SAFEGUARDING POLICY

DESIGNATED PERSONS

Designated Safeguarding Lead	**Benjamin Sheen**	dsl@nymt.org.uk	**07591 958765**
Deputy Designated Safeguarding Lead	Benny Simpson	benny@nymt.org.uk	
Deputy Designated Safeguarding Lead	Emma Wright	emma.wright@nymt.org.uk	

OTHER KEY CONTACTS

Paul Munden	Chair of the Board of Trustees	paul@mundens.co.uk
Adrian Packer	CEO	adrian@nymt.org.uk
Chris Cuming	Artistic Director	chris@nymt.org.uk

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.

Participant refers to a person of any age who is receiving tuition 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.

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[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 members of vulnerable groups working with NYMT whatever their culture, disability, gender, language, racial origin, religious beliefs and/or sexual orientation 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;

- 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 and Child Protection 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 his absence).

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

3.0.3 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.**

3.0.4 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 or is at risk of harm a referral should be made to children's social care and/or the police immediately. Contact should be made through the Local Area Designated Office (LADO). Anyone can make a referral. Where referrals are not made by the DSL, the DSL should be informed as soon as possible that a referral has been made.

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; or

- behaved towards a child or children in a way that indicates he or she would pose a risk of harm if he or she works regularly or closely with children.

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 LADO will be involved in the management and oversight of allegations made against people that work with children, and will be notified of such an allegation within one working day of the allegation being made and appearing to meet the criteria above.

3.2.4 **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.

3.2.5 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 3.2.4.

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.

3.3 Record Keeping & Retention

3.3.1 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'.

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

- a permanent record of historical Safeguarding policies and procedures;
- child protection files indefinitely, if a referral has been made or if there is a risk of future claims;
- records of unfounded allegations against members of staff at least until the staff member's retirement age or 10 years, whichever is longer; and
- records of low-level concerns about staff for at least 3 years, and longer if a review justifies longer term retention.

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:

- www.gov.uk/whistleblowing

- The NSPCC whistleblowing helpline: 0800 028 0285 (8:00 AM to 8:00 PM, Monday to Friday) and help@nspcc.org.uk

- The Charity Commission: whistleblowing@charitycommission.gsi.gov.uk

4.4 There will be no retribution for making a report, provided that 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 and the procedures for child protection;

- 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);

  o KCSIE Annex B (Lead boarding/pastoral staff);

- Whistleblowing policy (contained within this policy);

- Missing Child Policy;

- First Aid & Medical Policy;

- Digital Safety 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 concerts and allegations about staff.

6.1.4 The CEO in turn delegates lead responsibility for safeguarding and child protection to the DSL, and the day-to-day management of pastoral care to the Heads 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 are mindful of the Charity Commission's Safeguarding expectations.

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 Heads of Pastoral Care 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)

6.4.1 The DSL should:

- Refer all cases of suspected abuse, within 24 hours or one working day, to the Local Authority Designated Officer (LADO) and:

  o the Chair of the Board (all cases which concern a staff member); and

  o Disclosure and Barring Service (cases where a person is dismissed or left due to risk/harm to a child); and

  o the police (cases where a crime may have been committed);

- 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;

- 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 Head of Pastoral Care

6.5.1   In the absence of the DSL, the Head of Pastoral Care as the Designated Person(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 on the Personal Information Forms for each activity to make known any and 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 Course 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 Staff working directly with NYMT participants or resident in the same building are subject to an Enhanced DBS check.

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 and Child Protection 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.

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   Feedback is sourced annually and anonymously from staff to appraise their view on the quality and appropriateness of safeguarding training provided to them and the practices employed by NYMT.

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 gender and 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   Children that are identified as being 'at risk' might include: those who have a history of self-harm, those suffering from depression, children experiencing bullying and those coping with chronic medical conditions. Information on children at risk may be shared with members of pastoral staff in order to provide the best level of supervision and care.

7.2.7   Any adult visitor to an NYMT activity will be 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.

7.5 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 pupils 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 will have 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 will be arranged for each participant cohort for each period of residential stay with NYMT and any deficiencies will be remedied without delay.

7.6.5 Fire safety equipment will only be operated 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.

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

Abuse is a form of maltreatment of a child. Somebody 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, more rarely, by others (e.g. via the internet). They may be abused by an adult or adults or another child or children.

Abuse, neglect and safeguarding issues are rarely standalone events that can be covered by one definition or label and in most cases, multiple issues will overlap with one another.

Physical abuse: a form of abuse which 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 induces, illness in a child.

