

Title: Safeguarding, Child and Vulnerable Adult Protection Policy	Issue No.	1
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Safeguarding, Child and Vulnerable Adult Protection Policy

Useful numbers

Children’s Social Care Contact Centre: 01522 782111 Mon-Fri 8am-6pm

Adult’s Social Care Contact Centre: 01522 782155 Mon-Fri 8am-6pm

Childrens/adults Social Care Contact Centre: 01522 782333 all other times

Local Safeguarding Children Board:



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Scope of the Policy

The County Amateur Operatic & Dramatic Society (Lincoln) recognizes its duty of care under the following legislation:

- Children Act 1989
- The Human Rights Act 1998
- Children Act 2004
- Childcare Act 2006
- Children (private arrangements for fostering) regulations 2005
- Carers (Recognition and Services) Act 1995
- The Care Act 2014
- Mental Capacity Act 2005
- Mental Capacity (Amendment) Act 2019
- Serious Crime Act 2015
- Domestic Abuse Act 2021

The society recognizes that abuse can take many forms, whether it be physical, emotional, sexual abuse or neglect. The society is committed to practice which protects children and vulnerable adults from harm. All members of the society accept and recognize their responsibilities to develop awareness of the issues which cause children and vulnerable adults harm. The purpose of this document is to set out the requirements for the County Amateur Operatic & Dramatic Society to take appropriate actions for safeguarding children and vulnerable adults at risk of harm or abuse, in line with legislation.

The society aims to design and implement policies and procedures that meet the diverse needs of our service and workforce, ensuring that none are placed at a disadvantage over others, in accordance with the Equality Act 2010. Consideration has been given to the impact this policy might have regarding the individual protected characteristics of those to whom it applies.

For the purposes of this document, children are defined as those under the age of 18 years. Vulnerable adults are defined as anyone over the age of 18 years who may be unable to protect themselves from abuse, harm or exploitation, which may be by reason of illness, age, mental illness, disability or other types of physical or mental impairment.

Responsible others are those individuals responsible for a child's care such as an individual functioning within the family unit and having responsibilities for the care of the child such as a parent, guardian, or other person having similar care responsibilities. Also an individual functioning outside the family unit and having similar responsibilities or other lawful custodians of a child such as a foster parent.

It must be considered that in some circumstances this policy will apply equally to adults who by a temporary or permanent condition may require to be safeguarded. Although it refers to the child and vulnerable adult, its application in these circumstances should not be delayed.

Members must understand there are circumstances where a safeguarding alert may be made without consent, e.g., circumstances involving other at-risk groups or where a crime may have been committed. Disclosing information in this instance is referred to as a public interest disclosure to share information.

The society believes that:

- The welfare of the child and vulnerable adult is paramount.
- All children and vulnerable adults, whatever their age, culture, disability, gender, language, racial origin, religious beliefs and/or sexual identity have the right to protection from abuse.
- All suspicions and allegations of abuse should be taken seriously and responded to swiftly and appropriately.
- All members and employees of the society should be clear on how to respond appropriately.

The society will ensure that:

- All children and vulnerable adults will be treated equally and with respect and dignity.
- The duty of care to children and vulnerable adults will always be our first concern.
- A balanced relationship based on mutual trust will be built which empowers the children and where appropriate vulnerable adults to share in the decision-making process.
- Enthusiastic and constructive feedback will be given rather than negative criticism.
- Bullying will not be accepted or condoned.
- All adult members of the society provide a positive role model for dealing with other people.
- Action will be taken to stop any inappropriate verbal or physical behavior.
- It will keep up-to-date with health & safety legislation.

- It will keep informed of changes in legislation and policies for the protection of children and vulnerable adults.
- It will undertake relevant development and training.
- It will hold a register of every child and vulnerable adult involved with the society and will retain a contact name and number close at hand in case of emergencies.
- It will respond quickly and appropriately where information requests are made, abuse is suspected, or allegations are made in relation to children or vulnerable adults.
- It will give children, their parents and vulnerable adults at risk the chance to raise concerns over their own care or the care of others and have in place a system for managing, escalating and reviewing concerns.

