CHILD PROTECTION AND SAFEGUARDING POLICY



1. INTRODUCTION

Everyone who participates in Centre Stage Dance and Drama Ltd (CSDD) is entitled to do so in an enjoyable and safe environment. When given responsibility for children, CSDD have a moral and legal obligation to ensure it provides the highest possible standard of care.

This Child Protection and Safeguarding Policy applies to all activities of CSDD and to all teachers, volunteers and anyone who works on behalf of CSDD.

The aim of this policy is to promote good practice and to provide children with appropriate safety/ protection whilst in the care of CSDD. It also allows teachers, volunteers and anyone who works on behalf of CSDD to make informed and confident responses to specific child protection issues.

A child is defined as a person under the age of 18 (Children Act 1989).

1.1 Policy Purpose

The purpose of this policy is to:

- Protect children who receive CSDD services.
- Provide teachers, volunteers and anyone who works on behalf of CSDD with the overarching principles that guide our approach to child protection and safeguarding.

1.2 Guiding Principles

The principles below will guide all elements of safeguarding activity delivered by those at CSDD:

- Child care which is respectful and informed.
- Timely safeguarding action.
- The involvement of others on a need to know basis only.
- The early identification and management of actual or potential risks.
- The active commitment of all in promoting and keeping our CSDD community safe.

1.3 Legal Framework

This policy has been drawn up on the basis of law and guidance that seeks to protect children, namely:

- Children Act 1989.
- United Convention of the Rights of the Child 1991.
- General Data Protection Regulations 2018.
- Data Protection Act 1998.
- Human Rights Act 1998.
- Sexual Offences Act 2003.
- Children Act 2004.
- Safeguarding Vulnerable Groups Act 2006.
- Protection of Freedom Act 2012.
- Children and Families Act 2014.

1.4 The Definition of Safeguarding

In relation to children, CSDD adopts the definition used in the Children Act 2004 and the Department for Education (DfE) guidance document: Working Together to Safeguard Children 2013, which define safeguarding and promoting children's welfare as:

- Protecting children from maltreatment.
- Preventing impairment of children's health or development.
- Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care.
- Taking action to enable all children have the best outcomes.

2. GOOD PRACTICE

2.1 Introduction

To provide children with the best possible experience and opportunities at CSDD, everyone must cooperate within an accepted ethical framework.

It is not always easy to distinguish poor practice from abuse. It is therefore NOT the responsibility of teachers, volunteers or anyone who works on behalf of CSDD to make judgements about whether or not abuse is taking place. It is however their responsibility to identify poor practice and possible abuse and act if they have concerns about the welfare of a the child, as explained in section 4.

This section will help identify what is meant by good practice and poor practice.

2.2 Good Practice

All teachers, volunteers and anyone who works on behalf of CSDD should adhere to the following principles and action:

- Always work in an open environment (eg. avoiding private or unobserved situations and encouraging open communication with no commitment to secrets).
- If care for children requires personal support such as using the toilet, wherever possible ensure that there is at least another responsible person present. Speak through what will take place with the child, and provide an account of actions with the parent/guardian of the child.
- Make the experience of CSDD fun and enjoyable: promote fairness and confront/deal with bullying.
- Treat all children equally and with respect and dignity. Language, attitude and body language must be respectful.
- Always put the welfare of the child first.
- Maintain a safe and appropriate distance with children (eg. it is not appropriate for teachers, volunteers, or anyone who works on behalf of CSDD to have a sexual relationship with a child or to share a room with them).
- Avoid unnecessary physical contact with a child. Where any from of manual/physical support is required it should be provided openly and with the consent of the child. Physical contact can be appropriate so long as it is neither intrusive nor disturbing and the child's consent has been given.
- Request written parental/guardian consent if teachers, volunteers or anyone who works on behalf of CSDD are required to transport a child in their cars.
- Gain written parental/guardian consent for any significant travel arrangements eg. overnight stays.
- Ensure that if mixed gender groups are taken away, they should always be accompanied by a male and female member of staff.
- Ensure that at away events, adults should not enter a child's room or invite a child to their rooms.
- Be an excellent role model. This includes not smoking or drinking alcohol in the company of a child.
- Always give enthusiastic and constructive feedback for a student's performance.