Emotional abuse: the persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, 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 a child's developmental capability as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to 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 and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Neglect: 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. 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 or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate care- givers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Child-on-child abuse

Child-on-child abuse is any form of physical, sexual, emotional and financial abuse, or coercive control, exercised between children and within children's relationships. Child-on-child abuse can take various forms, including: serious bullying (including cyber-bullying), relationship abuse, domestic violence, child sexual exploitation, youth and serious youth violence, harmful sexual behaviour, sexual abuse, and/or gender-based violence.

The Review of Sexual Abuse in Schools and Colleges in 2021 found that instances of sexual harassment and online sexual abuse are so common that some children see no point in reporting them. It recommends that schools and colleges act as though sexual harassment and online sexual abuse is happening, even when there are no specific reports.

Staff at NYMT are instructed to be alert for instances of abuse and not to dismiss anything as 'banter'. Staff should also be particularly vigilant for pupils who might struggle socially because of neurodiversity or gender identity making them more vulnerable to child-on-child abuse.

In the case of abuse by a participant, or group of participants, the key issues identifying the problem as abuse are:

- the frequency, nature and severity of the incidents;
- whether the victim was coerced by physical force, fear, or by a participant or group of participants significantly older than them or having power or authority over them;
- whether the incident involved a potentially criminal act, and whether if the same incident (or injury) had occurred to a member of staff or other adult, it would have been regarded as assault or otherwise actionable.

Where an allegation of abuse against one or more participants has been made or where you are concerned about child-on-child abuse, the child protection procedures set out in this policy should be followed and the DSL informed. The participant(s) accused of abuse and the victim of abuse will both be treated as at risk and a referral will be made to children's social care in respect of either pupil if that participant is suffering or is at risk of harm.

Sharing nudes and semi-nudes

'Sharing nudes and semi-nudes' refers to the sending or posting of nude or semi-nude images, videos or live streams by young people under the age of 18 online. This could be via social media, gaming platforms, chat apps or forums. It could also involve sharing between devices via services like Apple's AirDrop, which works offline.

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.
- <u>Never</u> 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.

- <u>Do not</u> delete the imagery or ask the child to delete it.

- <u>Do not</u> attempt to investigate the matter – this is the responsibility of the DSL.

- <u>Do not</u> share information about the incident with anyone other than the DSL.

- <u>Do</u> 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 of abuse include (but are not limited to):

- the child says they has been abused or asks a question or makes a comment which gives rise to that inference;

- there is no reasonable or consistent explanation for a child's injury; the injury is unusual in kind or location; there have been a number of injuries; there is a pattern to the injuries;

- the child's behaviour stands out from the group as either being extreme model behaviour or extremely challenging behaviour; or there is a sudden or significant change in the child's behaviour;

- the child asks to drop activities with a particular Staff member and seems reluctant to discuss the reasons;

- the child appears neglected, e.g. dirty, hungry, inadequately clothed;

- the child is reluctant to go home, or has been openly rejected by his / her parents or carers;

- the child runs away or goes missing (see the separate Missing Child Policy);

- mental health issues.

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" (KCSIE) September 2023
- "What to do if you are worried a Child is being Abused" March 2015
- "Working Together to Safeguard Children" December 2023
- Boarding Schools National Minimum Standards
- Children Act 2004
- Equality Act 2010
- Human Rights Act 1998
- Independent Inquiry into Child Sexual Abuse (October 2022)
- Regulatory Reform (Fire Safety) Order 2005
- Review of sexual abuse in schools and colleges (June 2021)

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

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

APPENDIX C: POLICY UPDATES & REVIEW

This version dated 1 June 2024.

Date of next review: June 2025.

The following updates were made since the previous version:

- Minor updates to guidance on how to respond to an incident of sharing nudes and semi-nudes, based on Government guidance updated March 2024

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.

Previous updates (June 2022):

- Appendix A: updated section on Sexting (Sharing nudes and semi-nudes) to reflect updated guidance from the UK Council for Internet Safety.

- Revised 7.1.2: added clarification that staff residing in the same building are subject to DBS checks at the enhanced level.

- Revised 7.1.4: clarifying the nature and regularity of safeguarding training for staff

- Added 7.1.7: added new feedback process for safeguarding training and practices

- Added 7.2.8: induction for adult participants

Previous updates (June 2020):

- Minor updates to the Policy Statement (1)

- Change in layout of sections 2 and 3.

- Expansion of the procedure in the case of an allegation against a member of staff (3.2)

- Additional contacts added to the Whistleblowing policy (4.2)

- Revision to the structure of Safeguarding Measures (7) and the addition/clarification of policies on site security, fire safety, social media, remote learning, recording & reporting and peer-on-peer abuse.

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