The Society will endeavor to safeguard children and vulnerable adults by:

- Adopting child and vulnerable adult protection guidelines through a code of conduct for volunteers and third parties in contact with children and vulnerable adults.
- Following carefully the procedures for the recruitment and selection of volunteers working with children and vulnerable adults.
- Providing effective management of volunteers through supervision, support and training.
- Adhering to the six principles of safeguarding:

1. Empowerment - People being supported and encouraged to make their own decisions and informed consent
2. Prevention - It is better to take action before harm occurs
3. Proportionality - The least intrusive response appropriate to the risk presented
4. Protection - Support and representation for those in greatest need
5. Partnership - Local solutions through services working collaboratively
6. Accountability - Accountability and transparency in safeguarding practice

This policy should also be read in conjunction with the society's Equal Opportunities Policy and Health & Safety Policy.

The society has a dedicated safeguarding lead, who is in charge of ensuring that the child and vulnerable adult policy and procedures are adhered to. That person's name is Dr Billy Noorpuri and he can be contacted by phone on: 07932 675463 and email: billy.noorpuri@nhs.net.

The society has a lead chaperone, who is in charge of managing and supporting all chaperones during any performance or production. The lead chaperone also supports the safeguarding lead in carrying out their

duties in relation to this policy.

The lead chaperone's name is Martyn Housley-Smith and he can be contacted by phone on: 07927 328669 and email: martyn_smith76@hotmail.com

The society has a registered first aider.

This policy will be regularly monitored by the Management Committee of the society and will be subject to annual review.

This is our society policy and as such any disregard to the code of conduct outlined here may result in disciplinary action against a society member.

Child and Vulnerable Adult Protection Procedures

Responsibilities of the Society

At the outset of any production involving children and vulnerable adults the society will:

- Undertake a risk assessment and monitor risk throughout the production process.
- Ensure that children and vulnerable adults are supervised at all times.
- Sharing information about concerns with recognized agencies through referral pathways in a timely manner and where appropriate involving parents, responsible others, children and vulnerable adults.
- Ensuring there is a safe recruitment procedure in place, including the effective use of the Disclosure Barring Service (DBS) where necessary.
- Making apparent clear lines of accountability within the society for safeguarding.
- Ensuring all members are aware of the safe whistleblowing process.
- Creating an environment where all staff understand the requirement to work in an open and transparent way.
- Treated all members, children and vulnerable adults with dignity and respect regardless of culture, disability, gender, age, language, racial origin, religion or sexuality.
- Making apparent that all who work with children and vulnerable adults are responsible for their own actions and behaviour and should avoid conduct that may lead another responsible person to question their motivation and/or intentions.

Parents/Responsible others

- The society believes it is important there exists a partnership between parents or responsible others and the society. Parents or responsible others are encouraged to be involved in the activities

of the society and to share responsibility for the care of children and vulnerable adults. All parents and responsible others will be given a copy of the society's Safeguarding, Child and Vulnerable Adult Policy and procedures.

- All parents and responsible others have responsibility to collect (or arrange collection of) their children and vulnerable adults after rehearsals or performances. It is not the responsibility of the society to take children and vulnerable adults home.

Parental Responsibility

It should be noted that each parent has parental responsibility and, as such, anyone with parental responsibility for a child has a right to seek access to that child. Parents do not lose parental responsibility if they divorce, however, parental access can be restricted by the court.

Parental responsibility is defined in the Children Act 1989 as "all the rights, duties, powers, responsibilities and authority which by law a parent of a child has in relation to Childcare Act 2006" and is as follows:

- Birth mothers automatically have parental responsibility, as do married fathers. However, in both cases, this can be removed by the court.
- When the father is not married to the child's mother, his parental responsibility will depend on when the child was born and those who are named on the birth certificate.

These named fathers automatically have parental responsibility if the child was born on or after:

- 1 December 2003 in England and Wales
 - 4 May 2006 in Scotland
 - 15 April 2002 in Northern Ireland
- Unmarried fathers who are not named on the birth certificate do not have automatic parental responsibility. However, they can acquire parental responsibility if they obtain a Parental Responsibility Agreement from the child's mother or a Parental Responsibility Order from the court.
 - Step parents and civil partners can acquire parental responsibility in the same way as unmarried fathers.
 - If a child is adopted, the birth parents will lose parental responsibility for their child and, with any child in care, the representatives of the local authority will have parental responsibility for that child.

