

Child Protection & Safeguarding Policy

Implemented September 2024

It is our intention to maintain children's safety as the highest priority at all times both on & off the premises.

Purpose & Statement

Children and young people have the right to be safe and happy whilst participating in activities organised by Carrie May School of Performing Arts (CMSPA). The company therefore takes all reasonable precautions to safeguard the welfare of the young people who work and train with us.

This child protection policy and associated procedures have been drawn up for the benefit of children and young people under the age of 18, or adults who may be considered vulnerable. They apply to all the teaching and support staff, voluntary class assistants and artists engaged by the company.

In accordance with the provisions of The Children Act 1989, the "welfare of children is paramount". This means that some of the usual considerations of confidentiality may be superseded by the need to protect children, young people and vulnerable adults (collectively referred to as 'young people' in this document).

The person at who has overall responsibility for child protection issues with CMSPA is the Principal, Caroline Parry. They have received training in the protection of young people and is responsible for ensuring that the company's policies and procedures are kept up to date and adhered to by CMSPA's staff. She is also the person to whom any concerns regarding suspected child abuse should be addressed. The teachers and assistants are also responsible for health and safety matters within the company. However, it is not their role to decide whether a young person has been abused or not; this is the job of the statutory authorities to whom she has a duty to report possible child abuse.

The following policy is based on the below principles:

- The welfare of the child is paramount
- All children, whatever their age, culture, disability, gender, language, racial origin religious beliefs and/or sexual identity have the right to protection from abuse
- All suspicions and allegations of abuse will be taken seriously and responded to swiftly and appropriately
- All staff (paid/unpaid) have a responsibility to report concerns to the Designated Person with responsibility for child protection

- Staff/volunteers are not trained to deal with situations of abuse or to decide if abuse has occurred

We will aim to safeguard children by:

- Adopting child protection guidelines through procedures and a code of conduct for staff and volunteers
- Sharing information about child protection and good practice with children, parents and carers, staff and volunteers
- Sharing information about concerns with agencies who need to know, and involving parents and children appropriately
- Carefully following the procedures for recruitment and selection of staff and volunteers
- Providing effective management for staff and volunteers through support, supervision and training
- We are committed to reviewing our policy and good practice regularly

This policy sets out agreed guidelines relating to the following areas:

- Responding to allegations of abuse, including those made against staff and volunteers
- Recruitment and vetting of staff and volunteers
- Supervision of organisational activities

Child Protection

When recruiting staff and volunteers, the company takes up a minimum of two references and requires an Enhanced Disclosure certificate from the Disclosure and Barring Service. This is a check that reveals whether the prospective member of staff is known to the police in relation to committing offences against children and any other convictions and/or cautions.

Every CMSPA activity has a teacher or other responsible adult who is in charge and has overall responsibility for the welfare of the participants.

Young people will be supervised by adults throughout the session, including during breaks. However, this only applies from the advertised start of the session and if children arrive early then parents and carers should take steps to ensure they are properly looked after until the session starts. Parents and carers also need to ensure that children are collected promptly at the end of sessions.

All activities organised by CMSPA are subject to risk assessments both during the planning stage and by monitoring the activity. Appropriate steps are taken to minimise any risks identified.

Arts activities often involve physical contact between participants and between staff and participants. Physical contact will only be made when it is necessary in relation to the particular arts activity and with the agreement of the young people involved.

We will not use photographic images of young people, for example for publicity purposes, without written permission from the legal guardian. Even when such permission is given, the young

person's full name and address will not be revealed.

We keep records about participants so that we know whom to contact in case of an emergency, whether they suffer from any allergies, have a medical condition or a disability/special need and for monitoring purposes. These records are treated as confidential except where relevant information is given to class teachers/persons in charge.

If a participant arrives at a session with a visible injury, this will be noted in the Accident Book and the parent/carer will be asked to sign the record. If a participant sustains an injury during a session, this will also be recorded in the company's Accident Book and treatment given if appropriate. In the event of a serious incident, the parent/carer will be contacted immediately. A telephone (landline or mobile) is always available for staff to use in case of an emergency.

Definitions of Abuse

Physical abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing harm to a child.

Physical harm may also be caused when a parent or carer feigns the symptoms of, or deliberately causes ill health to a child whom they are looking after. This situation is commonly described as factitious illness, fabricated or induced illness in children or “Munchausen Syndrome by proxy” after the person who first identified this situation.

A person might do this because they enjoy or need the attention they get through having a sick child.

Physical abuse, as well as being the result of a deliberate act, can also be caused through omission or the failure to act to protect.