- Recognise the developmental needs and capacity of a child and do not risk sacrificing welfare in a desire for company or personal achievements.
- Secure written parental/guardian consent for CSDD to act in loco parentis, to give permission for the administration of emergency first aid or other medical treatment if the need arises.
- Keep a written record of any injury that occurs, along with details of any treatments given and keeping a record of near misses.
- Actively communicate with children and involve them in planning and running activities where possible.
- Never use illicit drugs, abuse prescription medication, or use alcohol when responsible for a child.
- Avoid showing favouritism to any one child or do anything to reinforce their possible infatuations towards you.

If anything causes concerns during the execution of activities on behalf of CSDD, this should be escalated immediately.

3. DEFINING CHILD ABUSE

3.1 Introduction

Child abuse is any form of physical, emotional or sexual mistreatment or lack of care that leads to injury or harm. It commonly occurs within a relationship of trust or responsibility and is an abuse of power or a breach of trust. Abuse can happen to a young person regardless of their age, gender, race or ability.

There are four main types of abuse: physical abuse, sexual abuse, emotional abuse and neglect. The abuser may be a family member, someone the child encounters in residential care or in the community, including sports and leisure activities. Any individual may abuse or neglect a child directly, or may be responsible for abuse because they fail to prevent another person harming the child.

Children with disabilities may be at increased risk of abuse through various factors such as stereotyping, prejudice, discrimination, isolation and powerlessness to protect themselves or adequately communicate that abuse had occurred.

3.2 Types of Abuse

Physical Abuse is where adults physically hurt or injure a child eg. hitting, shaking, throwing, poisoning, burning, biting, scalding, suffocating, drowning. Giving children alcohol or inappropriate drugs would also constitute child abuse.

Physical abuse also includes when a parent/guardian reports non-existent symptoms or deliberately causes ill health to a child they are looking after. This is called Munchauser's syndrome by proxy.

Emotional Abuse is the persistent emotional ill treatment of a child, likely to cause severe and lasting adverse effects on the child's emotional development. It may involve telling a young person they are useless, worthless, unloved, inadequate or valued in terms of only meeting the needs of another person. It may feature expectations of a child that is not appropriate to their age or development. It may cause a child to be frightened and withdrawn by being constantly shouted at, threatened or taunted.

Emotional abuse in performance may occur when the child is constantly criticised, given negative feedback or expected to perform at levels that are above their capability. Other forms of emotional abuse could take the form of name calling and bullying.

Neglect occurs when an adult fails to meet the child's basic physical and/or psychological needs, to an extent that is likely to result in serious impairment of the child's health or development. For example, failing to protect from physical harm or danger, or failing to ensure access to appropriate medical care of treatment.

Refusal to give love, affection and attention can also be a form of neglect.

Neglect in performance could occur when a teacher does not keep the young person safe, exposing them to undue cold/heat or unnecessary risk of injury.

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Child Sexual Exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activities appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

In performance, activities which might involve physical contact with children could potentially create situations where sexual abuse may go unnoticed. Also, the power of the teacher over child performers, if misused, may lead to abusive situations developing.

Whilst bullying is not a form of abuse in its own right, it is a serious issue and is founded on one or more types of abuse. It may come from another child or an adult. Bullying is defined as deliberate hurtful behaviour, usually repeated over a period of time, where it is difficult for those bullied to defend themselves.

There are three main types of bullying. It may be physical (eg. hitting, kicking, slapping), verbal (eg. racist or homophobic remarks, name calling, graffiti, threats, abusive text messages), emotional (eg. tormenting, ridiculing, humiliating, ignoring, isolating from the group), or sexual (eg. unwanted physical contact or abusive comments).

3.3 Indicators of Abuse

Even for those experience in working with child abuse, it is not always easy to recognise a situation where abuse may occur or has already taken place. Most people are not experts in such recognition, but indications that a child is being abused may include one or more of the following:

- Unexplained or suspicious injuries such as bruising, cuts or burns, particularly if situated on a part of the body not normally prone to such injuries.
- An injury for which an explanation seems inconsistent.
- The child describes what appears to be an abusive act involving them.
- Another child or adult expresses concern about the welfare of a child.
- Unexplained changes in a child's behaviour eg. becoming very upset, quiet, withdrawn or displaying sudden outbursts of temper.
- Inappropriate sexual awareness.
- Engaging in sexually explicit behaviour.
- Mistrust of adults, particularly those whom a close relationship would normally be expected.
- Difficulty in making friends.
- Being prevented from socialising with others.
- Displaying variations in eating patterns including over eating or loss of appetite.
- Losing weight for no apparent reason.
- Becoming increasingly dirty or unkempt.
- Behaviour changes such as reduced concentration, becoming withdrawn, clingy, depressed, tearful, emotionally up and down, and/or reluctant to rehearse.
- An unexplained drop in performance.
- Physical signs such as stomach aches, headaches, difficulty sleeping, bed wetting, scratching, bruising, damaged clothes and bingeing eg. on food, alcohol or cigarettes.
- Inappropriate relationship with an adult.
- Unexplained sudden boost in gifts and money.
- Written work includes inappropriate or distressing material.
- Signs of substance abuse.
- A shortage of money or frequent loss of possessions.

