



S.C.P. Japan ~Sports for Creating Pathways~ Procedures for handling reports on safeguarding.

[Purpose and scope]

The purpose of this section is to clarify the procedures to be followed by the organization in order to respond appropriately to reports of incidents in breach of the Safeguarding Policy of S.C.P. Japan (hereinafter referred to as 'the organization'). The scope of events addressed in this section includes

- To the organization's staff, officials, or members of the public.
- Events committed by staff or officials of the organization.

[Procedure].

1. receiving reports

1.1 Reports can come to us through a variety of channels. For example, it may be in the form of an enquiry form on social media a web page, an email, text or SMS message. Or it may take the form of informal discussions or rumors. If staff hear something in informal discussions or conversations that they consider to be a safeguarding concern, they should report it to the appropriate member of staff within the organization.

1.2 If a safeguarding concern is raised directly with the charity's staff, the person receiving the report should bear in mind the following points

- Listen attentively
- Empathize with the complainant.
- Ask "who, when, where and what", not "why".
- Repeat what is said to ensure the person being reported understands the situation themselves
- Report to appropriate staff (Safeguarding Officer or other staff who may not be involved in the event).

1.3 The person receiving the report should then document the following information

- Name of the complainant
- Name of the survivor in the safeguarding concern (if different from above)
- Name of the perpetrator
- Summary of the incident
- Date, time and location of the incident

1.4 The person receiving the report should then share this information with the Safeguarding Officer or appropriate staff or other relevant person within 24 hours.

1.5 Prudence in sharing safeguarding concerns must be maintained at all stages of the reporting process and only shared on a 'need to know' basis.

1.6 If the reporting staff member is not satisfied that the organization has dealt with the report appropriately, they have the right to make a report to an external body (an outside agency). Staff will be protected from negative repercussions as a result of this report.

2. determine how to proceed based on the report

2.1 Appoint a decision maker to handle this report.

2.2 Decide if you can proceed with the matter based on this report.

- Does the reported incident represent a violation of the Safeguarding Policy?

- Do you have sufficient information to pursue this report?

2.3 If a reported incident is not a violation of the Organization's Safeguarding Policy and represents a protection risk to others (e.g., a child protection incident), it should be reported through the appropriate channels (e.g., local authorities) unless it is dangerous.

2.4 If there is insufficient information to pursue a report and no way to verify this information (e.g., if the person who prepared the report did not leave contact details), submit a report in case it can be used in the future and learn from any broader issues to move forward.

2.5 If the report raises concerns about a child under the age of 18, professional advice should be sought immediately. If during the process of responding to the report (e.g., during an investigation) it becomes apparent that the person involved is a child under the age of 18, the decision-maker should be notified immediately and seek professional advice before proceeding.

2.6 If a decision is made to proceed based on a report, make sure that you have the relevant expertise and ability to manage the safeguarding aspects. If you do not have this expertise within your organization, you will immediately seek assistance through outside resources, if necessary.

2.7 It is made clear "what, how, and with whom" information will be shared about the incident. Confidentiality is always maintained, and information is only shared on a "need to know" basis. Determine which information needs to be shared with which stakeholders (need-to-know information is varies).

2.8 Where you receive a report on Safeguarding, you confirm your obligations in relation to notifying the relevant authorities. Examples include (but are not limited to).

- Funding sources.

- Collaborators and partners of the organization.

- Public authorities.

Some of these may need to be notified upon receipt of the report, while others may require information upon completion of this matter. Careful consideration should be given to maintaining confidentiality when submitting information



to any of these bodies/entities.

3. define case management roles and responsibilities

3.1 If not already done (see above), appoint a decision maker for the case. The decision-maker must not be involved or entangled in the case under any circumstances.

3.2 If the report indicates a serious violation of safeguarding, a case conference may be held. The conference will be attended by the following people

- The decision-maker
- The person receiving the report (focal point or supervisor)
- Officers / Board members
- The case conference should determine the next steps to be taken for the survivor and other stakeholders, including any safeguarding concerns and required supports measures (see below).

4. provide support to survivors as required or requested

4.1 Provide appropriate support to survivors of events related to safeguarding. This should be provided as an obligation, even if the report on the investigation has not yet been completed. Support may include (but is not limited to)

- Psychosocial care or counselling
- Medical assistance
- Protection or security assistance (e.g., transfer to a safe place)

4.2 All decisions about support should be guided closely by the survivor.

5. identify protection or security risks to stakeholders

5.1 In the event of a report of a major event, a risk assessment is immediately carried out to determine whether there is a current or potential risk to the stakeholders involved in the matter and, if necessary, a plan to mitigate the risk is developed.

5.2 Continue risk assessments and, where necessary, plan on an ongoing, regular basis after a case has been resolved.

6. deciding on the next steps

6.1 The decision-maker decides on the next steps. The following decisions can be made (but not limited to).

- Take no further action
(e.g., if there is insufficient supporting information or if the incident to which the report refers is outside the remit of the organization).
- Conduct an investigation to gather more information.
- If no further information is required, immediate disciplinary action

- Referral to the relevant authorities

6.2 The decision-making process is unusual when the report concerns relevant personnel (e.g., contractors, consultants, suppliers). Although the relevant personnel are not staff, the charity has a duty to protect those involved in any aspect of the program from harm. While the organization cannot engage in a disciplinary process regarding individuals outside of the organization, a decision may be made to terminate a contract with a supplier based on the actions of that person, for example.

6.3 If a survey is required and the Organization does not have the spare capacity, it will determine which budget will be used to conduct the survey.

7. conduct investigations where necessary

7.1 Use the procedures set out by the organization to investigate policy breaches. If the organization's procedures are insufficient to investigate from a safeguarding perspective, external guidelines should be used.

8. making a decision on the results of the investigation report

8.1 Decision makers will make decisions based on the information contained in the investigation report. Decisions regarding concerns should be made in accordance with existing policies and procedures regarding staff misconduct.

8.2 If a suspected violation event or suspicion that a violation event is about to be made arises, the event should be referred to the relevant authorities, unless it is likely to pose a risk to those involved in the event. In this case, the decision maker should work with senior staff to determine the course of action to be taken. That policy should be made with an investigation of the potential protection risks to all parties involved, including the survivor and the person of concern, in mind.

9. concluding the case

9.1 Document all decisions resulting from the incident clearly and confidentially.

< History >

Procedures for handling reports on safeguarding

December 2020 Established and applicable / Enacted and applied

Revised June 2021

Revised April 2022

Relevant guidance

- Safeguarding policy

- Safeguarding Code of Conduct