Risks to the child following parents separating

- Occasionally, there may be a request from a single parent suggesting that the other parent must not be allowed to access the child and/or must not be involved in the care of that child(ren).

- Should this society receive any such requests from estranged parents, then advice from the safeguarding lead should be sought.
- In all situations, this society will do what is in the best interest of the child and this may involve discussing any concerns with the Safeguarding lead should any staff member believe that the parents do not have best interests of the child(ren) in mind.

Unsupervised Contact

- The society will attempt to ensure that no adult has unsupervised contact with children and vulnerable adults.
- If possible there will always be two adults in the room when working with children and vulnerable adults.
- If unsupervised contact is unavoidable, steps will be taken to minimize risk. For example, work will be carried out in a public area, or in a designated room with a door open.
- If it is predicted that an individual is likely to require unsupervised contact with children or vulnerable adults, he or she may be required to obtain a criminal record disclosure.
- Children and vulnerable adults should not be taken alone on car journeys, under any circumstance. Only in an emergency, when a chaperone is indisposed and this is entirely unavoidable; the full knowledge and consent of the parents or responsible others, carers and a senior manager in the organization should be sought. In seeking consent, chaperones should state the purpose of the journey and the anticipated length. They should also check insurance liability.
- It is absolutely forbidden that society members should meet with children or vulnerable adults outside organized activities. Neither should they invite or allow a child or vulnerable adult to stay with them at their home unsupervised.
- Society members should never do things of a personal nature for children and vulnerable adults that they can do for themselves. Society members should always avoid sexually provocative or informal rough physical games. However, it is recognized that physical games and sexual language may sometimes be part of a structured rehearsal or performance. Careful consideration must be given as to whether this would be appropriate for the vulnerable adult and if so, fully explained.

Physical Contact

- All adults will maintain a safe and appropriate distance from children and vulnerable adults.
- Adults will only touch children and vulnerable adults when it is absolutely necessary in relation to the particular activity.
- Adults will seek the consent of the child and vulnerable adult prior to any physical contact and the purpose of the contact shall be made clear.

Managing sensitive information

- The society has a policy and procedures for the taking, using and storage of photographs or images of children and vulnerable adults.
- Permission will be sought from the parents or responsible others for use of photographic material featuring children or vulnerable adults for promotional or other purposes.
- The society's web-based materials and activities will be carefully monitored for inappropriate use.
- The society will ensure confidentiality in order to protect the rights of its members, including the safe handling, storage and disposal of any sensitive information such as criminal record disclosures.

Mental capacity

- The Mental Capacity Act (MCA) 2005 offers a framework that details the rights of individuals should their capacity be questioned. The principles of the MCA must be adhered to and are applicable to safeguarding.
- Should an individual at risk opt to remain in an abusive situation, it is essential that they choose to do so without duress or undue influence and are fully aware of the risks they may encounter. Should it transpire that the individual has been threatened or coerced, safeguarding interventions must override their decision to ensure that the safety of the individual is protected.

Liberty Protection Standards

- In addition to the MCA 2005 and the later Mental Capacity (Amendment) Act 2019, the safeguarding officer will determine if a child or vulnerable adult is deemed to have been deprived of their liberty as detailed in the Liberty Protection Standards.
- Where it is suspected that the deprivation is unlawful, the safeguarding officer will report this to the local authority within 48 hours. Additionally, the local authority has the legal power to sanction and issue a deprivation of liberty order should it be deemed necessary to restrict the freedom of an individual if it is found to be in their best interest.

Contest and Prevent

In 2011, the government introduced the Prevent strategy as part of the counter-terrorism strategy, Contest. The purpose of Prevent is to stop individuals becoming involved in terrorism. This includes violent and non-violent extremism which can create an atmosphere conducive to terrorism.

Channel is a support programme that helps those individuals who are at risk of being drawn into terrorism. Further guidance can be found at the Gov.uk webpage titled Channel and Prevent Multi-Agency Panel (PMAP) guidance.

