# Sports Club & Facility Provider Check and Challenge Tool

Partner Organisations		
Facility Provider:	Club:	
Facility Safeguarding Lead/Welfare Officer:	Club Safeguarding Lead/Welfare Officer:	
Facility Provider Lead Contact:	Activity Lead Contact:	

Initial Agreement Checklist (Safer Recruitment)		Agreed Points/Actions Required
Clubmark/NGB accreditation		
Coach qualifications/background/character		
Safeguarding training/awareness		
First Aid qualification		
Criminal Records (DBS) & Photo Identification		
Right to work		
References		
Public Liability Insurance		
Coach Code of Conduct		
Contract/Agreement		
We agree that the Initial Agreement checks I	have be	en completed
Facility Provider	(	Club
Signature:		Signature:
Name:	1	Name:
Date:	I	Date:

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Pre-Delivery Checks		Agreed Points/Actions Required
Safeguarding Procedures		
<ul> <li>Site Induction</li> <li>First Aid &amp; Accident procedures</li> <li>Emergency procedures - exits and assembly points</li> <li>Toilets and changing rooms</li> <li>Additional Health &amp; Safety requirements</li> <li>Access to landline</li> </ul>		
Ratios/supervision		
Risk Assessments		
Promotion of Activities (including social media)		
Coach absence/replacement/cancellation		
Early arrivals		
Departures at end of session/late collection		
Raising Concerns		
Complaints Management		
Specific needs of participants		
Storage of personal data		
Parent/Carer Consent • Photo/video consent • Social Media		
Codes of Conduct • Participants • Parents		
Behaviour Management		
Payments		

Pre-Delivery Checks cont.		Agreed Points/Actions Required	
School staff role and accountability			
We agree that the Pre-delivery Responsibility checks have been completed			
Facility Provider	(	Club	
Signature:	C C	Signature:	
Name:	1	Name:	
Date:	[	Date:	

### **Post-delivery Checks:**

It is good practice for there to be a candid post-delivery discussion particularly around safeguarding.

Post-delivery Checks		Agreed Points/Actions Required
Evaluation • Participants' views • Facility Provider views • Coach/Club views		
Review successes and challenges		
Review safeguarding arrangements		
Sustainability of provision		
We agree that the post-delivery responsibilit	y check	s have been completed.
Facility Provider	(	Club
Signature:	:	Signature:
Name:		Name:
Date:		Date:

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#### **Action Plan**

Action Points	Lead Responsibility	Timescale	Completed