March 2021



National Association of Teachers of Dancing

SAFEGUARDING

POLICY

March 2021

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Glossary of terms used in this document				
DSL - Designated Safeguarding Lead. DBS - Disclosure and Barring Service. LADO - Local Authority Designated Officer NATD - National Association of Teachers of Dancing.				
NSPCC - National Society for the Prevention of Cruelty to Children.				

Person in Charge - School Principal, Promoter, Proprietor, Person named as responsible in building(s) where Dance/Dancesport training or events take place

Child /children - person (s) under the age of eighteen years.

Adults at Risk - persons aged 18 or over whose physical or mental impairment or condition places them at risk of harm, exploitation or abuse.

This Safeguarding Policy should be read in conjunction with the current NATD Code of Practice.

Introduction

The National Association of Teachers of Dancing (NATD) has a "duty of care" to provide a safe environment and to promote the health and wellbeing of children under 18 years and adults at risk through any training and activities directly provided by the organisation. This policy gives an overview of safeguarding in the NATD. Recommended procedures are detailed in order to achieve the goals outlined in the policy.

Policy and procedures apply to member teachers whether self -employed sole traders or working for a large private multi venue school. They apply to helpers, students and parents who have a right to know and are reassured to know how safeguarding is addressed in dance schools.

Equal protection is for all children and adults at risk regardless of age, disability, gender, race, sexual orientation or identity or religious belief.

The links provided refer to the U.K. Where advice differs within the U.K. particular links are suggested.

1. Health and Safety

Any provider has a duty of care to ensure an environment is safe for people who attend or visit. Persons in charge are responsible for health and safety regardless of the setting; classroom, studio, hired premises etc. Any Risk Assessment must be up to date to include any new hazards and should take particular account of any users with disabilities who may attend. Any fire risk evacuation plan should also take account of this and provide:

- **Risk Assessment** which should be up to date. This is in addition to the venue information and should reflect dance related hazards such as slippy floors, suitable dancewear etc.
- Emergency First Aid Kit which should be regularly checked. A designated first aid person should be available for all classes. A register should be kept of accidents/injuries which must be signed by the parent/guardian as a record of the event. Some basic first aid training is strongly recommended; https://www.sja.org.uk/courses
 https://www.educare.co.uk/courses/first-aid-essentials
- **Health and Safety** policy to include a fire safety management policy and evacuation plan if more than five staff or volunteers are employed. Guidance is available https://www.gov.uk/workplace-fire-safety-your-responsibilities/fire-risk-assessments

 Parental Consent and Attendance Registers Ideally this should be updated annually and include two emergency contacts for each student, any medical concerns, and allergies. The information will need a parental/guardian signed consent form under the Data Protection Act 2018. Guidance is available https://learning.nspcc.org.uk/research-resources/templates/example-consent-form

2. Legal Requirements

All teachers must have Public Liability Insurance, minimum £10 million is recommended Persons in charge need to check that they are compliant with the following according to their situation.

> Health and Safety at Work Act 1974 The Regulatory reform(Fire safety) Order 2005 Occupiers' Liability Act 1957 Employers' Liability (Compulsory Insurance) Act 1969 Data Protection Act 2018/General Data Protection Regulation 2018

Appropriate music licenses

PPL/PRS are responsible for music licensing <u>https://pplprs.co.uk</u> Please note that NATD Set Syllabus music for Regulated Qualifications does not require a licence.

3. <u>Safeguarding Children under 18 years</u>

The NATD follows the statutory guidance contained in

Department for Education (DfE) (2018) <u>Working together to safeguard children: a guide to inter-</u> agency working to safeguard and promote the welfare of children (PDF

Also the guidance (DfE) (2020)

Keeping children safe in out-of-school settings - GOV.UK (www.gov.uk)

See also

N Ireland https://www.health-ni.gov.uk/publications/co-operating-safeguard-children-and-young-peoplenorthern-ireland

Wales https://gov.wales/safeguarding-guidance

Scotland

https://www.gov.scot/policies/girfec/#:~:text=Getting%20it%20right%20for%20every%20child%20% 28GIRFEC%29%20supports,so%20that%20they%20can%20realise%20their%20full%20potential.

Worldwide UNICEF summary document: <u>UNCRC_summary-1_1</u>

3a <u>Procedures for Promoting Good Practice</u>

One of the most important factors in dealing with abuse is to use correct judgement about what action to take. A teacher, coach, official, or volunteer, is an important link in identifying cases where children/adults at risk may require protection.

The following examples of good practice are recommended to provide a positive culture and caring climate within Dance/Dancesport. The list is not definitive but serves to provide a basic guide.

- Always work in an open environment where at least one other adult is present (avoiding private or unobservable situations), if necessary involve parents to meet this requirement.
- Treat all equally, with respect and dignity.
- Always prioritise the welfare of children's/adults at risk .
- Always maintain a safe and appropriate physical and psychological distance. Refrain from welcoming/farewell embraces.
- Tell anyone, before a move with touching positions, exactly what the intention is, and ensure they agree and do not show discomfort.
- After demonstration (tactile) release hold immediately.
- Obtain permission (written is desirable to avoid future dispute) of parents/carers to hold, guide and direct children (particularly in Dancesport /Gymnastic Dance).
- Obtain mutual parental permission (written is desirable to avoid future dispute) for children's partner contact (particularly in Dancesport).
- When coaching/teaching a couple of children as partners or in a duet, ensure that both receive "equal" amounts of attention.
- Be aware of any discomfort from "hold" (particularly in Dancesport), any embarrassment at hold or certain positions (particularly in Dancesport).
 - Any reluctance to join/touch or any bullying/aggression on the part of one partner, any inappropriate/improper words/actions by either/both partners, any dominating/oppressive /bullying behaviour by either partner.
 - o Be alert to any whispered comments and take sensible and appropriate action where necessary.