It must be recognised that the above list is not exhaustive, but also that the presence of one or more of the indications is not proof that abuse is taking place. For a more comprehensive list of possible indicators, the Designated Safeguarding Officer should be consulted. It is NOT the responsibility of those working at CSDD to decide if child abuse is occurring. It IS the responsibility of those working for CSDD to act on any concerns by passing these on to the Designated Safeguarding Officer.

4. RESPONDING TO SUSPICIONS AND ALLEGATIONS

4.1 Introduction

It is not the responsibility of anyone working for CSDD in any capacity to decide whether or not child abuse has taken place, however, there is a responsibility to act on any concerns through contact with the appropriate authorities so that they can then make enquiries and take necessary action to protect the child.

This section explains how to respond to allegations/suspicions.

4.2 Receiving Evidence of Possible Abuse

One may become aware of possible abuse in various ways. One may see it happening, suspect it happening because of the signs of abuse, it may be reported to the company by someone else or directly by the child affected.

In the last of these cases, it is particularly important to respond appropriately. If a child says or indicates that they are being abused, you should:

- Stay calm to not frighten the child.
- Reassure the child that they are not to blame and that they are doing the right thing.
- Listen to the child, showing that you are taking them seriously.
- Keep questions to a minimum so that there is a clear and accurate understanding of what has been said. Only ask questions for clarification.
- Tell the child that you have to inform other people about what they have told you; in order to protect them.
- Safety of the child us paramount. If the child needs urgent medical attention call an ambulance. If they are in danger, phone the police.
- Record all information.

- Report the incident immediately to the Designated Safeguarding Officer.

In all cases if you are not sure what to do you can gain help from the NSPCC help line. Tel No: 0808 800 5000.

4.3 Recording Information

To ensure that information is as helpful as possible, a detailed record should always be made at the time of the disclosure/concern. In recording you should confine yourself to the facts and distinguish what is one's knowledge and what others have said. Do not include one's own opinions.

Information should include the following:

- The child's name, age and date of birth.
- The child's home address and telephone number.
- Whether or not the person making the report is expressing their concern or someone else's.
- The nature of the allegation, including dates, times and any other relevant information.
- A description of any visible bruising or injury, location, size etc. Also, any indirect signs, such as behavioural changes.
- Details of witnesses to the incidents.
- The child's account, if it can be given, of what has happened and how any bruising/injuries occurred.
- Have the parents been contacted? If so what has been said?
- Has anyone else been consulted? If so record details.
- Has anyone alleged to be the abuser? Record details.

4.4 Reporting the Concern

Concerns about a child may present themselves in a number of ways. The core actions that should always be taken are:

- Take any emergency action needed to alleviate any immediate risk to life or limb (call 999).
- Discuss your concerns with the Designated Safeguarding Officer.
- Make a brief factual note of what you have seen, heard or become concerned about (within an hour when possible, as above).
- Listen, don't ask any leading questions and treat all information confidentially.
- Ensure safeguarding action is taken.
- All situations of actual or suspected child abuse should be reported without delay (within 24 hours) to the appropriate agencies.

All suspicions and allegations MUST be reported. It is recognised that strong emotions can be caused particularly in cases where sexual abuse is suspected or where there is misplaced loyalty to a colleague. It is important to recognise these feelings but not allow them to interfere with your judgement about any action to take.

If the nominated Designated Safeguarding Officer is not available you should take responsibility and seek advice from the NSPCC helpline, the duty officer at the local social services department or the police.

Where there is a complaint against a teacher or volunteer, there may be three types of investigation:

- Criminal in which case the police are immediately involved.
- Child protection in which case the social services (and possibly the police) will be involved.
- Disciplinary or misconduct in which case CSDD will be involved.

All suspicions and allegations must be shared with professional agencies that are responsible for child protection.

