NATIONAL YOUTH MUSIC THEATRE

IN TUNE WITH YOU

SAFEGUARDING POLICY

P-SG-2611/1

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DESIGNATED PERSONS

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OTHER KEY CONTACTS

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In a child protection emergency, dial 999 and ask for the police.

TERMINOLOGY

Safeguarding and promoting the welfare of children refers to the process of protecting children from maltreatment, preventing the impairment of their mental and physical health or development, ensuring that children grow up in circumstances consistent with the provision of safe and effective care and taking action to enable all children to have the best outcomes.

Child Protection refers to the processes undertaken to meet statutory obligations[1] in respect of those children who have been identified as suffering or being at risk of suffering harm.

Staff refers to all those working for or on behalf of NYMT, full time or part time, in either a paid or voluntary capacity.

Pastoral Staff refers to those who have the specific responsibility of looking after the welfare of participants at NYMT activities.

Pastoral Lead refers to the staff member designated by the CEO or Head of Pastoral Care as the person responsible for a group of participants and other pastoral staff, such as in a boarding house or during a production week.

Child refers to all young people who have not yet reached their 18th birthday.

Young Company Member refers to a person who is receiving training as a participant at an NYMT activity.

Parent refers to birth parents and other adults who are in a parenting role, for example step-parents, foster carers and adoptive parents.

DSL is the Designated Safeguarding Lead.

LADO is the Local Authority Designated Officer, responsible for coordinating safeguarding allegations and concerns.

[1] As laid out in the Children Act 1989 and associated guidance (see Working Together to Safeguard Children, An Interagency Guide to Safeguard and Promote the Welfare of Children)

PHILOSOPHY AND AIMS

The NYMT is committed to protecting children and vulnerable groups and ensuring that their welfare is paramount in every project that it runs and in every aspect of its work. Accordingly:

- all children and adults at risk working with NYMT, whatever their age, disability, sex, gender reassignment, race, religion or belief, sexual orientation, language or background, have the right to protection from harm or abuse;
- parents have a right to feel safe when entrusting their children to NYMT;
- NYMT will provide an environment in which children and young people feel safe, secure, valued, respected and confident;
- all staff at NYMT have a clear understanding that our approach to safeguarding is one that recognises the real possibility that 'it could happen here'. With this in mind, staff members will always act in the best interests of the child;
- staff are expected to show professional curiosity: to notice, ask and record, to consider what a participant's day-to-day experience is actually like, and to speak up even when a concern seems small;
- all suspicions, and allegations, of abuse will be taken seriously and responded to swiftly and appropriately in accordance with this Safeguarding Policy. The handling of all complaints will be reviewed by the Board of Trustees.

1 POLICY STATEMENT

1.1 This is the Safeguarding Policy of the National Youth Music Theatre ("NYMT"). It has regard to the legislation, guidance and advice set out in Appendix B and is designed to address the NYMT's legal safeguarding duties, alongside its Philosophy and Aims.

1.2 This policy has been authorised by the Board of Trustees, is available on request and is published on the NYMT website. It applies wherever staff are working with children on an NYMT activity, and parts of this policy apply additionally to staff behaviour at times outside of NYMT activities.

1.3 NYMT is committed to safeguarding and promoting the welfare of children and young people and expects all staff, trustees and volunteers to share this commitment.

1.4 This policy is reviewed and updated at least annually (see Appendix C).

2 PROCEDURES: WHAT TO DO IF SOMEONE MAKES A DISCLOSURE ('THE SIX RS')

1) Ready?

Someone may want to talk to you at any point. If this involves safeguarding, you must be prepared to listen immediately.

2) Receive

The child has chosen you. You are in a position of trust. Listen carefully to what they say. Do not show shock or disbelief. Take it seriously.

3) Reassure

- Tell the child that they have done the right thing in talking
- Do not make promises you cannot keep (e.g. 'it will be alright now')
- Do not promise confidentiality – you have a duty to refer
- Reassure the child that information will only be shared with those who need to know
- Alleviate guilt – the child is not to blame

4) Respond

- Listen to the child to establish whether you need to refer the matter, but do not interrogate them
- Ask open questions e.g. 'is there anything else you want to tell me?'
- Do not ask leading questions i.e. 'did he/she do X to you?'
- Do not criticise the alleged perpetrator
- Do not ask the child to repeat the matter to another member of staff
- Explain that you will need to talk to the DSL

5) Record

- Make brief notes at the time if you can, and write these up as soon as you can
- Keep your original notes
- Record the date, time, place and the actual words used by the child (if you can)
- Record statements and actions rather than your own interpretations

6) Report

- Immediately contact the DSL or, if unavailable, another Designated Person
- The DSL may have to make your record available to Children's Services

3 PROCEDURES: REPORTING A SAFEGUARDING CONCERN

3.0.1 If a staff member has any concerns about a child's welfare, they should act on them immediately and speak to the DSL (or another Designated Person in their absence).

3.0.2 The DSL or another Designated Person will always be available to discuss safeguarding concerns. If in exceptional circumstances none is available, this should not delay appropriate action being taken: anyone can make a referral to police or social services.