- Praise and positive encouragement with constructive feedback is always a more successful teaching tool than negative attitude/comments.
- Always invite full involvement and open comment by anyone in any aspect of training/coaching. Parents should also be similarly involved. This openness can positively affect method(s) of training/coaching.
- Avoid excessive training/competitions. Be aware of developmental needs/capacity of children. Recognise any signs of young people's unwillingness to cooperate in training/routines.
- Note any irregularity of attendance, late cancellations, regular late coming. If late cancellations and the like, note whether telephone call is from parent or child and whether there is any unease when giving the reason. Upon resumption of classes informally ascertain reasons for absence, etc.
- If pupils are "dropped off" and/or "not picked up" punctually, try to ensure young persons are not left alone, or exposed to intimate situations with you or other person(s).
- Note in an appropriate register and report any observed injuries, bruises, scratches or unusual behaviour.
- Never allow any allegations to go unrecorded and not acted upon.
- Avoid taking young people to your home.
- Never swear, use rough language, or make any comments with sexual overtone/implications and never allow children to use inappropriate language unchallenged.
- Avoid doing things of a personal nature that young children can do for themselves e.g. tying shoes, buttoning coats etc.
- Where possible, young people should have separate changing facilities from adults. These should be gender- based and the young persons should be supervised by their parents/guardians.
- Request written parental permission if teachers/officers/officials etc. are required to transport young people in their cars. Appropriate insurance cover must be confirmed.
- If pupils of both sexes are taken away on trips, ensure that male and female teacher/coach/official/helpers accompany them. Written consent of parent

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is essential beforehand. An appropriate balance of chaperones is required when young people are away from their parents.

- If trips require overnight accommodation, adults should not enter young people's rooms or invite them into theirs except in cases of emergency.
- Never share rooms with young people e.g. overnight accommodation.
- Promote fair play and enjoyment in all aspects of Dance/Dancesport.
- Never discuss such matters as a disagreement/break with other teachers/coaches, adjudicators or examiners, as this is a breach of confidentiality.
- Adjudicators should behave in such a manner as to ensure that, apart from formal courtesies, they are and are seen to be strictly neutral.
- Role model smoking and drinking of alcohol should be avoided in children's company.

All the above points place a corresponding reciprocal/joint responsibility on "parents" and volunteer helpers not to abuse their relationships with children/ adults at risk. They also may become aware of situations of possible abuse, which have occurred, are occurring or may occur.

Any concerns should be communicated to the Person in Charge and (if the alleged offender is an NATD member) to the NATD DSL <u>info@natd.org.uk</u>

All persons in charge should:

- Have a written Safeguarding Policy (NATD members may refer to this NATD Policy).
- Be aware of the specific safeguarding issues that apply to children and adults at risk.
- Ensure staff and volunteers are aware of what to do about a colleague who may pose a risk of harm to children/ adults at risk.
- Have contact details for the NATD Safeguarding Lea- info@natd.org.uk
- Have contact details for the local children's social care, Initial Point of Contact (IPAC) team and local safeguarding children's partnership.
- NSPCC 808 800 5000/ police 101/ police emergency 999.

3b <u>Recognition of Poor Practice & Abuse</u>

Although not everyone will have expertise at recognising situations where abuse may occur, all young people, whatever their age, culture, disability, gender, racial origin, religious belief and/or their sexual identity, have the right to protection from abuse.

It is the responsibility of everyone to report any concerns, including suspicions of abuse, bullying, extremism or radicalism which may be occurring outside the environment in which there is contact with young person(s) as well as those, which may be related to Dance/Dancesport.

All allegations of suspicious behaviour or poor practice should be taken seriously.

Poor Practice

Poor practice is any behaviour, which contravenes the NATD Code of Practice or the NATD Safeguarding Policy.

(NATD recognises that abuse of young people, in any form, should not be tolerated and will act if any abuse is detected and communicated to the DSL).

Some General Indications of Abuse

- Unexplained or suspicious bruises, cuts or burns, particularly if situated on a part of the body not normally prone to such injury.
- An injury for which the explanation seems inconsistent.
- The child/young person describes what appears to be an abusive act involving him/her.
- Someone else (any age) expresses concern about the welfare of another young person.
- Unexplained changes in behaviour.
- Inappropriate sexual awareness.
- Engaging in sexually explicit behaviour.
- Distrust of adults, especially those with whom relationship would usually be close.
- Difficulty in making friends.
- Inability to mix with other friends.
- Showing variations in eating patterns, including overeating or loss of appetite.
- Loss of weight without reason.
- Pattern of unkempt/dirty/dishevelled appearance.

Abuse by Peer or Adult in Any Form

All adults connected with young people must be aware that abuse can be verbal, psychological, physical aggression or sexual by an individual or group against another individual or group.

Targets of abuse are sometimes singled out because of physical characteristics- weight, size, race, creed or culture.

Abuse mostly occurs where there is inadequate supervision. A good practice is never to leave young people alone in the coaching area/studio, changing rooms etc. except for very short periods.

All adults connected with young people in Dance/Dancesport should be aware of sophisticated forms of abuse such as:

- Parental abuse, in wish for success.
- Abuse in training/coaching, in drive for success.
- Intimidation by one competitor or pupil against another.
- Social media bullying.

Abuse perpetrators come from all walks of life; they abuse for all sorts of reasons and may have been abused. Typically, perpetrators can have low self-esteem, be excitable, aggressive and jealous. Crucially, they have learned how to gain power over others.

NATD Abuse can include:

- Physical: e.g. hitting, kicking and theft.
- Verbal: e.g. name-calling, constant teasing, sarcasm, racist or homophobic taunts, threats, graffiti or gestures.
- Emotional: e.g. tormenting, ridiculing, humiliating and ignoring. 2
- Sexual: e.g., unwanted physical contact or abusive comments.
- Via social media-sexting etc.

The damage inflicted by abuse can be frequently underestimated. It can cause considerable distress, to the extent that it affects health and development or, at the extreme, causes significant harm (including self-harm).

There are signs that may indicate when someone is being abused:

- Behavioural changes such as reduced concentration and/or becoming withdrawn, clingy, depressed, tearful, emotionally up and down, reluctance to go to training sessions/lessons or competitions etc.
- A drop off in performance.
- Physical signs such as stomach aches, headaches, difficulty in sleeping, bed-wetting, scratching and bruising, damaged clothes and bingeing for example on food, cigarettes or alcohol.
- A shortage of money or frequent loss of possessions.