Female Genital Mutilation (FGM) is also classed as physical abuse. FGM has been a criminal offence in the UK since 1985. In 2003 it also became a criminal offence for UK nationals or permanent UK residents to take their child abroad to have female genital mutilation.

Emotional abuse

Emotional abuse is the persistent emotional ill treatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve making a child feel or believe they are worthless or unloved, inadequate or valued only insofar as they meet the needs of the other person.

It may feature age or developmentally inappropriate expectations being imposed on children. It may also involve causing children to feel frequently frightened or in danger, or the exploitation or corruption of a child.

Some level of emotional abuse is involved in all types of ill treatment of a child, though it may occur alone.

Sexual abuse

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of, or consents to, what is happening. The activities may involve physical contact, including penetrative acts such as rape, buggery or oral sex, or non-penetrative acts such as fondling.

Sexual abuse may also include non-contact activities, such as involving children in looking at, or in the production of, pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

Boys and girls can be sexually abused by males and or females, by adults and by other young people. This includes people from all different walks of life.

Neglect

Neglect is the persistent failure to meet a child's basic physical and or psychological needs, likely to result in the serious impairment of the child's health or development. It may involve a parent or a carer failing to provide adequate food, shelter and clothing, leaving a young child home alone or the failure to ensure that a child gets appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

It is accepted that in all forms of abuse there are elements of emotional abuse, and that some children are subjected to more than one form of abuse at any time. These four definitions do not minimise other forms of maltreatment.

Note

Recent guidance notes other sources of stress for children and families, such as social exclusion, domestic violence, the mental illness of a parent or carer, or drug and alcohol misuse. These may have a negative impact on a child's health and development and may be noticed by an organisation caring for a child. If it is felt that a child's well-being is adversely affected by any of these areas, the same procedures should be followed.

Recognising & Responding to Abuse

Recognising and Responding to Abuse:

The following signs may or may not be indicators that abuse has taken place, but the possibility should be considered.

Physical signs of abuse

- Any injuries not consistent with the explanation given for them
- Injuries which occur to the body in places which are not normally exposed to falls or games
- Unexplained bruising, marks or injuries on any part of the body
- Bruises which reflect hand marks or fingertips (from slapping or pinching)
- Cigarette burns
- Bite marks
- Broken bones
- Scalds
- Injuries which have not received medical attention
- Neglect—under nourishment, failure to grow, constant hunger, stealing or gorging food, untreated illnesses, inadequate care
- Repeated urinary infections or unexplained stomach pains
- Female Genital Mutilation

Changes in behaviour which can also indicate physical abuse

- Fear of parents being approached for an explanation
- Aggressive behaviour or severe temper outbursts
- Flinching when approached or touched
- Reluctance to get changed, for example, wearing long sleeves in hot weather
- Depression
- Withdrawn behaviour
- Running away from home

Emotional signs of abuse

The physical signs of emotional abuse may include:

- A failure to thrive or grow particularly if a child puts on weight in other circumstances e.g. in hospital or away from their parents' care
- Sudden speech disorders
- Persistent tiredness
- Development delay, either in terms of physical or emotional progress

Changes in behaviour which can also indicate emotional abuse include:

- Obsessions or phobias
- Sudden under-achievement or lack of concentration
- Inappropriate relationships with peers and/or adults
- Being unable to play
- Attention seeking behaviour
- Fear of making mistakes
- Self-harm
- Fear of parent being approached regarding their behaviour

Sexual Abuse

The physical signs of sexual abuse may include:

- Pain or itching in the genital/anal area
- Bruising or bleeding near genital/anal areas
- Sexually transmitted disease
- Vaginal discharge or infection
- Stomach pains
- Discomfort when walking or sitting down
- Pregnancy

Changes in behaviour which can also indicate sexual abuse include:

- Sudden or unexplained changes in behaviour e.g. becoming withdrawn or aggressive
- Fear of being left with a specific person or group of people
- Having nightmares
- Running away from home
- Sexual knowledge which is beyond their age or developmental level
- Sexual drawings or language
- Bedwetting
- Eating problems such as over-eating or anorexia
- Self-harm or mutilation, sometimes leading to suicide attempts
- Saying they have secrets they cannot tell anyone about
- Substance or drug abuse
- Suddenly having unexplained sources of money
- Not allowed to have friends (particularly in adolescence)
- Acting in a sexually explicit way with adults

Neglect

The physical signs of neglect may include:

- Constant hunger, sometimes stealing food from other children
- Constantly dirty or smelly
- Loss of weight or being constantly underweight
- Inappropriate dress for the conditions