3.0.3 During every NYMT activity, a named Designated Person is always on call and contactable by phone. The on-call staff details are included in each project's staff briefing and operational information pack.

3.0.4 Staff should take personal responsibility for sharing information, being mindful that early information sharing is vital for effective identification, assessment and allocation of appropriate service provision. Fears about sharing information must not be allowed to stand in the way of the need to promote the welfare, and protect the safety, of children.

3.0.5 The DSL will work with external safeguarding partners and other agencies in line with Working Together to Safeguard Children. The DSL will refer to advice from trusted agencies if considering whether police involvement is necessary (e.g. NPCC: When to call the police). Further details for some specific scenarios are included below.

3.1 If a child is in danger

3.1.1 If a child is in immediate danger, call 999. Where a child is suffering or likely to suffer significant harm, a referral should be made without delay to children's social care in the local authority where the child lives, and to the police where a crime may have been committed. Where the activity is taking place in another area and the risk is immediate, the local authority where the activity is taking place may also be contacted. Anyone can make a referral. Where a referral is not made by the DSL, the DSL must be informed as soon as possible.

3.2 Allegations against staff

3.2.1 The procedures for dealing with allegations against staff aim to strike a balance between the need to protect children from abuse and the need to protect staff from false or unfounded allegations. These relate to situations where the member of staff has:

- behaved in a way that has harmed a child, or may have harmed a child;
- possibly committed a criminal offence against or related to a child;
- behaved towards a child or children in a way that indicates they would pose a risk of harm if they work regularly or closely with children; or
- behaved or may have behaved in a way that indicates they may not be suitable to work with children (including conduct outside NYMT).

3.2.2 All such allegations must be dealt with as a priority without delay, with the procedures applied with good and careful judgement.

3.2.3 The person leading in accordance with these procedures is known as the 'Case Manager' and will usually be the DSL except in cases described in 3.2.5.

3.2.4 The Case Manager will consult the LADO at an early stage, and in any event within one working day, when an allegation appears to meet the criteria above. Where it is unclear whether the criteria are met, the Case Manager will consult the LADO rather than decide alone.

3.2.5 **Where an allegation or complaint is made against the CEO or the DSL**, the person receiving the allegation should immediately inform the Chair of the Board, without first notifying the CEO or DSL. Any such allegations will be discussed with the LADO before further action is taken.

3.2.6 Where the LADO and the Case Manager discuss a strategy and/or the involvement of the police or social services, the Case Manager will not inform the accused or the parents/carers until it has been agreed what information can be disclosed.

3.2.7 The Case Manager will inform the accused person of the allegation as soon as possible after the LADO has been consulted. The parents/carers of the child/children involved will similarly be informed of the allegation as soon as possible.

3.2.8 In addition to its safeguarding duties, NYMT has a duty of care towards its staff and as such it must ensure that effective support is provided for anyone facing an allegation.

3.2.9 Where NYMT ceases to use a member of staff because they are unsuitable to work with children, a referral to the DBS will be made promptly if the criteria for a referral are met, and a review of safeguarding procedures will take place.

3.2.10 Where an allegation by a participant or a parent/carer has been deliberately invented, the Case Manager may contact the police to determine whether any action may be appropriate.

3.2.11 Allegations of abuse against a member of staff who is no longer working with NYMT will be referred to the police and the LADO.

3.2.12 These procedures apply to all adults working on NYMT activities, including freelancers, volunteers, agency staff and staff of venues or contractors. Where the adult is employed by another organisation, NYMT will inform that organisation and work with it, but NYMT retains responsibility for safeguarding its participants and for gathering the facts. Responsibility for safeguarding cannot be transferred to a third party.

3.2.13 The outcome of an allegation will be recorded as: substantiated (sufficient evidence to prove the allegation); malicious (sufficient evidence to disprove it, and a deliberate act to deceive or cause harm); false (sufficient evidence to disprove it); unsubstantiated (insufficient evidence either to prove or disprove it); or unfounded (no evidence or proper basis to support it).

3.3 Low-level concerns about adults

3.3.1 A low-level concern is any concern – no matter how small, and including a 'nagging doubt' – that an adult working for or with NYMT may have acted in a way that is inconsistent with the Code of Conduct, including inappropriate conduct outside work, but which does not meet the harm threshold in 3.2.1. Examples include being over-friendly with participants, having favourites, being alone with a participant unnecessarily or using inappropriate language.

3.3.2 Low-level concerns should be shared with the DSL (or, if about the DSL or the CEO, the Chair) as soon as possible. Staff may also self-refer where they find themselves in a situation that could be misinterpreted and are encouraged to do so in briefings.

3.3.3 The DSL will record the concern, the action taken and the rationale, and will review records for patterns, including across productions. Where a pattern emerges or the threshold is met, the allegations procedure in 3.2 applies.

3.3.4 Low-level concern records are kept confidentially and are not included in references unless they relate to a substantiated allegation.

3.4 Record keeping & retention

3.4.1 All concerns, discussions and decisions made, and the reasons for those decisions, should be recorded in writing. This record should include the date, time and place of the conversation and detail of what was said and done by whom and in whose presence. The record should be signed by the person writing it. If in doubt about recording requirements, staff should discuss with the DSL (or another Designated Person) and/or follow the procedure 'What to do if someone makes a disclosure'.

