may be asked about known allergies or existing medical conditions. Again, this information should be found on the membership/consent form;
- If the injury is minor, local application of treatment should be available from the first aid box. There should be a fully stocked first aid box to hand at all events. Remember to make a note of what has been used from the first aid box so that it can be replaced at the earliest opportunity. Under no circumstances should any medication be given to a person;
 - As soon as possible after the accident, write up a report using an accident/incident report form (see template). Once completed, this form should be stored in a safe place, in line with data protection, and treated as a confidential document;
 - Always inform parents/guardians/carers of any accident that has occurred involving their child/person regardless of how minor you consider it to be. It is good practice to give a copy of the accident/incident report form to parents/guardians/carers;
 - It is good practice to keep blank copies of the accident/incident form with the first aid box so that one can be easily filled out in the event of an emergency.
- F. One to one contact with children/adults at risk; In general, activities should not involve one-to-one contact, and should usually be supervised by at least two adults. However, there may be two circumstances where this may occur:
- (1) In a reactive situation, for example, when a young person/adult requests a one-to-one meeting with you without warning, or where a young person/adult has had to be removed from a group as part of a code of conduct; If you need to talk to a young person/adult at risk alone, try to do so in an open environment, in view of others.
- If this is not possible, try to meet in rooms with visual access, or with the door open, or in a room/area where other people are nearby. You should advise another adult that such a meeting is taking place and the reason for it. A record should be kept of these meetings – including names, dates, times, location, reason for the meeting and outcome – and stored appropriately and securely.
 - Avoid meetings with individuals where they are on their own in a building.
 - One-to-one meetings should take place at an appropriate time, e.g. not late at night, and in an appropriate venue.
- (2) As part of a planned and structured piece of work (for example, one-to-one therapy session). The particular activity should have a clear rationale and aims for involving one-to-one work.



- Parents/guardians/Carers must be fully informed as to the nature and purpose of this work, and must give written consent.
- A clear code of conduct must be agreed and adhered to by both parties. This should include limits of confidentiality and safeguarding procedures.

Guidance on Trips Away with Young People/Adults at risk

Introduction

Trips away can be an extremely rewarding and fulfilling experience for adults and children/young people involved in them. However, to do this safely and in a way that safeguards all concerned requires careful planning and consideration.

Listed below are several areas that should be considered in planning a trip away.

Considerations for planning trips away

Have you:

- Identified the aim and outcomes of the programme?
- Followed your safeguarding policy and procedures?
- Carried out a risk assessment?
- Recruited and selected staff/volunteers using safe practice procedures?
- Selected a key staff member who has overall responsibility for the trip?
- Selected staff for the trip who are appropriately trained, qualified (if appropriate)?
- Nominated a staff member who is responsible for first aid?
- Ensured that you have adequate and gender-based supervision in line with your safeguarding policies and procedures?
- Appointed a contact person at home who has access to all information and contact details?
- Checked your own insurance and ensured that you have coverage for all activities?
- Checked that the transport has appropriate insurance, qualified drivers, and seatbelts?
- Carried out an equipment safety check?
- Checked the first aid kit?
- Ensured there is a contingency plan?
- Made provisions for returning home early?
- Allocated a budget and contingency fund?
- Checked out the locations and accommodation of the trip away to ensure they have:
 - Appropriate safeguarding policy, practices, and procedures in place?
 - Insurance cover?
 - Appropriately trained and qualified staff?
 - Changing areas for boys and girls (if required)?
 - Disability access (if required)?

Have the participants:

- Been involved as much as possible in the planning of the trip?
- Agreed a code of conduct?
- Agreed boundaries around unstructured time?
- Been given information on appropriate clothing, and contact details for leaders?
- Consented to the trip away?



Have parents/carers:

- Met with leaders and been informed of the programme?
- Been given a copy of the safeguarding policy and procedures?
- Consented in writing?
- Given contact details, medical details including allergies, illnesses, medications, and dietary requirements?
- Been given contact details of the leaders and center?
- Been given details for pick up and drop off point for participants?

Have staff:

- Been trained on the code of conduct and safeguarding policy, on how to deal with a disclosure, and on dealing with challenging behaviour?
- Been assigned responsibilities and scheduled for breaks?
- Been made aware of how to handle an emergency, and who to contact in an emergency?
- Worked with participants to evaluate the success of the activity?

If staying overnight, have you checked:

- If there is 24/7 access to center staff?
 - If there are appropriate sleeping arrangements for young people, i.e. separate provision for boys and girls, and separate provision for leaders (within ear shot of young people)?
- The center's supervision and security