It is possible the society may meet children and vulnerable adults who are at risk of being drawn into terrorism, including supporting violent or non-violent extremism or being susceptible to radicalisation. If a member suspects that a child or vulnerable adult is at risk, they should speak to the safeguarding lead expressing their concerns.

Suspicion of safeguarding issue

- At all times society members must remember the priority is to safeguard the welfare of the child and vulnerable adult. In all situations where a society member has a suspicion of abuse, an incident arises or a disclosure is made, he/she must pass the details onto one of the society's designated persons.
- If you see or suspect abuse of a child or vulnerable adult while in the care of the society, please make this known to the person with responsibility for child and vulnerable adult protection. If you suspect that the person with responsibility for child and vulnerable adult protection is the source of the problem, you should make your concerns known to the Chairman.
- In the absence of one or both individuals, or where safeguarding leads are uncertain as to the action required, the senior board member present must raise the matter with the local safeguarding team. In emergency cases, a decision may need to be made about contacting the police or social services.
- In all instances of safeguarding concerns, the safeguarding lead and Chairman will be updated as soon as possible to ensure they can effectively respond to any external interested parties.
- Please make a note for your own records of what you witnessed as well as your response, in case there is a follow-up investigation in which you are involved.
- Ensure all information is recorded accurately and secure any evidence where possible.
- If a serious allegation is made against any member of the society, chaperone, venue staff etc., that individual will be suspended immediately until the investigation is concluded. The individual will be excluded from the theatre, rehearsal rooms etc. and will not have any unsupervised contact with any other children or vulnerable adults in the production.
- In some instances, it may become necessary to safeguard the child or vulnerable adult until additional services arrive such as the Police or Social Care. The child or vulnerable adult may have to be kept in the building or a secure location, such as home. Where possible informed consent should be obtained in these cases.

Disclosure of safeguarding issue

If a child or vulnerable adult confides in you that abuse has taken place:

- Remain calm and in control but do not delay taking action.

- Listen carefully to what has been said. Allow the child or vulnerable adult to tell you at their own pace and ask questions only for clarification. Do not ask questions that suggest a particular answer.
- Adopt a kind and empathic approach. Do not be judgmental or incriminatory. Offer support and reassurance whilst remaining engaged with the individual.
- Don't promise to keep it a secret. Use the first opportunity you have to share the information with the safeguarding lead. Make it clear to the child or vulnerable adult that you will need to share this information with others. Make it clear that you will only tell people who need to know and who should be able to help.
- Reassure the child or vulnerable adult that 'they did the right thing' in telling someone.
- Tell the child or vulnerable adult what you are going to do next.
- Speak immediately to the safeguarding lead. It is that person's responsibility to liaise with the relevant authorities; usually social services or the police.

As soon as possible after the disclosing conversation, make a note of what was said, using the child's or vulnerable adult's own words. Note the date, time, any names that were involved or mentioned, and who you subsequently informed. Ensure you sign and date your record.

Recording

- In all situations, including those in which the cause of concern arises from a disclosure made in confidence, the details of an allegation or reported incident will be recorded, regardless of whether or not the concerns have been shared with a statutory child or vulnerable adult protection agency.
- An accurate record shall be made of the date and time of the incident or disclosure, the parties involved, what was said or done and by whom, any action taken to investigate the matter, any further action taken e.g. suspension of an individual, where relevant the reasons why the matter was not referred to a statutory agency, and the name of the persons reporting and to whom it was reported.
- The record will be confidential, stored securely and shared only with those who need to know about the incident or allegation.

The Safeguarding Process

Once a safeguarding concern has been received the safeguarding lead with another responsible society member, such as the Chairman, will hold a meeting to discuss the concern. This meeting will occur as soon as is practically possible. In the event of either individual not being present, another responsible society member will be allocated to the role.

An additional responsible society member will also be recruited and informed of the events in case they are later required to hear an appeal. They will have no further input at this stage in order to remain independent. They will be allocated the role of appeal supervisor.

The meeting will be arranged at a mutually convenient time with the concerned child or vulnerable adult and their parent or representative. It will be made apparent at the outset, that if a significant allegation has been made, appropriate services such as the Police may be informed. In these cases, it is not for the Society to investigate further but to pass the concerns onto a statutory body.