3.4.2 NYMT keeps records in line with its Privacy Statement. Safeguarding records are generally kept for a long period of time. In particular, NYMT keeps:

- child protection files indefinitely where a referral has been made or there is a risk of future claims;
- for allegations against staff that are substantiated, false, unsubstantiated or unfounded, a clear and comprehensive summary until the individual's normal retirement age or for 10 years, whichever is longer. Records of malicious allegations are removed from personnel records;
- records of low-level concerns about adults for at least 5 years after the individual's last engagement with NYMT, and longer if a review justifies it.

4 CONCERNS ABOUT NYMT SAFEGUARDING PRACTICES (WHISTLEBLOWING)

4.1 All our staff should feel able to raise concerns about poor or unsafe practice and potential failures in our safeguarding regime and that such concerns will be taken seriously by the senior pastoral team.

4.2 If a staff member feels unable to raise an issue with senior staff or feels that their genuine concerns are not being addressed, they should contact the Chair of the Board of Trustees (see 'Other Key Contacts' at the top of this policy).

4.3 If a staff member continues to feel that their genuine concerns are not being addressed, other whistleblowing channels may be open to them, including:

- NSPCC Whistleblowing Advice Line: 0800 028 0285 (8am–8pm Monday to Friday; 9am–6pm weekends) or help@nspcc.org.uk
- Charity Commission: report serious wrongdoing via forms.charitycommission.gov.uk/Raising-Concerns
- Government guidance on whistleblowing: www.gov.uk/whistleblowing

4.4 There will be no retribution for making a report if it is done in good faith.

5 WHAT STAFF NEED TO KNOW

As part of their induction, all staff new to NYMT will be made aware of:

- this Safeguarding Policy including the low-level concerns procedure (3.3);
- the role and contact details of the DSL and other key contacts (contained within this policy);
- the relevant Staff Guide or Handbook, which includes a Code of Conduct;
- Keeping Children Safe in Education, Part 1 (all staff working directly with participants);
- KCSIE Annex B (DSLs and Pastoral Leads);
- Whistleblowing policy (contained within this policy);
- Missing Child Policy;
- First Aid & Medical Policy;
- Digital Safety Policy;
- Physical Contact Policy.

6 ROLES AND RESPONSIBILITIES

6.1 The responsibilities of all

6.1.1 Safeguarding is everyone's responsibility. Every adult working for or on behalf of NYMT has a general legal duty:

- to protect children from abuse;
- to be aware of NYMT's child protection procedures in this policy and guidance issued by NYMT and to follow them;
- to know how to access and implement these procedures, independently if necessary;
- to keep a sufficient record of any concerns, discussions and decisions in accordance with this policy;
- to report any matters of concern in accordance with this policy without investigating further.

6.1.2 The NYMT Board of Trustees has ultimate responsibility for NYMT's safeguarding policy and practice.

6.1.3 In order to help them discharge their duties, the Trustees have delegated responsibility to the CEO for the day-to-day management of safeguarding at NYMT and for the management of concerns and allegations about staff.

6.1.4 The CEO in turn delegates lead responsibility for safeguarding and child protection to the DSL, and the management of pastoral care to the Head of Pastoral Care, who assist the CEO in the appropriate understanding and application of this Policy by all staff.

6.2 Role of the Board of Trustees

6.2.1 The NYMT Board of Trustees ("the Board") undertakes a regular review of Safeguarding related policies and procedures. The Board has a crucial role in monitoring and challenging staff on the effectiveness of safeguarding arrangements. The Board reviews this policy at least once a year.

6.2.2 In the case of an allegation made against the CEO or DSL, the Chair of the Board will liaise with the other Designated Persons if appropriate.

6.2.3 Trustees follow the Charity Commission's guidance on safeguarding and protecting people and The Essential Trustee (CC3).

6.2.4 Safeguarding is a standing item at every Board meeting. The DSL reports on referrals, allegations, low-level concern trends, training compliance, DBS compliance and near misses (anonymised).

6.2.5 A named trustee acts as Safeguarding Trustee, provides challenge to the DSL, and reviews the safeguarding risk register at least annually.

6.2.6 Serious safeguarding incidents are reported promptly to the Charity Commission as a serious incident, in line with its guidance. The Chair and CEO decide on reporting, advised by the DSL. This policy is reviewed after any serious incident as well as annually.

6.3 Role of the CEO

6.3.1 The CEO should:

- ensure that the safeguarding and child protection policy and procedures are implemented and followed by all Staff;
- allocate sufficient time and resources to enable the DSL and other senior leaders to carry out their roles effectively;
- ensure that all staff feel able to raise concerns about poor or unsafe practice and that such concerns are handled sensitively and in accordance with the NYMT whistle-blowing procedures;
- ensure that the safety and welfare of all children on NYMT activities is addressed in all aspects of NYMT activities.