3c Action to take if abuse is suspected

If abuse by an adult/other person is suspected this should be reported if possible to the safeguarding lead in the dance school or to the NATD DSL <u>info@natd.org.uk</u> who will contact the appropriate local authorities.

Concerns can be reported to local children's social care, Initial Point of Contact (IPOC) team, local safeguarding children's partnership or police If the child is in immediate danger you should stay with the child until they can be transferred to safe care where practical. All out-of-school settings for children should have rigorously enforced anti-abuse strategies.

Take all signs of abuse very seriously. In particular:

- Encourage children to speak and share their concerns.
- Help the victim to speak out and tell the person in charge or someone in authority.
- Create an open environment.
- Investigate all allegations and take action to ensure the victim is safe. Speak with the victim and the abuser separately.
- Reassure the victim that you can be trusted and will help them, although you cannot promise to tell no one else.
- Keep a record of what is said (what happened, by whom, when etc.) details of the child and contact details for parents/carers.

Confidentiality/Whistleblowing

All staff, volunteers and parents should feel able to raise concerns about poor/unsafe

practice. Information should be handled and disseminated on a need to know basis only. This may include the following people:

- The person in charge.
- The parents/carers of the child/young person who is alleged to have been abused.
- The child/young person making the allegation.
- Social Services*/ IPC.
- The NATD DSL (if involved).
- The alleged abuser (and parents/carers if the alleged abuser is a child).

* Social Services/LADO will advise who should approach the alleged abuser. Information must be stored in a secure place with access limited to designated people in line with the data protection laws (e.g. the information must be accurate, regularly updated, relevant and secure). The NATD Head Office will be the storage centre for all documentation.

Support to Deal with the Aftermath

Consideration should be given about what support may be appropriate to children, parents and members of staff. Use of Helplines, support groups and open meetings will maintain an open culture and help the healing process.

The NSPCC/Sport England is a useful source. <u>www.thecpsu.org.uk</u> Consideration should be given about what support may be appropriate to the alleged perpetrator of the abuse.

3d Action to take if there are concerns regarding an NATD member

Any suspicion that a child has been abused by an NATD member should be reported to the NATD Safeguarding Officer <u>info@natd.org.uk</u>

If following investigation, the concerns are substantiated a safeguarding referral may be made to the appropriate authority.

If the NATD member is the subject of an allegation which has been reported to the local authority, NATD will work with the appropriate authorities in further investigation. It may be deemed necessary to convene a meeting of the "Emergency Committee" within one month of notification to discuss possible action.

Internal Enquiries and Suspension

The NATD DSL and the Council of Management will assess individual cases under misconduct/disciplinary procedures as to whether consideration should be given to withdrawing Membership of the NATD from the alleged abuser. This may be a difficult decision, particularly where there is insufficient evidence to substantiate any action by the police. In such cases, the NATD Council Members must reach a decision based on the available information that could suggest on balance of probability. *The welfare of the child/person at risk should always remain paramount.*

3e Allegations of Previous Abuse

Allegations of abuse may be made some time after the event (e.g. by an adult who was abused as a child by a member of staff who is currently working with children). Where such an allegation is made, it should be reported to the Social Services or the police (and to NATD DSL if the alleged abuser is an NATD member). This is because other children, either within or outside Dance/Dancesport, may be at risk from this person. Anyone who has a previous criminal conviction for offences related to abuse is automatically excluded from working with children.

4. Safeguarding Children – General Principles

Designated Officer

NATD has a Designated Safeguarding Lead(DSL) to handle safeguarding issues. It is the responsibility of the DSL to inform the Social Services (IPOC or LADO) without delay of any relevant concerns. If the person in charge is not available or the concern is about the person in charge, the person with concerns or the person being informed of the concerns should immediately contact the Social Services or the police. In these circumstances, you do not have to give your name, but it is helpful if you can. The Social Services, together with the person in charge where appropriate, will decide how and when parents or carers will be informed and how to progress the matter.

The designated DS must keep up to date with legislation and developments. Everyone has a responsibility to report suspected safeguarding abuse however it is not the responsibility of anyone working under the auspices of Dance/Dancesport in a paid or voluntary capacity, or of those working in affiliated organisations, to decide whether child abuse is taking place or has taken place.

In those cases, in which the alleged abuser is not an NATD member, the NATD DSL will support the member to whom the allegations have been made, if so requested. At the same time ensuring that proper procedures have been followed and that the appropriate agencies have been contacted.

Records and Information

Information passed to the Social Services, police, NSPCC or NATD must be as helpful as possible. Hence, it is necessary to make a detailed record at the time of the disclosure/concern.

Information should include the following:

- How the information came to light.
- The nature of the allegation.
- A description of any visible bruising or other injuries.
- The child's account, if it can be given, of what has happened and how any bruising or injuries occurred. (Do not probe for any more information than is offered).
- The demeanour of the child, whether distressed, unusually quiet or any other striking behaviour.
- Witnesses to the incident(s).
- Any times, dates or other relevant information.
- A clear distinction between what is fact, opinion or hearsay.

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Date, time and sign (with status/position) any notes/records made. Reporting the matter to police or Social Services should not be delayed by attempts to obtain more information. Wherever possible, referrals to the social services department should be confirmed in writing within 24 hours. A record should also be made of the name, department and contact details of the social services member of staff or police officer to whom the concerns were passed, together with the time, and date of call, in case any follow-up is needed.

A copy of all relevant information should be retained.

All information is liable for future disclosure in the event of any civil or criminal proceedings, and therefore should be accurately and diligently recorded and stored securely.

5. <u>Responding to Disclosures, Suspicions and Allegations</u>

Although the majority of child abuse allegations are genuine, there are occasions when false allegations occur. However, if a young person says or indicates that they are being abused, or information is obtained which raises concern that a young person may be experiencing abuse, the information should be taken seriously, and urgent action taken in line with these procedures.