The parent or representative is there to act as witness to what was said, to provide moral support and to assist and advise the child or vulnerable adult in presenting their case. They may address the meeting (provided the vulnerable adult wishes this), ask questions on behalf of them and confer with them but not answer questions on behalf of them.

If the child or vulnerable adult is disabled, reasonable adjustments will be made to ensure (as far as possible) they are not disadvantaged at the meeting. This may include the provision of further assistance (e.g. a signer or other support) where necessary.

The meeting will discuss the facts of the incident or concern in a chronological manner. It will be conducted in a non-judgmental, kind and supportive environment. Consideration will be given to the physical, mental health and emotional needs of the child or vulnerable adult. If the discussion is proving too distressing for the individual at risk, a reasonable break will be taken to allow composure. In rare circumstances the meeting may be adjourned in order to gather further information or take advice, in the interests of fairness or consistency.

Accurate and contemporaneous notes will be taken during every meeting and agreed by all parties before being signed off. Under no circumstances is the meeting to be recorded without prior permission of those present.

After discussing the facts of the case, an action plan will be agreed by all parties. This will aim to meet the wishes of the child or vulnerable adult and address any concerns raised. It will also seek to minimize negative impact, both on the individuals concerned and the society as a whole. This action plan may impose restrictions on certain individuals until the issue has been resolved. This may involve further discussion with the alleged individual who has a right to be made aware of the accusation and present his/her argument. This subsequent consultation with the alleged individual will follow the same principles as the initial fact-finding meeting. The alleged individual is expected to take all reasonable steps to attend the meeting on the appointed date and time.

The alleged individual will be offered all the rights and privileges offered to the individual at potential risk. They will be made aware of the details of the accusation and the information gathered to date. They will be given opportunity to present any information and provide explanation or comment before any decision is made. They also have the right to challenge any information provided thus far.

Following all and necessary explorative meetings, the safeguarding lead with the allocated responsible society member will meet to discuss the outcome. External agencies may also be involved in this process if required, ideally with agreement from all parties. They will communicate a collaborative decision with opinion and advice/guidance supported by the facts of previous meeting minutes and legislation. This decision will be communicated in writing to all involved parties, ideally within 10 working days of receiving the initial safeguarding concern.

The safeguarding process is empowered to advise a range of outcomes from inaction to expulsion from the society. Additional actions may also be indicated such as reporting to external agencies.

In those instances where the outcomes remain within the confines of the society, the alleged individual retains a right of appeal. He/she must request an appeal to the appeal supervisor within 5 working days of the final outcome. This request must state the grounds of appeal. The appeal supervisor will then review all the facts of the case (including meeting minutes, notes and outcomes) prior to declaring if the appeal is rejected or withheld. He/she may also undertake further exploratory meetings if required utilising the processes already documented.

If the appeal is withheld, the appeal supervisor may also present a different range of outcomes. If the appeal is rejected, they may provide additional outcomes to those already presented. The appeal process should be complete within 10 working days of commencement. The appeal outcome will be communicated in writing to all involved parties.

However, if the outcome from the initial safeguarding process was to report to an external agency, the alleged individual will forfeit his/her right of appeal as the society no longer remains the sole responsible body.

After a comprehensive safeguarding process has been completed, it is hoped a period of reconciliation will occur, such that the normal workings of the society can resume.

Raising an alert

When it is necessary to raise an alert, a risk assessment should be undertaken to prevent further risk of immediate harm to the child or vulnerable adult at risk. The initial assessment should consider:

- Whether the individual is still at risk if they return to the place where the abuse is alleged or suspected to have taken place.
- The extent of harm that is likely to occur if the child or vulnerable adult at risk encounters the person who is alleged to have caused harm.
- Whether the alleged person still has access to the child or vulnerable adult at risk.

Once raised, the alert will be managed according to 'Report a safeguarding concern – Lincolnshire County Council' to ensure the needs of the individual are met and that the risk of further harm is significantly reduced.

The process will detail the actions to be taken to safeguard the individual at risk, ensuring that those involved are aware of the options available and how they can support the individual throughout the process.