6.4 Role of the Designated Safeguarding Lead (DSL)

The DSL should:

- refer concerns about a child's safety or welfare without delay to children's social care and, where a crime may have been committed, the police;
- consult the LADO within one working day about any allegation against an adult that meets the criteria in 3.2.1, and inform the Chair where it concerns a member of staff;
- refer to the DBS where an adult is removed or leaves because they harmed, or posed a risk of harm to, a child;
- liaise with the CEO to inform them of issues, especially ongoing enquiries under section 47 of the Children Act 1989 and police investigations;
- act as a source of support, advice and expertise to staff on matters of safety and safeguarding and when deciding whether to make a referral by liaising with relevant agencies;
- undergo training to provide them with the knowledge and skills required to carry out the role. Their knowledge and skills should be updated via regular training, at appropriate intervals, as and when required (but at least annually), to keep up with any developments relevant to their role;
- maintain the on-call rota in 3.0.5 and ensure it is known to all staff on each activity;
- share information with schools, other settings and agencies where necessary to safeguard a participant, including speaking directly to the school's DSL where there are significant concerns;
- keep a safeguarding risk register and report to the Board as set out in 6.2.4.

- ensure each member of staff has access to and understands the NYMT safeguarding policy and procedures, especially new and part-time staff;
- keep detailed, accurate, secure written records;
- encourage among all staff a culture of listening to young people and taking account of their wishes and feelings;
- ensure the NYMT Safeguarding Policy is reviewed annually and the procedures and implementation are updated and reviewed regularly, and work with the Board of Trustees regarding this;
- ensure the Safeguarding Policy is available publicly.

6.5 Role of the Deputy DSL(s)

6.5.1 In the absence of the DSL, the Deputy DSL(s) will carry out those functions necessary to ensure the ongoing safety and protection of children at NYMT.

6.6 Role of Staff

6.6.1 Staff are expected to:

- implement and follow the Safeguarding Policy, Digital Safety Policy and the Staff Code of Conduct;
- understand that our responsibility to safeguard children requires that we all appropriately share any concerns that we may have about children;
- support each child's development in ways that will foster security, confidence and resilience;
- foster an environment in which children and young people feel safe, secure, valued and respected, feel confident and know how to approach adults if they are in difficulties;
- assist in the monitoring of children known or thought to be at risk of harm;
- ensure that detailed and accurate written records of concerns about a child are made and submitted to the DSL even if there is no need to make an immediate referral.

6.7 Role of Parents and Participants

6.7.1 The nature of NYMT's work means that parents and young people work with NYMT for relatively short periods of time. However, NYMT will work throughout this time to develop a trusting relationship with its parents. Parents are asked to make known all pertinent information that might affect our ability to support effectively the health and development of their children. Parental support for safeguarding is particularly important in areas such as:

- the notification of changes to family circumstances, ill health and bereavement;
- compliance with NYMT guidance on the use of technology;
- raising concerns in a timely manner.

6.7.2 Expectations for the behaviour of NYMT participants are set out in the Information Pack for each activity and are set out verbally at the start of each activity. Behaviour is monitored by the pastoral staff and is overseen by the Head of Pastoral Care. The NYMT has a separate Digital Safety Policy.

6.7.3 Adult participants confirm when they accept their place that they understand their safeguarding responsibilities and that they commit to helping to ensure that children around them feel safe, secure, valued and respected.

7 SAFEGUARDING MEASURES

7.0.1 NYMT Safeguarding measures include, but are not limited to, the following:

7.1 Recruitment and training

7.1.1 NYMT practises safer recruitment practices in line with current DfE guidance.

7.1.2 All adults whose role with NYMT involves teaching, training, instructing, caring for or supervising participants on more than three days in any 30-day period, or overnight, are in regulated activity and must have an enhanced DBS check with children's barred list check before starting. This applies whether they are employed, freelance or volunteering, and even if they are supervised. Other adults working directly with participants or resident in the same building have an enhanced DBS check at the level the DSL determines. NYMT accepts DBS Update Service checks.

7.1.3 Induction of new Staff includes safeguarding training, information on the NYMT Safeguarding Policy and safeguarding team (including contact details), and the staff Code of Conduct. They are required to confirm that they have read and understood the content of the induction material on safeguarding given to them.

7.1.4 Training sessions in Safeguarding are given to all resident staff at least once a year to support ongoing vigilance and the maintaining of an environment that deters and prevents abuse, and challenges inappropriate behaviour. Staff in key roles receive additional regular training in safeguarding that is appropriate to their roles. Members of the Board are trained at their induction. Training includes: recognising, receiving and reporting concerns; low-level concerns; child-on-child abuse; self-harm and suicide risk; making or sharing nudes and semi-nudes (including AI-generated images).

7.1.5 Staff are made aware of risk situations for themselves.

7.1.6 Staff must not share personal contact details with participants or enable private contact (such as becoming ‘friends’ or ‘followers’ on social media), except where this is necessary for their safety and approved by the DSL. This applies to Staff both while working for NYMT and after, where the participant remains under the age of 18 and/or is still at school, therefore subject to child protection measures.

7.1.7 Staff are invited after their work ends to appraise their view on the quality and appropriateness of safeguarding training provided to them and the practices employed by NYMT.

7.1.8 Staff must not enter any romantic or sexual relationship with a participant under 18, or with any participant aged 18 or over while they are in a position of trust in relation to that participant. This applies whether or not the statutory position of trust offences apply to the role.