Social services have a legal responsibility under The Children Act 1989 to investigate child protection referrals by talking to the child and family (where appropriate), gathering information from others who know the child and making inquiries jointly with the police.

Any suspicion that a child has been abused by a teacher or volunteer should be reported to CSDD who will take appropriate steps to ensure the safety of the child in question and any other child(ren) who may be at risk. This will include the following:

- CSDD will refer the matter to social services.
- The parent/guardian of the child will be contacted as soon as possible following advice from the social services.
- The principal of CSDD should be notified to deal with any media enquiries and implement any disciplinary proceedings.

Allegations of abuse are sometimes made after the event. Where allegations are made, you should follow the same procedures. This is because other children may be at risk from the alleged abuser.

4.5 Confidentiality

Every effort should be made to ensure that confidentiality is maintained for all concerned. Information should be handled and disseminated on a need to know basis only. This includes the following people:

- Designated Safeguarding Officer.
- The parents of the child (if safe to do so).
- Relevant safeguarding agencies (including Social Services/Police).
- The alleged abuser (and parents if the alleged abuser is a child).

- Head of School/Principal of School (where appropriate).

Seek social services advice on who should approach the alleged abuser.

All information will be stored in a secure place with limited access to designated people only, in late with date protection legislation meeting General Data Protection Regulations.

4.6 Internal Inquiries and Suspension

The Designated Safeguarding Officer will make an immediate decision about whether any individual accused of abuse should be suspended pending further police and social services inquiries.

Irrespective of the findings of the social services or police inquiries, CSDD will assess each individual case to determine whether they can be reinstated and how this can be sensitively handled. This may be a difficult decision; especially where there is insufficient evidence to uphold any action by the police. In such cases, CSDD will reach a decision based upon the available facts which could suggest that it is more likely than not the allegation is valid. The welfare of the child(ren) should remain of paramount importance throughout.

Reinstatement of a member of staff or volunteer will only be granted if the person has been cleared of the allegations. Termination or revision of duties may also be appropriate. This will be determined by the Principal, whose decision is final.

5. SAFER RECRUITMENT AND WORKING

5.1 Introduction

It is important that all reasonable steps are taken to prevent unsuitable people from working with children. This applies equally to teachers, volunteers and anyone who works on behalf of CSDD. To ensure unsuitable people are prevented from working with children we follow a safer recruitment process.

5.2 Controlling Access to Children

Our safeguards prior to anyone who works on behalf of CSDD:

- Everyone must complete a profile form, requiring information about the person's past and a selfdisclosure about criminal records.
- Everyone is required to undergo or hold an enhanced DBS check within the last 5 years.
- Two references, including one regarding previous work with children are to be obtained. These references MUST be taken up, where the applicant is external to CSDD.
- Proof of Identity (passport or driving licence with photo).

5.3 Interview and Induction

Anyone who works on behalf of CSDD will be required to undertake a face to face interview, as determined by the Principal. Everyone should then have an induction, during which:

- Verification that the application has been competed in full, including sections on criminal records and self-disclosures (and any required action).
- Qualifications should be substantiated.
- Job requirements and responsibilities should be clarified.
- Aware of the expected standards of professional conduct, policies and procedures at CSDD.
- Safeguarding procedures are explained and training needs identified eg. basic child protection awareness.

5.4 Training

In addition to pre-selection checks, the safeguarding process includes training after recruitment to help everyone to:

- Analyse their own practice against what is deemed good practice, and to ensure their practice is likely to protect them and others.
- Recognise their responsibilities and report any concerns about suspected poor practice and/or abuse.
- Respond appropriately to safeguarding concerns.
- Work safely and effectively with children.

Anyone who works on behalf of CSDD are required:

- To undergo a DBS check, with renewal every five years.

- To undertake relevant safeguarding training and undertake approved home study, to ensure their practice is exemplary and to facilitate the development of positive culture towards good practice and child protection.
- To receive advisory information outlining good/bad practice and informing them what to do if they have concerns about the behaviour of an adult towards a child.
- To engage with the Designated Safeguarding Officer if they require further training or would like to discuss the options of further safeguarding training.

6. CONTACT DETAILS

6.1 Designated Safeguarding Officer

Name: Suki Turner Phone: 07940503971 Email: <u>suki.turner@icloud.com</u>

6.2 CEOP

www.ceop.police.uk

6.3 NSPCC Helpline

0808 800 5000

We are committed to reviewing our policy and good practice annually. This policy was reviewed on 1st January 2021 and it is next due for review on 1st January 2022.