Rights & Confidentiality

- If a complaint is made against a member of the society, he or she will be made aware of his rights under the society's disciplinary procedures.
- No matter how you may feel about the accusation, both the alleged abuser and the child or vulnerable adult who is thought to have been abused have the right to confidentiality under the General Data Protection Regulations 2018. Be aware that any possible criminal investigation could be compromised through the release of inappropriate information.
- In criminal law the Crown, or other prosecuting authority, has to prove guilt beyond reasonable doubt and the defendant is presumed innocent until proven guilty.

Sharing of information

The sharing of information is essential to establish early intervention and the protection of children and vulnerable adults at risk. Members must understand the need to share information, when it is appropriate and how they share.

Where possible consent to share information should be obtained. However, the safety of the individual is paramount and, where concern exists or individuals are deemed to be at risk from significant harm, then this is to be considered the determining factor and information should be shared. Where doubt exists, the safeguarding lead or nominated deputy (chairman) should be approached for advice.

There are eight principles to sharing information. With these principles in mind, members are advised to follow:

1. The Data Protection Act 2018, Chapter 2, the UK General Data Protection Regulation (UK GDPR) and human rights law are not barriers to justified information sharing but provide a framework to ensure that personal information about living individuals is shared appropriately.
2. Be open and honest with the individual (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be, shared and seek their agreement, unless it is unsafe or inappropriate to do so.
3. Seek advice from other responsible members if there is any doubt about sharing the information concerned, without disclosing the identity of the individual where possible.
4. Whenever possible, share information with consent and, if possible, respect the wishes of those who do not consent to share confidential information. Under the Data Protection Act 2018, you may share information without consent if, in your judgement, there is a lawful basis to do so, such as where safety may be at risk. You will need to base your judgement on the facts of

the case. When you are sharing or requesting personal information from someone, be certain of the basis upon which you are doing so. Where you do not have consent, be mindful that an individual might not expect information to be shared.

5. Consider safety and wellbeing: base your information-sharing decisions on considerations of the safety and wellbeing of the individual and others who may be affected by their actions.
6. Necessary, proportionate, relevant, adequate, accurate, timely and secure: ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those individuals who need to have it, is accurate and up to date, is shared in a timely fashion and is shared securely.
7. Keep a record of your decision and the reasons for it – whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose.
8. Society members should have confidence to share confidential information in the best interests of child and vulnerable adults within the framework set out by these principles. They should be supported by this policy in order to do so.

Accidents

- To avoid accidents, chaperones, children and vulnerable adults will be advised of “house rules” regarding health and safety and will be notified of areas that are out of bounds. Children and vulnerable adults will be advised of clothing and footwear appropriate to the work to be undertaken.
- If a child or vulnerable adult is injured while in the care of the society, a designated first-aider will administer first aid and the injury will be recorded in the society’s accident book. This record will be countersigned by the safeguarding lead.
- If a child or vulnerable adult joins the production with an obvious physical injury a record of this will be made in the accident book. This record will be countersigned by the safeguarding lead. This record may be useful if a formal allegation is made later and will also form a record that the child or vulnerable adult did not sustain the injury while participating in the production.

Criminal Record Disclosures

- If the society believes it is in its best interests to obtain criminal record disclosures for chaperones or other personnel, it will inform the individual of the necessary procedures and the level of disclosure required. A Standard disclosure will apply for anyone with supervised access to children and vulnerable adults. An Enhanced disclosure will be required for anyone with unsupervised access.
- The society will have a written code of practice for the handling of disclosure information.
- The society will ensure that information contained in the

disclosure is confidential and not misused in any way.