7.2 Supervision

7.2.1 Participants are always subject to appropriate supervision. The appropriate level of supervision is determined by the Head of Pastoral Care and applicable risk assessments.

7.2.2 Supervision of boarding is key to safeguarding children at NYMT. Boarding supervision is organised and overseen by the Head of Pastoral Care. All boarding houses always have a responsible adult on duty and on site. Each boarding house will have at least two responsible adults available overnight, with at least one identified as 'on call'.

7.2.3 Boarding provision is allocated by sex. Where a participant's needs mean this arrangement may not support their welfare, the Pastoral Lead and DSL will agree an individual plan with the participant and their parents (if they are under 18). Participants are given clear instructions that participants of one boarding house (or section, if applicable) should not be in the private room of another.

7.2.4 Pastoral staff are made particularly aware of the potential for child-on-child abuse where there is a mix of age ranges in residential situations; supervision is planned appropriately.

7.2.5 Registers are taken to ensure that all participants are present and to identify a child who may have gone missing. On residential courses, registers are taken at the beginning and end of each day, after each meal break, and before and after group travel.

7.2.6 Self-harm, suicidal thoughts and suicide risk are safeguarding concerns and must be reported to the DSL immediately. If a participant is at immediate risk, staff must call 999 and must not leave them alone. Participants identified as needing additional support – for example those with a history of self-harm, those experiencing poor mental health or bullying or those managing medical conditions – have a support plan agreed with parents before the activity, and relevant information is shared with pastoral staff on a need-to-know basis. A medical condition alone is not a reason for referral to children's social care.

7.2.7 Any adult visitor to an NYMT activity is accompanied by a member of NYMT staff. This may take the form of adequate group supervision by pastoral staff where there are a large number of visitors (for example in a theatre foyer after a performance).

7.2.8 Participants aged 18 and older are briefed about their legal safeguarding responsibilities at their induction.

7.3 Reporting and recording

7.3.1 All staff are trained to report safeguarding concerns without delay to the DSL.

7.3.2 Written records of pastoral concerns and observations that do not qualify as immediate safeguarding concerns are made by staff and reviewed at least daily by senior staff. Staff are instructed in their induction, annual training and their handbooks that a concern that seems minor may complete a more concerning picture when considered alongside multiple other minor concerns, and they are trained in how to report these concerns. These concerns are sometimes referred to as Low-Level Concerns or Nagging Doubts.

7.3.3 Medical records are kept in accordance with the First Aid & Medical Policy.

7.3.4 Safeguarding and pastoral records are kept for as long as necessary to ensure the safety and wellbeing of all NYMT participants and staff. They are treated with an appropriate level of confidentiality, only involving others where appropriate.

7.3.5 Records kept include:

- Child protection allegations or concerns (see also Section 3)
- Major sanctions
- Administration of medication and first aid
- Significant illnesses and accidents
- Staff duty rotas and overnight attendance records

7.4 Digital Safety

7.4.1 Digital Safety is covered by the separate Digital Safety Policy, available on the NYMT website.

7.4.2 The Digital Safety Policy addresses risks from generative AI, including AI-generated or digitally altered images of participants. Where NYMT relies on a venue's internet connection, the Pastoral Lead confirms that filtering is in place.

7.5 Site security

7.5.1 NYMT uses premises, accommodation and facilities that are maintained to a standard such that, so far as is reasonably practicable, the health, safety and welfare of participants are ensured, in accordance with the National Minimum Standards for Boarding.

7.5.2 Where NYMT uses a place of residence or venue spread across multiple premises and campuses, the policy on Leaving Site will apply to all participants when travelling between separated parts of the same place of residence or venue.

7.5.3 Where NYMT works with other organisations whose staff will come into contact with NYMT participants, enquiries are made that appropriate checks have been carried out by that organisation. The DSL will decide what level of checks are appropriate in relation to the level of supervision provided by NYMT to its participants.

7.6 Health and safety

7.6.1 First Aid provision is covered by the separate First Aid Policy, available on the NYMT website.

7.6.2 Every activity run by NYMT has a corresponding risk assessment.

7.6.3 NYMT only uses residential premises that conform to UK fire safety regulations.

7.6.4 A fire drill is arranged for each participant cohort for each period of residential stay where required by legislation and/or the host venue and any deficiencies will be remedied without delay.

7.6.5 Fire safety equipment is operated only by trained staff.

7.7 Leaving Site and travel safety

7.7.1 The Policy on Leaving Site is made known to, and agreed to by, all participants and (in the cases of children) their parents/carers.

7.7.2 All participants, regardless of age, must carry at least one mobile with their group (charged and with credit), which number has been logged with the Pastoral Staff. They must seek permission from Pastoral Staff to go off site and must sign out and back in every time with the designated member of Pastoral Staff. The Pastoral Lead will set an appropriate time limit based on the activity risk assessment.

7.7.3 During the day:

Under 16s (school residence):	Must be in groups of at least three and should be familiarised with the area by pastoral staff before being unaccompanied.
Under 16s (elsewhere):	Must be accompanied by a member of pastoral staff.
16s and 17s:	Must be in groups of at least two.
18s and above:	May be solo, but we encourage at least pairs. While anyone aged 18 and above is considered an adult, we still require them to sign out and in and carry their mobile phone.