Changes in behaviour which can also indicate neglect include:

- Complaining of being tired all the time
- Not requesting medical assistance and/or failing to attend appointments
- Having few friends
- Mentioning being left alone or unsupervised

What to do if you suspect that abuse may have occurred (parent, carer or another adult):

1. You must report the concerns immediately to the designated person: Caroline Parry

The role of the designated person is to:

- Obtain information from staff, volunteers, children or parents and carers who have child protection concerns and to record this information
- Assess the information quickly and carefully and ask for further information as appropriate
- They should also consult with a statutory child protection agency such as the local social services department or the NSPCC to clarify any doubts or worries. In this case, or if she feels it to be appropriate anyway, the designated person would either contact Hertfordshire Social Services Duty Childcare Co-ordinator (0300 123 4043) or the NSPCC Child Protection Helpline (0808 800 5000)
- The designated person should make a referral to a statutory child protection agency or the police without delay

The designated person has been nominated by CMSPA to refer allegations or suspicions of neglect or abuse to the statutory authorities. In the absence of Caroline Parry, the matter should be brought to the attention of the Caroline Manning-Smith.

2. Suspicions will not be discussed with anyone other than those nominated above.

3. The FGM Mandatory reporting duty. When a girl under 18 discloses she has suffered FGM: report is to be made to the police via the 101 non-emergency number.

Allegations of physical injury or neglect (parent, carer or another adult):

If a child has a symptom of physical injury or neglect the designated person will:

1. Contact Social Services for advice in cases of deliberate injury or concerns about the safety of the child. The parents should not be informed by the organisation in these circumstances
2. Where emergency medical attention is necessary it will be sought immediately. The designated person will inform the doctor of any suspicions of abuse
3. In other circumstances speak with the parent/carer/guardian and suggest that medical help/attention is sought for the child. The doctor will then initiate further action if necessary
4. If appropriate the parent/carer will be encouraged to seek help from Social Services. If the parent/care/guardian fails to act the designated person should in case of real concern contact social services for advice
5. Where the designated person is unsure whether to refer a case to Social Services then advice from the Area Child Protection Committee will be sought.

Allegations of sexual abuse (parent, carer or another adult):

In the event of allegations or suspicions of sexual abuse the designated person will:

1. Contact the Social Service duty social worker for children and families directly. The designated person will not speak to the parent (or anyone else)
2. If the designated person is unsure whether to follow the above guidance, then advice from the Area Child protection Committee will be sought
3. Under no circumstances is the designated person to attempt to carry out any investigation into the allegation or suspicions of sexual abuse. The role of the designated person is to collect and clarify the precise details of the allegation or suspicion and to provide this information to Social Services whose task it is to investigate the matter under section 47 of the Children Act.
4. Whilst allegations or suspicions of sexual abuse should normally be reported to the designated person, their absence should not delay referral to Social Services

Responding to a child making an allegation of abuse:

- Stay calm, listen carefully to what is being said
- Find an appropriate early opportunity to explain that it is likely that the information will need to be shared with others – do not promise to keep secrets
- Allow the child to continue at his/her own pace
- Ask questions for clarification only and at all times avoid asking questions that suggest a particular answer
- Reassure the child that they have done the right thing in telling you
- Tell them what you will do next and with whom the information will be shared
- Record in writing what was said using the child's own words as soon as possible, note the date, time, any names mentioned, to whom the information was given and ensure that the record is signed and dated

Helpful statements to make

- I believe you (or showing acceptance of what the child says)
- Thank you for telling me
- It's not your fault
- I will help you

Do not say

- Why didn't you tell anyone before?
- I can't believe it!
- Are you sure that this is true?
- Why? Who? When? Where?

Never make false promises.

What to do after a child has talked to you about abuse:

1. Make notes as soon as possible. Ideally within 1 hour of being told you should write down exactly what the child has said and what you said in reply and what was happening immediately before being told (i.e. the activity being delivered). You should record the dates and times of when you made the record. All hand-written notes should be kept securely.
2. You should report your discussion with the designated person as soon as possible. If this person is implicated, you need to report to the second designated person. If both are implicated report to Social Services
3. You should under no circumstances discuss your suspicions or allegations with anyone other than those nominated above
4. After a child has disclosed abuse the designated persons should carefully consider whether it is safe for a child to return home to a potentially abusive situation. On these rare occasions, it may be necessary to take immediate action to contact Social Services to discuss putting safety measures into effect

Recruitment and appointment of workers and volunteers:

In recruiting and appointing workers we, CMSPA, will be responsible for the following:

