

Safeguarding children

At Jane Coleman School of Dancing (JCSD) we recognise that the welfare of children is of paramount importance. We have a responsibility to protect and safeguard the welfare of all children and young people we work with and have an explicit duty to do so under the Children Act 1989 and 2004 and the Education Act 2002.

A 'child' is anyone who has not yet reached their 18th birthday. The fact that a child has reached 16 years of age is living independently, in further education, or working does not change his/ her entitlement to services or protection as a child.

At JCSD we believe that all children without exception have the right to protection from abuse regardless of gender, ethnicity, disability, sexuality or beliefs and that no child, or group of children should be treated any less favourably than others in being able to access the services and support to meet their needs.

All staff and volunteers have a strict duty never to subject a child to any form of harm or abuse. Failure to adhere to these procedures will be treated as gross misconduct. Children and their parents/ carers may view our policy where appropriate and a copy will always be available on our website and upon request.

Designated safeguarding lead:

The designated safeguarding person (DSP) within our organisation is **Miss Kate Riches**. The Designated Safeguarding Person will advise members of staff at JCSD and others working for or on behalf of the JCSD on best practice and expectations. They will be responsible for the monitoring and recording of any safeguarding concerns and for ensuring that all concerns are shared with the appropriate statutory authorities.

All staff, volunteers and anyone else working on behalf of the JCSD should be made aware of this policy and should be able to demonstrate their roles and responsibilities for safeguarding and promoting the welfare of children and young people, including how to raise concerns with both children's social care and the police.

Overview of responsibilities:

All staff, volunteers and contractors must report all concerns to the designated safeguarding lead at the nearest available opportunity.

It is the responsibility of everyone working for or on behalf of the JCSD in any capacity, paid or voluntary to take steps to protect children, to keep them safe from hazards and to take appropriate action in the event of an accident.

It is the responsibility of all staff and volunteers to take reasonable steps to protect children and young people from harm and abuse while in contact with our association and to report any incident of or suspicion of abuse to the Designated Safeguarding Person or in their absence to the appropriate statutory authority.

All staff and volunteers working for or on behalf of the JCSD who have regulated contact with children and young people (as defined in the Safeguarding Vulnerable Groups Act 2006) are required to hold a valid, clear DBS.

Safeguarding and promoting the welfare of children and young people means:

Protecting children from maltreatment, preventing impairment of a child's health or development, ensuring that children are growing up with the provision of safe and effective care and taking action to ensure that children have the best life chances.

At Jane Coleman School of Dancing we will do this by:

- Ensuring staff at JCSD have received appropriate professional safeguarding training and can act on concerns raised appropriately.
- Identifying and responding to concerns about a child or young person swiftly and appropriately
- Providing a safe and happy dance environment at all our events by making all necessary local authority BOPA applications, using effective risk assessments, following our health and safety, safeguarding and equality policies and having a designated safeguarding lead in attendance at all events.

- Supporting parents, carers, children and young people to communicate freely with us, supporting their communication methods, providing time and space to talk whenever they need it
- Fostering an environment of trust and building appropriate professional relationships with students and families
- Providing accessible information on safeguarding and clear pathways for raising a concern for parents and carers for example via our website
- Ensuring that at all our events children, families and professionals are aware a designated safeguarding lead is present.
- Ensuring JCSD teachers receive training on the importance of safeguarding through completion of their level 4 qualification and that they recognise the need to undertake safeguarding training and to have a DBS check.

Consent and information sharing:

Issues of consent are essential to effective safeguarding practice and appropriate guidance shall be provided to ensure those consenting have clear and transparent information on what they are consenting to. This guidance shall be provided by the designated safeguarding lead before concerns are shared.

Significant harm is no exception to this. Before making a referral to Children's Social Care parents or carers will be informed JCSD is doing so, including the reasons why and will be asked for agreement to share information. It should be noted however that in cases where parents, carers or children do not agree to information being shared and we believe a child or young person has or could be significantly harmed we will refer to Children's Social Care without consent but will explain clearly to social care why consent could not be established and will keep a record of this. Instances where the JCSD may not seek consent are where:

- Discussion with parents/ carers could place the child or other members of their family at increased risk
- The child is in immediate danger (e.g. requires medical attention)
- Having the discussion with parents may put a staff member or volunteer at risk.

It is often necessary to share information to provide support and prevent impairment or to protect a child from harm. Decisions to share will be appropriate, necessary and proportionate. JCSD will record all decision and the reasons for them, whether or not the concern is shared onwards.

Where concerns are shared with social care / the police a record will also be kept of what was shared and who it was shared with.

Child protection:

Is part of safeguarding children and promoting welfare. It refers to activity that is undertaken to protect specific children who are suffering or likely to suffer significant harm.