Responding to Disclosure

The person receiving information concerning disclosure should:

- React calmly and reassure the child.
- Tell the child they are not to blame.
- Take what the child says seriously, recognising the difficulties inherent in interpreting what is said by a child with speech difficulties and/or differences in language.
- Keep questions to the absolute minimum to ensure an accurate understanding of what has been said.
- Try not to ask leading questions (i.e., those which suggest the answer). Let the child tell you what has happened in their own words.
- Try not to take on the role of the police and/or Social Services. If from an initial complaint, there is reason to think that abuse has occurred, report it immediately to those authorities that have trained officers to deal with the matter in accordance with the law. It is important that possible future civil or criminal proceedings are not prejudiced by virtue of inappropriate questioning of the victim or suspect.
- Reassure the child but do not make promises of confidentiality, which might not be feasible in the light of subsequent developments.
- Make a full record of what has been said, heard and/or seen as soon as possible. This must be signed (status/position), dated and timed.

N.B It may not be that all young people or people with disabilities are able to express themselves verbally. Communication difficulties may mean that it is hard for their complaint to be understood. Sometimes it is difficult to distinguish the signs of abuse from the symptoms of some types of disabilities or conditions. However, where there are concerns about the safety of a young person or adult with disabilities record what has been observed in detail and seek advice from social services.

The person receiving the disclosure should not:

- Panic
- Allow their shock or distaste to show
- Probe for more information than is offered
- Speculate or make assumptions
- Make negative comments about the alleged abuser
- Approach the alleged abuser
- Make promises or agree to keep secrets

Sharing concerns with Parents

There is always a commitment to work in partnership with parents and carers where there are concerns about their children. Therefore, in most situations, it would be important to talk to parents or carers to help clarify any initial concerns. For example, if a child seems withdrawn, there may be a reasonable explanation. They may have experienced an upset in the family such as a parental separation, divorce or bereavement.

When it is Not Appropriate to Share concerns with Parents

There are circumstances in which a young person might be placed at even greater risk if concerns are shared (e.g., where a parent/carer may be responsible for the abuse or not able to respond to the situation appropriately). In these situations, or where concerns still exist, any suspicion, allegation or incident of abuse must be reported to the person in charge as soon as possible and recorded.

Allegations Against Staff or Volunteers

Staff and Volunteers includes anyone working with children in a paid or voluntary capacity. Child abuse can and does occur outside the family setting. Although it is a sensitive and difficult issue, child abuse can occur within other settings (e.g. sport or other social activities). Recent research shows that abuse that takes place within a public setting is rarely a one-off event. It is crucial that those involved in Dance/Dancesport are aware of this possibility, that all allegations are taken seriously, and appropriate action taken. It is important that any concerns for the welfare of the child, arising from abuse or harassment by a member of staff or volunteer, should be reported immediately.

There may be circumstances where allegations are about poor practice rather than abuse but those responsible should always consult senior colleagues and gain advice from social services, police or the NSPCC if there is any doubt. This is because it may be just one of a series of other instances which together cause concern.

Support for the Reporter of Suspected Abuse

It is acknowledged that feelings generated by the discovery that a teacher, coach, official, member of staff or volunteer is, or may be abusing a child, will raise concerns amongst other staff or volunteers. This includes the difficulties in reporting such matters.

NATD assures all members, volunteers and people working with young persons that it will fully support anyone who, in good faith (without malicious intent), reports their concern about a colleague's practice or the possibility that a child may be being abused.

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6. **<u>Recruitment, Employment and Deployment of Staff & Volunteers</u>**

All reasonable steps must be taken to ensure unsuitable people are prevented from working with children and adults at risk. The following procedures are a guideline to members when employing staff. These procedures should be adopted whether staff are paid, unpaid, full or part-time.

Applications

All applicants whether for paid or voluntary, full or part-time positions should complete an application form, which provides the following information:

- Name, address and National Insurance Number (to confirm identity and right to work).
- Relevant experience, qualifications and training undertaken.
- Listing of past employment (to confirm experience and identify any gaps).
- Evidence of a current DBS check.
- The names of at least two people (not relatives) willing to provide written references that comment on the applicant's previous experience of, and suitability for, working with children and young people (previous employer).
- The applicant's consent to abide by NATD's Safeguardin Policy and Code of Practice

The form should also state that failure to disclose information or subsequent failure to conform to the Code of Practice could result in disciplinary action and possible loss of employment.

Regulated Activity with Children

The new definition of Regulated Activity with children combines the old definition which was focussed on the type of activity and the frequency or intensity of the contact, with a further requirement that the individual conducting the activity must be unsupervised. An individual is defined as being in Regulated Activity if the following requirements are met:

The Activity involves teaching, training or instruction of children <u>AND</u>

Happens frequently (once a week or more often)

Happens intensively (on 4 or more days in a 30-day period, or overnight) <u>AND</u> The individual carrying out the activity of teaching, training or instructing is unsupervised.

For NATD purposes supervised would indicate within eyesight and earshot of a supervisor.

7. NATD Events Involving Children

NATD have a moral and legal obligation to ensure that, when given responsibility for children all staff, chaperones, parents/legal guardians and volunteers accept their responsibilities to safeguard children from harm and abuse. This means to ensure that everyone follows procedures to protect children and report any concerns about their welfare to appropriate authorities.

We recognise that the "entertainment industry" can be a very "adult" environment and we expect that all staff, chaperones, parents/legal guardians, volunteers and anyone else who is in contact with children behave in an appropriate manner at all times and remember that "The Welfare of the Child is Paramount".

NATD will therefore:

- Work within the Children and Young Persons Act1963, Children's Act 1989 & 2004
- Work within The Children (Performances and Activities) (England) Regulations 2014
- A licence may be required for certain types of performance but where no payment is made there are some exemptions.
 For guidance Advice template (publishing.service.gov.uk)
- Establish and maintain an ethos where children feel welcome and familiar with their environment and are informed of personal (toilets, dressing rooms etc) and emergency arrangements (fire exits, meeting points etc) and any Health and Safety Procedures (dangerous equipment, First Aid etc).
- Children's changing areas should be separated from Adults.
- Children's changing areas should be separated by gender when 5 years and above.
- Inform each child who the appropriate person or people are to speak to if they have any questions, problems or concerns.
- Ensure that all children are treated with respect and dignity and are treated as individuals and offered equality of opportunities.
- Always work in an open environment (e.g. avoiding private or unobserved situations and unnecessary physical contact with children) and involve/allow parents/chaperones wherever possible, to take responsibility for the child/children they are responsible for. (Parents/carers must only have responsibility for their own child) recognising the individual needs of the child. e.g. recognising when a child may be tired and may need a break.
- Ensure that children are supervised appropriately.
- Ensure that all chaperones are registered with the local authority in which they reside and have an enhanced DBS check.
- Ensure any adult (other than the child's parent) in close supervisory contact with a child is DBS checked.