- Identifying the tasks and responsibilities involved and the type of person most suitable for the job
- Drawing up the selection criteria and putting together a list of essential and desirable qualifications, skills and experience
- All applicants should apply in writing and their application will cover their personal details, previous and current work/volunteering experience
- We will always send a copy of our child protection policy with the application pack
- We will make sure that we measure the application against the selection criteria
- All applicants need to sign a declaration stating that there is no reason why they should be considered unsuitable to work with children. The Rehabilitation of Offenders Act (1974) requires that people applying for positions which give them "substantial, unsupervised access on a sustained or regular basis to children under the age of 18" must declare all previous convictions which are then subject to police checks. They can then only be offered a job subject to a successful police check. This includes potential employees, volunteers and self-employed people. They are also required to declare any pending case against them. All information will be dealt with confidentially and will not be used against them unfairly.
- We will request two written references prior to interview from people who are not family members or friends and who have knowledge of the applicant's experience of working with children. We will ask the referee to also comment on their suitability for working with children and ask for any known safeguarding concerns. We will also try and follow up written references with a telephone call

- We will ask for photographic evidence to confirm the identity of the applicant and their right to work in the UK e.g. their passport
- We will request to see documentation of any qualifications detailed by the applicant
- We will always interview our candidates face-to-face.
- We will ensure that our successful applicant obtains or shows an enhanced check from the Disclosure and Barring Service.
- New freelance teachers and volunteers will either need to obtain or show an enhanced DBS check with barring list check. The DBS must be dated within the last 12 months or provided to us via the update service
- DBS Checks will be renewed and checked every 3 years after initial appointment
- New team members are all subject to a thorough induction and supervision schedule. There are also regular appraisals to ensure safeguarding remains at the centre of all roles
- The same principles above apply to volunteers and young people who have been involved with the organisation and have become volunteers

Allegations against a member of staff/volunteer:

CMSPA will assure all staff/volunteers that we will fully support and protect anyone who in good faith reports his or her concern that a colleague is, or may be, abusing a child. Where there is a complaint against a member of staff there may be three types of investigation:

- A criminal investigation
- A child protection investigation
- A disciplinary or misconduct investigation

The results of the police and child protection investigation may well influence the disciplinary investigation, but not necessarily

You should report your concerns with the designated person as soon as possible. If this person is implicated, you need to report to the second Designated Person. If both are implicated report to Social Services. The below refers only to the Designated Person as an example.

Action if there are concerns:

Concerns about poor practice:

- If, following consideration, the allegation is clearly about poor practice; this will be dealt with as a misconduct issue
- If the allegation is about poor practice by the Designated Person or if the matter has been handled inadequately and concerns remain, it should be reported to the Caroline Manning-Smith who will decide how to deal with the allegation and whether or not the organisation should initiate disciplinary proceedings

Concerns about suspected abuse

- Any suspicion that a child has been abused by either a member of staff or a volunteer should be reported to the Designated Person who will take such steps as are considered necessary to ensure the safety of the child in question and any other child who may be at risk
- The Designated Person will refer the allegation to the social services department who may involve the police, or go directly to the police if out-of-hours
- The parents or carers of the child will be contacted as soon as possible following advice from the social services department

Internal Enquiries and Suspension

- The Designated Person will make an immediate decision about whether any individual accused of abuse should be temporarily suspended pending further police and social services inquiries
- Irrespective of the findings of the social services or police inquiries, [COMPANY NAME] will assess all individual cases to decide whether a member of staff or volunteer can be reinstated and how this can be sensitively handled. This may be a difficult decision; particularly where there is insufficient evidence to uphold any action by the police. In such cases, [COMPANY NAME] must reach a decision based upon the available information which could suggest that, on a balance of probability, it is more likely than not that the allegation is true. The welfare of the child should remain of paramount importance throughout

Grievances regarding 'whistleblowing':

It is the right for any individual making a report to the designated person(s) to be treated fairly and appropriately. If any individual feels that this is not the case, and they are being penalised and/or silenced, they must contact the NSPCC helpline for whistleblowing, support and advice is: 08000 280 285.

Appropriate Physical Touch:

As Performing Arts practitioners and facilitators, there may be occasions when physical touch between students and staff, and students and other students is appropriate.

Touch Between Students and Staff:

There are three reasons why contact between student/staff could be deemed appropriate.

A) A distressed pupil needs comfort and reassurance which may include physical comfort such as a caring parent would give. Staff should use their discretion in such cases to ensure that what is, and what is seen to be by others present, normal and natural, does not become unnecessary and unjustified contact, particularly with the same pupil over a period of time. Where a member of staff has a particular concern about the need to provide this type of care and reassurance, he/she should seek the advice of the Caroline Parry.