This is about abuse and maltreatment of a child. Someone may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them, or by others (for example over the internet.) They may be abused by an adult or adults or another child/children. Abuse may be physical, emotional, sexual, neglectful or multiple types of abuse.

All staff and volunteers should be able to recognise, and know how to act upon evidence that a child's health or development is being impaired or that the child is suffering or likely to suffer significant harm. All concern about harm must be recorded and shared with the Designated Safeguarding Person.

No one should assume that another will pass on information about the safety of a child. If anyone in any position has concerns about a child's welfare and believe they are or are likely to suffer significant harm they have a responsibility to inform the designated safeguarding lead.

Seeking medical attention:

If a child has a physical injury, and there are concerns of abuse, medical attention should be sought immediately. Any safeguarding concerns should be shared with ambulance or hospital staff and then must be reported to children's social care.

Nothing should be allowed to delay urgent medical treatment. Referring a concern and your DSP: Our Designated safeguarding person will act on behalf of JCSD in referring concerns or allegations of harm to Children's social care or the police as appropriate. If the designated safeguarding lead is in any doubt information should be shared with children's social care for a second opinion. It is not the role of the DSP to investigate only to collate information, clarify details of the concern and facilitate information sharing. In the absence of the DSP the individual

who has the concern is responsible for contacting children's social care and the information should be shared with the DSP retrospectively.

The contact number for children's social care will be a local number and will be found on your local authority or local safeguarding children's partnership arrangements website. You can also contact the NSPCC on 0808 800 5000 or the police on 101 or in an emergency 999.

Protection of children:

At the JCSD we will make every effort to protect children from harm when they are in our care or taking part in JCSD organised activities. We will do this through:

- Appropriate recruitment and selection procedures
- Provision of safeguarding information
- Ensuring all staff and volunteers with regulated contact hold clear current DBS checks
- We will take all practicable steps to ensure that no one working with us or for us would put a child in a situation of unreasonable risk to their health and safety.
- We will not harm or abuse children within our care and will take all reasonable steps to ensure no one working with us or around us within the community could harm or abuse a child in our care.
- We will ensure good reporting to our DSP and onward to children's social care where ever we suspect harm and will foster an environment of good communication, transparency and trust.

Allegations against staff members/ volunteers:

If any member of staff has concerns about another member of staff or volunteer working for or on behalf of the JCSD such as

- Believing they have behaved in a way that has harmed or may cause harm to a child
- Having possibly committed a criminal offence against or relating to a child
- Behaved toward a child in a way that indicates he/ she is unsuitable to work with children.

(This could include both children within the work place, children within the community or their own children).

The allegation or concern should be reported to the individuals with responsibility for dealing with allegations immediately.

Neither the individual who has raised the concern/ allegation nor the individual who is alleged against should be allowed to question children or be part of any further investigation.

Definitions of abuse:

Physical abuse: A form of abuse that may involve hitting shaking throwing poisoning burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of or deliberately causes illness in a child.

Emotional abuse: The persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless, unloved inadequate, or valued in so far as they meet the needs of another person only, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as the over protection and limitation of exploration and learning, or preventing the child from participating in normal social interaction. It may involve seeing or hearing the ill treatment of another. It may involve serious bullying (or cyber bullying), causing children to frequently feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

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, 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.

Neglect: The persistent failure to meet a child's physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide adequate food, clothing, and shelter (including exclusion from home and abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate care givers); ensure access to appropriate medical care or treatment. It may also include an unresponsiveness to a child's basic emotional needs.

This is not a complete list, just examples. It is essential to remember it is not the role of staff or volunteers to determine whether abuse has taken place. It is simply to identify concerns and share them first with the DSP and then the Local Authority.

Harm or the potential harm to a child may come to your attention in a number of ways:

- Information given to you by the child, his/her friends a family member or close associate
- The child's behaviour may become different from the usual, be significantly different from the behaviour of their peers, be bizarre or unusual or may involve 'acting out' harmful situations through play.
- An injury may arouse suspicion if; it does not compare with the explanation given, different individuals give different explanations, the child appears anxious when discussing the injury, a child is pre mobile or has limited mobility and is bruised.
- Suspicion is raised as a picture of events is built up over time
- A child or young person is known to be having contact with an individual/s that have been identified as presenting a potential risk of harm to children.
- A parents behaviour before the birth of a child may indicate the likelihood of significant harm to an unborn child for example substance misuse.

Managing a disclosure from a child:

- Listen carefully
- Do not ask leading or probing questions
- Never stop an individual who is talking freely
- Never promise to keep a secret
- Be reassuring they have done the right thing in disclosing
- Following the disclosure record the information and pass it on to your DPS.