7.7.4 After dark, no participants under the age of 18 may leave the site unaccompanied.

7.7.5 When living and/or working in a location other than a campus, participants will be given emergency contact cards containing the contact information of key Pastoral Staff in their group.

7.7.6 The Pastoral Lead is responsible for ensuring a suitable ratio of staff to participants when using public transport, and for employing best practices in the use of public transport with groups of young people. This information is included in the activity risk assessments.

7.7.7 This policy reflects the minimum controls used by NYMT. Pastoral staff, at their discretion, may restrict this policy further if they deem it appropriate to the situation.

7.8 Intimacy in performance

7.8.1 NYMT's approach to intimacy in performance recognises that the threshold for what is considered intimate when working with children and young adults may be higher than when working with professional adults. Intimate content involving children and young adults does not have to include sexual content, and might include physical contact, emotional themes or situations in which a young person might feel vulnerable, for example: familial relationships; play wrestling; bedtime or bathroom scenes; the portrayal of romantic relationships, flirting or attraction.

7.8.2 Intimacy involving sexual content is not used in performances at NYMT, other than in exceptional circumstances.

7.8.3 In such circumstances, the proposed content must be considered first by a group of staff to include the Artistic Director, the project Director, the DSL and the project Pastoral Lead (the 'Intimacy Review Group'), and including at least one male and one female member of staff. The group will consider the welfare of the Young Company Members involved, taking into account where a young person may be more vulnerable because of their personal characteristics like age, gender and cultural background, and whether the need for such content in the performance is exceptional. If the group agrees unanimously on the content, the group will then agree a framework for the implementation of the content, which will include the opportunity of private refusal for any performers involved and the possible engagement of an intimacy coordinator. An intimacy coordinator may be engaged in order to help reach a final decision. Where a performer is under 18, the group will additionally seek permission from the child's parents as well as from the child before agreeing to the content.

7.8.4 Any other content judged by staff or Young Company Members as possibly intimate should be considered by an Intimacy Review Group in the same way. Staff should begin this process by speaking with the Artistic Director, while Young Company Members should speak with their Pastoral Lead.

7.8.5 Decisions taken by an Intimacy Review Group, and their rationale, will be recorded in writing and kept as a safeguarding record.

7.8.6 There should always be a chaperone (or member of pastoral staff) present when working with children on intimate content. An intimacy coordinator is not a substitute for a chaperone.

7.9 Adults at risk

7.9.1 Some adult participants may be adults at risk under the Care Act 2014: aged 18 or over, with care and support needs, experiencing or at risk of abuse or neglect and unable to protect themselves because of those needs.

7.9.2 Concerns about an adult participant are reported to the DSL in the same way as concerns about a child. The DSL will, wherever possible, discuss the concern with the adult and seek their consent before sharing information, unless others are at risk, a crime has been

committed or the adult lacks capacity. Where appropriate, the DSL refers to adult social care in the area where the adult lives.

8 MONITORING AND REVIEW

8.1 The DSL will ensure that the procedures set out in this Policy and the implementation of these procedures are updated and reviewed regularly, working with the Board of Trustees as necessary and seeking contributions from staff.

8.2 Any child protection incidents at NYMT will be followed by a review of these procedures by the DSL and a report made to the Board of Trustees. Where an incident involves a member of Staff, the LADO will assist in this review to determine whether any improvements can be made to NYMT's procedures. Any deficiencies or weaknesses in regard to child protection arrangements at any time will be remedied without delay.

8.3 The Board of Trustees will review this Policy at least annually, which may include independent corroboration and/or feedback from external agencies.

APPENDIX A: TYPES AND SIGNS OF ABUSE

The statutory definitions of abuse, neglect and exploitation are set out in the current editions of Working Together to Safeguard Children and Keeping Children Safe in Education (Part one). Those definitions take precedence over the summaries below.

Abuse is a form of maltreatment of a child. Somebody may abuse or neglect a child by causing harm or by failing to act to prevent it. Children may be abused by adults or by other children, in person or online, and are more likely to know their abuser than not. In most cases, several forms of abuse overlap.

- **Physical abuse:** causing physical harm to a child, including when a parent or carer fabricates or deliberately induces illness.
- **Emotional abuse:** persistent emotional ill-treatment that seriously affects a child's emotional development – for example making them feel worthless or frightened, persistent criticism or belittling, serious bullying, or seeing or hearing the ill-treatment of others.
- **Sexual abuse:** forcing, causing or inciting a child to take part in sexual activity, whether or not they are aware of what is happening, including non-contact and online abuse and grooming. It can be committed by men, women or other children.
- **Neglect:** persistent failure to meet a child's basic physical or emotional needs, likely to seriously impair their health or development.

The guidance also covers specific issues including child criminal and sexual exploitation (including group-based exploitation), serious violence, domestic abuse, honour-based abuse, radicalisation, mental health and online harms. Staff should report any concern to the DSL, whether or not it fits a defined category.