(B) Some staff are likely to come into physical contact with pupils from time to time in the course of their duties. An example is demonstrating a movement or position during class. Staff should be aware of the limits within which such contact should properly take place and of the possibility of

such contact being misinterpreted. Staff should always announce their intention to make contact with the student.

(C) There may be occasions where it is necessary for staff to restrain a pupil physically to prevent him/her from inflicting injury to others or self-injury, damaging property, or causing disruption. In such cases only the minimum force necessary may be used and any action taken must be to restrain the pupil. Where an employee has taken action to physically restrain a pupil, he/she should make a written report of the incident & submit it to the DSL, Caroline Parry immediately.

Touch Between Student and Student:

During the course of CMSPA activities students may find physical touch an important part of their learning and development. Such as dramatic scenes, improvisation and choreography.

Facilitators should be encouraged to keep this to a minimum, and ensure all students involved feel comfortable with any touch involved. Physical contact should be limited to what the facilitator deems necessary and should never be sexual/violent in content.

If touch between students becomes violent, the DSL must be informed immediately, and a full incident report written.

Supervisory arrangements for the management of CMSPA activities and services.

We will aim to protect children from abuse and our team members from false allegations by adopting the following guidelines:

- We will keep a register of all children attending our activities
- We will keep a register of all team members (both paid staff members and volunteers)
- Our team members will record any unusual events on the accident/incident form
- Written consent from a parent or guardian will be obtained for every child attending our activities
- Where possible our team members should not be alone with a child, although we recognise that there may be times when this may be necessary or helpful
- Team members should escort young children (under 8) to the toilet but are not expected to be involved with toileting, unless the child has a special need that has been brought to our attention by the parent/guardian
- We recognise that physical touch between adults and children can be healthy and acceptable in public places. However, our team members will be discouraged from this in circumstances where an adult or child are left alone
- All team members should treat all children with dignity and respect in both attitude language and actions

Peer on Peer Abuse:

CMSPA continue to ensure that any form of abuse or harmful behaviour is dealt with immediately and consistently to reduce the extent of harm to the young person, with full consideration to impact on that individual child's emotional and mental health and well-being.

Children and young people may be harmful to one another in a number of ways which would be classified as peer on peer abuse.

At CMSPA we have the following policies in place that should be read in conjunction with this section:

- Code of Conduct (Student)

Examples of peer on peer abuse may include, but are not limited to:

- Physical abuse e.g. (biting, hitting, kicking, hair pulling etc.)
- Sexually harmful behaviour/sexual abuse e.g. (inappropriate sexual language, touching, sexual assault etc.)
- Bullying (physical, name calling, homophobic etc.)
- Cyber bullying
- Sexting
- Initiation/Hazing
- Prejudiced Behaviour
- Teenage relationship abuse

CMSPA will deal with any situation of peer abuse immediately and sensitively. It is incredibly important that staff do not dismiss issues as 'banter' or 'growing up' or compare them to their own experiences of childhood. It is necessary that staff consider each issue and individual before taking action. If staff minimise the concerns raised it may result in a young person seeking no further help or advice.

Information will be gathered as soon as possible to get the true facts as soon as any resemblance to peer on peer abuse is discovered. Staff will not be prejudiced, judgemental, dismissive or irresponsible and will adhere to CMSPA's 'Responding to a child making an allegation of abuse' guidelines as outlined in this policy above.

In the instance of a UK law being broken or a safeguarding concern, a report will be made by the DP to both the police (via the 101 number) and the local safeguarding authority.

CMSPA will also, as part of investigation, try to discover intent. Without repetition or malicious intent some of the above could be handled internally. This decision will only be taken by one (or more) of CMSPA's DPs.

Parents and Guardians will be informed, if the DP has no concerns that this could make any situation worse.

If a case of Peer on Peer abuse is handled internally or an ongoing case of Peer on Peer abuse has been reported and is being handled externally:

The young person who has been harmed will be continued to be monitored and offered various after support including (but not limited to): Mentoring, Risk Assessments and improving peer relationships.

The young person who has displayed harmful behaviour will be punished as appropriate to the Student Code of Conduct including (but not limited to): Exclusion/Suspension and additional supervision.

Support and Training:

We, CMSPA, are committed to the provision of child protection training for all our team members.

All staff will update their safeguarding training AT LEAST every 3 years. Speak to Caroline Parry to request most up to date information.