8. <u>Photos</u>

The NATD may wish to use photos from various NATD events for general advertising. This is widely advertised at the event and in any programmes associated with the event. It is the responsibility of a parent/carer/teacher to inform NATD if this is not acceptable in regard to a particular participant. Individual dance schools should obtain written consent for the use of any photographs in relation to publications, website, social media. This should be updated annually.

9. <u>Online safety</u>

Persons in charge should have a written online safety policy.

- It is essential that children are safeguarded from potentially harmful online material and inappropriate conduct or contact.
- Staff behaviour should refer to the acceptable use of technologies.
- Staff should contact a parent /guardian rather than a young student.
- All contact should be professional and not breach any prevention of abuse guidance in this document.
- All information regarding young people is subject to GDPR and the Data Protection Act 2018.
- Since 2020, NATD now offer online assessment. Teachers and Examiners must refer to the latest guidance which include the retention of any video footage, sharing of links etc. <u>info@natd.org.uk</u>

10. <u>Safeguarding Adults at Risk</u>

"Safeguarding means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adults wellbeing is promoted, where appropriate, having regard for their views, wishes, feelings and beliefs in deciding on any action"

Department for Health Care and Support Statutory guidance, issued under the Care Act 2014.

Adults' mental capacity to take responsibility for their lives must be considered and many choose not to disclose care or support needs. The Care Act 2014 states there is a duty when an adult;

- (a) has needs for care and support (whether or not the local authority is meeting any of those needs).
- (b) is experiencing, or is at risk of, abuse or neglect.
- (c) as a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it.

If we feel that someone is at risk or experiencing harm it could be that they are subject to:

- Physical abuse
- Psychological abuse
- Sexual abuse
- Financial or material abuse
- Domestic abuse
- Modern slavery
- Discriminatory abuse
- Organisational abuse
- Neglect and acts of omission
- Self neglect

It may be possible to visibly identify this harm; signs, symptoms and indicators of abuse and neglect for example poor hygiene, repeated unexplained injury or a sudden change in behaviour, mood or ability to socialise.

Disclosure can be from that individual or another individual telling us about something that has happened to them.

Safeguarding Adults referral and the Mental Capacity Act 2005. The law in the UK says that capacitated adults have a right to choose how to live their lives and to choose if support is needed and what that support should look like. Concerned persons must ASK before taking action. Consent is needed make a referral. There are many barriers to an individual asking for help; confusion, shame, embarrassment, strong feelings toward the person who has harmed them or struggling to realise that they are experiencing abuse.

Sometimes an adult may not be able to consent to support. This may be because they do not have capacity to do so. For example it could be that a brain injury, severe learning disability or dementia may leave them unable to make a decision about their safety for themselves. If this is the case ACT.

If you become aware of harm and abuse contact your local authority adult safeguarding team for advice or to share a concern. GDPR is not a barrier to sharing safeguarding concerns with local authorities or the police.

Useful Links Safeguarding

NATD Child Protection Officer info@natd.org.uk Government Disclosure and Barring Service www.gov.uk/disclosurebarring-service-check Dept for Education https://www.gov.uk/government/collections/keeping-children-safe-in-out-of-school-settings NSPCC/Sport England Child Protection Unit www.thecpsu.org.uk NSPCC <u>NSPCC safeguarding standards and guidance (England)</u> Consent <u>https://learning.nspcc.org.uk/research-resources/templates/example-consent-form</u> Government statutory guidance <u>Working together to safeguard children - GOV.UK (www.gov.uk)</u> Regulated Activity guidance <u>DBS guidance leaflets - GOV.UK (www.gov.uk)</u> Local authority website search <u>Find your local council - GOV.UK (www.gov.uk)</u>

Emergency First Aid

https://www.sja.org.uk/courses https://www.educare.co.uk/courses/first-aid-essentials

Fire safety

https://www.gov.uk/workplace-fire-safety-your-responsibilities/fire-risk-assessments

Health and Safety Risk assessment

Prepare a health and safety policy - HSE

CODE FOR GOOD PRACTICE

It is a condition of NATD membership that this code of practice is implemented in conjunction with the NATD Safeguarding Policy

ALL NATD active members working with children under 18 years of age and/or vulnerable adults should have a DBS check in place, renewable every 3 years.

This code of good practice is the policy of the NATD to safeguard the welfare of **ALL** members and their pupils by protecting them from abuse, thereby helping to ensure compliance will current safeguarding legislation.

Teachers need to check the following before commencing a class or examination session

1.	Ventilation	2.	Sanitary and hygiene facilities
4.	Condition of all equipment	5.	Lighting
7	Desitioning of electrical load	~ 0	Condition of floors and sosting

11.

Temperature
 Fire Exits

7. Positioning of electrical leads 8.

Attendance register

10.