Child-on-child abuse

Children can abuse other children during NYMT activities, outside them and online. It can include bullying (including prejudice-based and discriminatory bullying), discriminatory behaviour such as racism or misogyny, physical abuse, sexual violence and sexual harassment, abuse within relationships, making or sharing nudes and semi-nudes, upskirting, and initiation or 'hazing' rituals.

NYMT's residential activities bring together participants of different ages, often living away from home, so staff should assume child-on-child abuse could be happening even when nothing has been reported. Staff must never dismiss behaviour as ‘banter’ or ‘part of growing up’, and should challenge misogynistic, sexualised or discriminatory language early. Participants who may be more vulnerable – for example because of SEND or neurodivergence, or because they are (or are perceived to be) lesbian, gay, bisexual or gender questioning – are considered in pastoral care planning.

In deciding whether behaviour between participants is abuse, staff and the DSL consider:

- the frequency, nature and severity of the incidents;

- whether the participant was coerced by physical force or fear, or by a participant or group significantly older than them or with power or authority over them;
- whether the incident involved a potentially criminal act, and whether it would be regarded as assault or otherwise actionable if it had happened to an adult.

Where an allegation is made against one or more participants, or staff are concerned about child-on-child abuse, the procedures in this policy are followed and the DSL is informed. Both the participant(s) alleged to have caused harm and the participant(s) harmed are treated as potentially at risk, and a referral is made to children's social care in respect of any participant who is suffering, or at risk of, harm.

Making or sharing nudes and semi-nudes

'Making or sharing nudes and semi-nudes' refers to the creation, sending or posting of nude or semi-nude images, videos or live streams of young people under 18, whether consensual or not. This includes images that are AI-generated, digitally altered or created using 'nudify' apps. It can happen via social media, gaming platforms, chat apps, forums or device-to-device sharing such as AirDrop. NYMT follows the UKCIS *guidance Sharing nudes and semi-nudes: advice for education settings*, and every incident receives a proportionate safeguarding response.

What to do if an incident of sharing nudes or semi-nudes comes to your attention:

- Report it to the Designated Safeguarding Lead (DSL) immediately.
- Never view, download, copy, print, store or share the imagery yourself, or ask the child to share or download – this is illegal. In exceptional circumstances, it may be necessary for the DSL only to view the image to safeguard the child or young person. That decision should be based on the professional judgement of the DSL.
- If you have viewed the imagery (e.g. if a child has shown you something before you could ask them not to), report this to the DSL.
- Do not delete the imagery or ask the child to delete it.
- Do not attempt to investigate the matter – this is the responsibility of the DSL.
- Do not share information about the incident with anyone other than the DSL.
- Do explain to them that you need to report it and reassure them that they will receive support and help from the DSL.

The DSL will hold an initial review meeting with appropriate Pastoral Staff. The child(ren) involved will be spoken to (if appropriate). Parents will be informed at an early stage and involved in the process unless there is good reason to believe that involving parents would put the child at risk of harm. At any point in the process, if there is a concern a child has been harmed or is at risk of harm, a referral could be made to Children's Social Care and/or the police.

An initial review will consider the initial evidence and aim to establish:

- whether there is an immediate risk to a child;
- if a referral should be made to the police and/or children's social care;

- if it is necessary for the DSL to view the imagery in order to safeguard the child – in most cases, imagery should not be viewed;
- what further information is required to decide on the best response;
- whether the imagery has been shared widely and via what services and/or platforms;
- any relevant facts about the participants involved that would influence risk assessment;
- if there is a need to contact another school, college, setting or individual;
- whether to contact parents or carers of the participants involved - in most cases parents should be involved.

An immediate referral to police and/or children's social care should be made if at this initial stage:

- the incident involves an adult;
- there is reason to believe that a child has been coerced, blackmailed or groomed, or if there are concerns about their capacity to consent;
- the imagery involves sexual acts and any child in the imagery is under 13;
- there is reason to believe a participant is at immediate risk of harm owing to the sharing of the imagery, for example, the participant is presenting as suicidal or self-harming.

If none of the above applies, then the DSL may decide to respond to the incident without involving the police or children's social care (the DSL can choose to escalate the incident at any time if further information/concerns come to light). The decision to respond to the incident without involving the police or children's social care would be made in cases when the DSL is confident that they have enough information to assess the risks to pupils involved and the risks can be managed within NYMT's own pastoral support and disciplinary framework and, if appropriate, local network of support.

Signs of abuse

Possible signs include, but are not limited to:

- a participant tells you they have been abused, or says something that suggests it;
- injuries with no reasonable or consistent explanation, unusual injuries, a pattern of injuries, or injuries consistent with self-harm;
- a sudden or significant change in behaviour, mood or engagement, including withdrawal, aggression or unusually compliant behaviour;
- reluctance to work with, or be alone with, a particular adult or participant, without wanting to say why;
- an adult or older participant giving a child special attention, gifts or private contact;
- unexplained money, gifts or phones, or contact with unknown older people;
- sexualised language or behaviour that is not appropriate for the participant's age;
- appearing neglected – for example hungry, exhausted, inadequately clothed, or repeatedly arriving without essential medication;

- anxiety about going home, or being openly rejected by parents or carers;
- going missing or leaving site without permission (see the Missing Child Policy);
- difficulty sleeping, changes in eating, or other signs of poor mental health.