Condition of floors and seating Visibility of fire extinguishers 9. Accident Book

12. First Aid Kit

NATD CODE OF BEHAVIOUR – PROMOTING GOOD PRACTICE				
DO'S	DO NOTS			
TREAT all (especially young) people equally, with respect and dignity	LET suspicion, disclosure or allegation of abuse go unrecorded or unreported			
ALWAYS work in an open environment where at least one other adult is present (avoiding private or unobservable situations)	PERMIT any abusive peer behaviour (e.g., ridiculing, bullying, misuse of social media)			
PROVIDE an example you wish others to follow.	HAVE any inappropriate physical or verbal contact with others			
RESPECT a young person's right to personal privacy	SHOW favouritism to any individual			
AVOID situations that compromise your relationship with people of all ages	JUMP to conclusions about others without checking facts			
REMEMBER that someone else might misinterpret your actions however well intentioned.	MAKE suggestive remarks or gestures, even in fun.			
TELL students, before any movement with touching positions, exactly what the intention is and ensure they agree and do not show discomfort	ALLOW yourself to be drawn into inappropriate attention seeking behaviour such as tantrums or crushes			
PROVIDE access for all (especially children) to talk about any concerns they may have	ALLOW anyone to use inappropriate language unchallenged			
RECOGNISE that caution is required when dealing with sensitive issues such as bullying or abuse	PERMIT smoking in any dance area.			
RECORD any accident/injury/unusual incident and any treatment given in an appropriate register	TEACH beyond the mental and physical capabilities of any pupil			
DO NOT IGNORE THIS GUIDANCE				

DO NOT IGNORE THIS GUIDANCE FOLLOWING THE NATD CODE WILL SAFEGUARD BOTH YOU AND YOUR STUDENTS

PROMOTING PROFESSIONAL GOOD PRACTICE

Respect another teachers' business. Do not directly contact individuals with a view to "poaching" students.

Do not use choreography created by another teacher without their permission

Avoid establishing a dance school close to an existing NATD school

Any business promotion should not be derogatory about another teacher/school. This could be illegal

This template is downloadable for personalisation in Word format on the portal <u>Home | NATD</u> "Teachers"

Safeguarding children Policy Template for NATD member teachers and their schools

This template covers the essential information required in a child protection policy, however each individual organisation will have additional requirements which will need to be incorporated and each individual organisation retains responsibility for ensuring their policy is fit for purpose and that it is implemented and followed effectively.

At [organisation name] we recognise that the welfare of children is of paramount importance. We have a responsibility to protect and safeguard the welfare of all children and young people we work with and have an explicit duty to do so under the Children Act 1989 and 2004 and the Education Act 2002.

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

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

All staff and volunteers have a strict duty never to subject a child to any form of harm or abuse. Failure to adhere to these procedures will be treated as gross misconduct. Children and their parents/ carers who attend [insert organisation name] may view our policy where appropriate and a copy will always be kept [insert location].

Designated safeguarding lead:

The designated safeguarding person (DSP) within our organisation is [insert name] As safeguarding lead they have completed additional training to fulfil this role:

[Examples of appropriate additional training could be: safeguarding children training, managing disclosure training, designated safeguarding person training. This is about training you have received in safeguarding not training to dance or teach.]

- [insert training title and date]
- [insert training title and date]

The Designated Safeguarding Person will advise members of staff and visitors to [organisation name] on best practice and expectations. They will be responsible for the monitoring and recording of any safeguarding concerns and for ensuring that all concerns are shared with the appropriate statutory authorities.

All staff and volunteers at [insert organisation name] should be made aware of this policy and should be able to demonstrate their roles and responsibilities for safeguarding and promoting the welfare of children and young people, including how to raise concerns with both children's social care and the police. Staff and volunteers shall be made aware of this through [outline your process for making staff aware of this policy and its contents for example team meetings, training sessions, briefings.]

Overview of responsibilities:

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

It is the responsibility of all staff and volunteers at [insert organisation name] to take steps to protect children, to keep them safe from hazards and to take appropriate action in the event of an accident.

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

All staff working at [insert organisation name] who have contact with children and young people are required to hold a valid, clear DBS check.

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

Protecting children from maltreatment, preventing impairment of a child's health or development, ensuring that children are growing up with the provision of safe and effective care and taking action to ensure that children have the best life chances. At [insert organisation name] we will do this by:

[You can write here whatever you feel is most applicable to your organisation and supports the statement above, examples could be]

- Identifying and responding to concerns about a child or young person
- Providing a safe and happy dance environment
- Supporting development through dance in a way that fosters a sense of belonging / sense of self/ sense of community/ sense of independence
- Supporting young people to communicate freely with us, supporting their communication methods, providing time and space to talk
- Fostering an environment of trust and building appropriate professional relationships

Consent and information sharing:

Issues of consent are essential to effective safeguarding practice. Additional consent must be sought for any activity that is out of the usual parameters of our work. Basic consents for day to day activities will be sought through enrolment process, (Note: This should include for example photo consent, consent for performances), and appropriate organisational guidance shall be provided to ensure those consenting have clear and transparent information on what they are consenting to.

Significant harm is no exception to this. Before making a referral to Children's Social Care parents or carers must be informed that you are doing so, including the reasons why and must be asked for consent to do this. It should be noted however that in cases where parents, carers or children do not agree to information being shared you are still able to refer to Children's Social Care without consent but it is important to explain clearly to social care why consent cannot be established and to make a record of this.

Instances where you may not wish to seek consent are where:

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

Safeguarding

It is often necessary to share information to provide support and prevent impairment or to protect a child from harm. Decisions to share will be appropriate, necessary and proportionate. You must record your decision and the reasons for it, whether or not you choose to share information. If you decide to share you should record what you shared and who you shared with.

Child protection:

Is part of safeguarding children and promoting welfare. It refers to activity that is undertaken to protect specific children who are suffering or likely to suffer significant harm. This is about abuse and maltreatment of a child. Someone may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them, or by others (for example over the internet.) They may be abused by an adult or adults or another child/ children. Abuse may be physical, emotional, sexual, neglectful or multiple types of abuse. Please see appendix A for definitions of types of abuse.

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

No professional should assume that another will pass on information about the safety of a child. If a professional has concerns about a child's welfare and believe they are or are likely to suffer significant harm they have a responsibility to inform Children's social care.

Seeking medical attention:

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

Nothing should be allowed to delay urgent medical treatment.

Referring a concern and your DSP:

Our Designated safeguarding person will act on behalf of [insert organisation name] in referring concerns or allegations of harm to Children's social care or the police as appropriate. If the designated safeguarding lead is in any doubt information should be shared with children's social care for a second opinion. It is not the role of the DSP to investigate only to collate information, clarify details of the concern and facilitate information sharing. In the absence of the DSP the individual who has the concern is responsible for contacting children's social care and the information should be shared with the DSP retrospectively.

The contact number for children' social care is.....

Protection of children:

At [organisation name] we will make every effort to protect children from harm when they are visiting our setting/ attending our classes. We will do this through: [This needs to be specific to your setting, below are some example statements that may help]

- Appropriate recruitment and selection procedures
- Provision of safeguarding training for all staff and volunteers
- Ensuring all staff and volunteers hold clear current DBS checks
- We will take all reasonable steps to ensure health safety and welfare for all those who access our organisation [make a link here to your health and safety policy]
- We will take all practicable steps to ensure that no one working with us or for us • would put a child in a situation of unreasonable risk to their health and safety.

Safeguarding

- We will not harm or abuse children within our care and will take all reasonable steps to ensure no one working with us or around us within the community could harm or abuse a child in our care.
- We will ensure good reporting to our DSP and onward to children's social care where ever we suspect harm and will foster an environment of good communication, transparency and trust.
- All involved with our organisation will follow our code of conduct [put a link to your code of conduct here]

(Note: Code of conduct: This is your practical day to day guide for supporting good safeguarding practice. It could include statements such as: be professional, be approachable, and listen to what children tell you, don't cause children to feel afraid, don't show favouritism, and do not make racist, sexist or otherwise discriminatory comment, be respectful, use age appropriate language.)

Allegations against staff members/ volunteers:

If any member of staff has concerns about another member of staff or volunteer at [insert organisation name] such as

- Believing they have behaved in a way that has harmed or may cause harm to a child
- Having possibly committed a criminal offence against or relating to a child
- Behaved toward a child in a way that indicates he/ she is unsuitable to work with children. (This could include both children within the work place, children within the community or their own children).

The allegation or concern should be reported to the manager with responsibility for dealing with allegations immediately. This is [insert managers name]

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

The designated manager for [insert organisation name] will report the matter to the Local Authority designated Officer (LADO).

If an allegation or concern arises about a member of staff, outside of their work with children, and this may present a risk or harm to a child/ren for which that member of staff is responsible, the general principles outlined in this policy will still apply.

Staff recruitment:

When recruiting paid staff and volunteers it is important to always follow the process outlined in the safer recruitment policy [insert link here if applicable]. This will ensure potential staff and volunteers are screened for their suitability to work with children and young people.

(Note: A safer recruitment policy should include information on application process, commitment to safeguarding demonstrated with in the recruitment process, DBS checks, confidential disclosure, job specs and securing references which check suitability to work with children and young people).

This policy will be reviewed annually.	
Date of last review	
Signed	(Designated Safeguarding Person)

Appendix A:

Definitions of abuse:

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

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

Sexual abuse: Involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening.

Neglect: The persistent failure to meet a child's physical and/ or psychological needs, likely to result in the serious impairment of the child's health or development.

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

Appendix B:

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

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

Appendix C:

Managing a disclosure from a child:

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

This template is downloadable for personalisation in Word format on the portal Home | NATD "Teachers"

Safeguarding Adults

Policy Template for NATD member teachers and their schools

This template covers the essential information required in a safeguarding adults policy, however each individual organisation will have additional requirements which will need to be incorporated and each individual organisation retains responsibility for ensuring their policy is fit for purpose and that it is implemented and followed effectively.

At [*insert organisation name*] we are committed to safeguarding adults with care and support needs and will not tolerate any form of abuse or neglect of any adult. We recognise our duty as defined in the Care Act 2014 to safeguard individuals, promote their wellbeing and where ever possible consider their views, wishes, feelings and beliefs whilst doing so. We will take appropriate steps to safeguard any adult who is believed to be at risk or experiencing abuse or neglect and will ensure all safeguarding actions we take allow adults the freedom to make their own choices and will include them in all decision making. All adults have a right to live free from harm and abuse, some may find it hard to get the help and support they need or may be unable to protect themselves from harm and abuse. We recognise our responsibility to support these individuals to receive the safeguarding support they need.

An adult is anyone of 18 years and over.

All staff and volunteers have a strict duty never to subject an individual to any form of harm or abuse. Failure to adhere to these procedures will be treated as gross misconduct.

Individuals who attend [insert organisation name] may view our policy where appropriate and a copy will always be kept [insert location].

Designated safeguarding lead:

The designated safeguarding person (DSP) within our organisation is [insert name]

As safeguarding lead they have completed additional training to fulfil this role:

[Examples of appropriate additional training could be: safeguarding adults training, managing disclosure training, designated safeguarding person training. This is about training you have received in safeguarding not training to dance or teach.]

- [insert training title and date]
- [insert training title and date]

The Designated Safeguarding Person will advise members of staff and visitors to [organisation name] on best practice and expectations. They will be responsible for the monitoring and recording of any safeguarding concerns and for ensuring that all concerns are shared with the appropriate statutory authorities.

Safeguarding

All staff and volunteers at [insert organisation name] should be made aware of this policy and should be able to demonstrate their roles and responsibilities for safeguarding and promoting the wellbeing of individuals, including how to raise concerns with both Adult Social Care and the Police. Staff and volunteers shall be made aware of this policy through [outline your process for making staff aware of this policy and its contents for example team meetings, training sessions, briefings.]

Safeguarding adults:

'Safeguarding adult's means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and the experience of abuse or neglect, while at the same time making sure that the adults wellbeing is promoted including, where appropriate having regard for their views, wishes, feelings and beliefs in deciding on any action. This must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances.' (Care and Support Statutory Guidance 2017.)

All safeguarding work should be underpinned by an ethos of empowerment, prevention, proportionality, protection, partnership and accountability.

The Care Act sets out a duty for any adult who:

- Has care and support needs (whether or not these are known to the local authority where they reside)
- Experiencing or is at risk of experiencing abuse or neglect and
- Is unable to protect themselves due to their care and support needs.

Any safeguarding action should be person lead and outcome focuses. We should help the individual to receive the kind of help and support that is right for them.

Overview of responsibilities:

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

It is the responsibility of all staff and volunteers at [insert organisation name] to take steps to protect adults with care and support needs where they are unable to do so for themselves.

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

All staff working at [insert organisation name] who have contact with people with care and support needs are required to hold a valid, clear DBS check.