A single sign may not mean abuse. Staff must record what they notice and report it to the DSL, rather than deciding for themselves.

APPENDIX B: POLICY DEVELOPMENT & RELATED GUIDANCE

This policy has been developed in accordance with the principles established by the Children Act 1989, and with regard to the following:

- Keeping Children Safe in Education 2026 (in force 1 September 2026)
- Working Together to Safeguard Children 2026 (March 2026; further revision expected 2027)
- What to do if you're worried a child is being abused (March 2015)
- Information sharing: advice for practitioners (May 2024)
- Sharing nudes and semi-nudes: advice for education settings (UKCIS, March 2024)
- Keeping children safe during community activities, after-school clubs and tuition: guidance for providers (DfE, 2023)
- Charity Commission: Safeguarding and protecting people for charities and trustees (updated October 2026); The Essential Trustee (CC3)
- Boarding Schools: National Minimum Standards (2022)
- Children Act 1989 and 2004; Care Act 2014; Equality Act 2010; Human Rights Act 1998
- Children (Performances and Activities) (England) Regulations 2014
- Crime and Policing Act 2026; Children's Wellbeing and Schools Act 2026; Online Safety Act 2023
- Independent Inquiry into Child Sexual Abuse, final report (October 2022)
- Child Safeguarding Practice Review Panel: persistent themes in safeguarding reviews (2026)
- Regulatory Reform (Fire Safety) Order 2005

This policy should be read in conjunction with the following NYMT policies, all of which can be found on the NYMT website:

- Missing Child Policy
- First Aid & Medical Policy
- Digital Safety Policy
- Physical Contact Policy

All NYMT policies are approved by the NYMT Board of Trustees.

APPENDIX C: POLICY UPDATES & REVIEW

This version dated 1 November 2026.

Date of next review: November 2027.

The following updates were made since the previous version:

- Updated throughout to reflect KCSIE 2026 and Working Together to Safeguard Children 2026
- Corrected referral routes: concerns about a child go to children's social care and/or the police; allegations against adults go to the LADO (3.1.1, 6.4.1)
- Added DSL on-call and cover arrangements (3.0.5)
- Updated allegations against staff to align with KCSIE Part four, including the "suitability" harm test, early LADO consultation, staff engaged through third parties and outcome definitions (3.2)
- Added a low-level concerns procedure for adults working with NYMT (new 3.3)
- Updated whistleblowing contacts (4.3)
- Strengthened the Board's role in line with Charity Commission guidance (October 2026), including a standing agenda item, a Safeguarding Trustee, a risk register and serious incident reporting (6.2)
- Updated the DSL's responsibilities (6.4)
- Updated DBS requirements following removal of the supervision exemption from regulated activity, effective 1 September 2026 (7.1.2)
- Clarified the prohibition on relationships between staff and adult participants (7.1.8) and minimum training content (7.1.4)
- Revised sleeping and facilities arrangements (7.2.3)
- Added self-harm and suicide risk as safeguarding concerns, and the response required (7.2.6)
- Added generative AI and venue internet filtering to digital safety (7.4.2)
- Added a section on adults at risk (new 7.9)
- Revised Appendix A: statutory definitions now linked; child-on-child abuse section updated, including misogyny and discriminatory behaviour; AI-generated images added to nudes and semi-nudes; signs of abuse revised
- Updated Appendix B: guidance and legislation
- Updated philosophy and aims, including Equality Act protected characteristics and professional curiosity
- Minor corrections to terminology, role titles and document references

Previous updates (October 2024)

- Minor updates to guidance on how to respond to an incident of sharing nudes and semi-nudes, based on Government guidance updated March 2024
- Added 7.8: Intimacy In Performance
- Added references to Physical Contact Policy

- Updated Designated Persons list

Previous updates (June 2023):

- 'Peer-on-peer abuse' is now referred to as 'child-on-child abuse', in line with government guidance
- Updates to Designated Persons (Versions 2 & 3)
- Clarification to 3.0.2 that anyone can make a referral to the police or social services.
- Minor updates to roles (6.1.3–4)
- Added 6.2.3: Trustees' awareness of Charity Commission guidance.
- Added 6.7.3: Adult participants' safeguarding commitments.
- Updated wording in Training (7.1.4) to reflect updated guidance about Ongoing Vigilance in KCSIE 2023.
- Update to supervision (7.2.2) to reflect that the Head of Pastoral Care oversees the provision of boarding supervision.
- Update to recording & reporting concerns & observations that aren't immediate safeguarding concerns (7.3.2) to clarify that these are sometimes referred to as 'low-level concerns' or 'nagging doubts' and to expand upon the training that is given to staff around these concerns.
- Revision to Appendix A of the Child-on-Child Abuse section, to include reference to to the Review of Sexual Abuse in Schools and Colleges, and additional advice about children with neurodiversity or gender identity in this context.
- Addition to Appendix B of the Equality Act 2010 and the Human Rights Act 1998 as important legislation in respect of safeguarding as set out in KCSIE 2022.