Consent and information sharing:

Issues of consent are essential to effective safeguarding practice. Additional consent must be sought for any activity that is out of the usual parameters of our work. Basic consents for day

Safeguarding

to day activities can be sought through enrolment process, (Note: This should include for example photo consent, consent for performances), and appropriate organisational guidance shall be provided to ensure those consenting have clear and transparent information on what they are consenting to.

Significant harm is no exception to this. Before making a referral to Adult Social care consent must be sought. Adult safeguarding Process is consent based process and support cannot be provided for an individual who doesn't want it. Conversations about consent must be recorded.

Consent need not be sought, and action should be taken, where:

- There is immediate risk to that individual or others, often known as a public protection issue.
- Asking for consent is at that time unsafe
- The individual lacks the mental capacity to consent therefore you do so on their behalf.

Any information shared will be relevant, necessary and proportionate. You must record your decision and the reasons for it, whether or not you choose to share information. If you share you should record what you shared and who you shared with.

Staff and volunteers must be aware there are many barriers for individuals who may wish to share experience of abuse or neglect to seek help and support. Patience and reassurance are essential.

The Mental Capacity Act 2005: is a legal framework which protects people who may lack capacity to make decisions themselves. The presumption is that adults have mental capacity to make informed choices about their safety and how they live their lives. Mental Capacity and a person's ability to give informed consent are at the heart of decisions and actions taken under this policy.

A person's ability to make a decision may be affected by duress and undue influence. Adults with capacity would normally make their own in- formed decision as to whether they consented to be involved in the adult safeguarding process. If it is reasonably believed that the decision is being made because of threats or coercion expert advice should be sought.

Seeking medical attention:

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

Nothing should be allowed to delay urgent medical treatment.

Abuse and Neglect: Our duty to safeguard adult's means:

- Stop abuse and neglect where possible
- Prevent harm and reduce the risk of abuse or neglect to adults with care and support needs

Safeguarding

- Safeguarding adults in a way that supports them in making choices and having control about how they want to live
- Promote an approach that concentrates on improving life for the adults concerned
- Raise public awareness so that communities as a whole, alongside professionals, play their part in preventing, identifying and responding to abuse and neglect
- Provide information and support in accessible ways to help people understand the different types of abuse, how to stay safe and what to do to raise a concern about the safety or well- being of an adult and
- Address what has caused the abuse or neglect

(14.11: Department for Health Care and Support Statutory guidance, issued under the Care Act 2014)

Staff and volunteer responsibility:

All staff and volunteers at [insert organisation name] have a duty to:

Take action: This might involve;

- contacting the police or phoning an ambulance or taking some other form of emergency safety measure,
- Offering support, information and reassurance to the individual
- Collect details about what has happened where possible being mindful not to be disruptive of potential evidence (don't ask leading questions)
- Gain consent to share information where possible or act in the individuals best interests where they are unable to consent.

Tell:

• Our designated safeguarding lead or in their absence adult social care or the police

Record:

• As much detail as possible as soon as possible with accurate information.

Raise your concern:

• With Adult social care where an individual requests this support or in their best interests under the MCA if they are unable. Share with the police where appropriate.

Confidentiality:

At [insert name] we expect all members of staff and volunteers to maintain confidentiality at all times and to act in line with the General Data Protection Regulations and to there for share only that which is necessary, proportionate and relevant.

Referring a concern and your DSP:

Our Designated safeguarding person will act on behalf of [insert organisation name] in referring concerns or allegations of harm to Adult Social care or the police as appropriate. If the designated safeguarding lead is in any doubt information should be shared with Adult Social care for a second opinion. It is not the role of the DSP to investigate only to collate

Safeguarding

information, clarify details of the concern and facilitate information sharing. In the absence of the DSP the individual who has the concern is responsible for contacting Adult Social care and the information should be shared with the DSP retrospectively.

The contact number for Adult social care is.....

Allegations against staff members/ volunteers:

If any member of staff has concerns about another member of staff or volunteer at [insert organisation name] such as;

- Believing they have behaved in a way that has harmed or may cause harm to an individual
- Having possibly committed a criminal offence against or relating to an adult with care and support needs
- Behaved toward an adult with care and support needs in a way that indicates he/ she is unsuitable to work with people. (This could be within the work place within the community or their own families).

The allegation or concern should be reported to the manager with responsibility for dealing with allegations immediately. This is [insert person in charge name]

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

The designated manager for [insert organisation name] will report the matter to the Local Authority safeguarding Adults Team.

If an allegation or concern arises about a member of staff, outside of their work at our organisation, and this may present a risk of harm to others for whom that member of staff is responsible, the general principles outlined in this policy will still apply.

Staff recruitment:

When recruiting paid staff and volunteers it is important to always follow the process outlined in the safer recruitment policy [insert link here if applicable]. This will ensure potential staff and volunteers are screened for their suitability to work with adults with care and support needs.

(Note: A safer recruitment policy should include information on application process, commitment to safeguarding demonstrated with in the recruitment process, DBS checks, confidential disclosure, job specs and securing references which check suitability to work with children and young people).

This policy will be reviewed annually.

Date of last review	
Signed	(Designated Safeguarding Person)

NATD Appendix A:

care and support needs could include:

- An older person
- Someone with sensory impairment
- Someone with a mental health condition, personality disorder or dementia
- Someone with a physical disability
- Someone who misuses substances or alcohol to the extent if effects their ability to manage day to day living
- A carer, providing unpaid care for a family member or friend.
- (This is not a comprehensive list, it is purely examples.)

Appendix B:

Illustrative guide to abuse and neglect:

- physical abuse
- sexual abuse
- psychological abuse
- financial abuse
- modern
- discriminatory abuse
- organisational
- neglect and acts of omission
- self-neglect

Appendix c:

Sample suggested signs, symptoms and indicators to abuse and neglect:

- Depression
- Self-harm
- Suicide attempts
- Fear or anxiety
- Being dirty, smelly, unkempt
- Lacking proper clothing for the time of year
- Lacking money to meet their basic needs
- Injury
- Sleeplessness
- Changes in mood, behaviour or appearance