Chaperones

- Chaperones will be appointed by the society for the care of children and if appropriate, vulnerable adults during the production process. By law the chaperone is acting in loco parentis and should exercise the care which a good parent might be reasonably expected to give to a child or vulnerable adult. The maximum number of children and vulnerable adults in the chaperone's care shall not exceed 12.
- Potential chaperones will be required to supply photographic proof of identity (e.g. passport, driving license) and two references from individuals with knowledge of their previous work with children or vulnerable adults, unless already well known to the society. They will also be asked to sign a declaration stating there is no reason why they would be considered unsuitable to work with children and vulnerable adults.
- Chaperones will be made aware of the society's safeguarding, child and vulnerable adult policy and procedures. The safeguarding of those under their care remains their prime and sole responsibility.
- Chaperones will not usually have unsupervised access to children or vulnerable adults in their care. If unsupervised access is unavoidable, or if this is a requirement of the local authority, a criminal record disclosure will be sought.
- Where chaperones are not satisfied with the conditions for the children or vulnerable adults, they should bring this to the attention of the producer. If changes cannot be made satisfactorily, the chaperone should consider not allowing the child or vulnerable adult to continue.
- If a chaperone considers that a child or vulnerable adult is unwell or too tired to continue, the chaperone must inform the producer and not allow the child or vulnerable adult to continue.
- Under the Dangerous Performances Act, no child of compulsory school age is permitted to do anything which may endanger life or limb. This could include working on wires or heavy lifting. Chaperones should tell the producer to cease using children in this way and should contact the Child Protection Officer.
- During performances, chaperones will be responsible for meeting children and if necessary, vulnerable adults at the stage door and signing them into the building.
- Children will be kept together at all times except when using separate dressing rooms.
- Chaperones will be aware of where the children, and if necessary vulnerable adults, are at all times.
- Children and vulnerable adults are not to leave the theatre unsupervised by chaperones unless in the company of their parents or responsible others.
- Children and if necessary vulnerable adults will be adequately supervised

while going to and from the toilets.

- Children will not be allowed to enter the adult dressing rooms.
- Chaperones should be aware of the safety arrangements and first aid procedures in the venue, and will ensure that children and vulnerable adults in their care do not place themselves and others in danger.
- Chaperones should ensure that any accidents are reported to and recorded by the society.
- Chaperones should examine accident books each day. If an accident has occurred, the producer is not allowed to use that child or vulnerable adult until a medically qualified opinion has been obtained (not just the word of the parent, responsible other or child).
- Chaperones should have written arrangements for children and vulnerable adults if appropriate, after performances. If someone different is to collect the child or vulnerable adult, a telephone call should be made to the parent or responsible other to confirm the arrangements.
- Children and vulnerable adults if necessary, should be signed out when leaving and a record made of the person collecting.
- If a parent or responsible other has not collected the child or vulnerable adult, it is the duty of the chaperone to stay with that child or vulnerable adult or arrange to take them home.

Informed Challenge

Informed challenge is an encouraging action taken in the best interests of the child or vulnerable adult at risk. It enables the challenging of decisions or actions by a society member if they consider the stated decisions or actions not to be effective enough for those deemed to be at risk.

Should a member disagree with any element of care offered to an at-risk individual, they are encouraged to discuss their concerns with the society's safeguarding lead, their nominated deputy (Chairman) or the local authority safeguarding lead who will provide independent guidance. It is envisaged that most informed challenges will be resolved informally and at a local level.

Adults—indicators of abuse

The following are indicators of abuse in adults at risk:

Physical abuse

- Unexplained injuries or injuries inconsistent with the person's lifestyle
- Inconsistent history or a changing history
- Bruising, burns, marks, regular injuries
- Unexplained falls
- Changes in behaviour or low self-esteem
- A delay or failure in seeking medical support

- Signs of malnutrition

Emotional abuse

- Low self-esteem
- Uncooperative and/or aggressive behaviour
- Resentment, anger, distress
- Insomnia
- False claims to attract unnecessary treatment (claims may also be from controlling family member)
- Behavioural changes when in the presence of a particular person

Sexual abuse

- Bruising to thighs, buttocks, upper arms and marks on the neck
- Torn, soiled or bloodied undergarments
- Genital pain, itching or bleeding
- Difficulty in walking or sitting
- Presence of foreign bodies
- Sexually transmitted diseases
- Pregnancy in women who are unable to consent to sexual intercourse
- Fear of help with personal care
- Reluctance to be alone with a particular person

Neglect

- Dirty, unhygienic living space
- Poor personal hygiene
- Pressure sores, ulcers
- Insufficient or inadequate clothing
- Untreated injuries
- Malnutrition
- Failure to engage with social groups
- Failure to bring to booked appointments

Self-neglect

- Unkempt appearance
- Unable or unwilling to take medication
- Extremely poor personal hygiene
- Lack of essentials (food and/or clothing)
- Hoarding
- Living in unacceptable conditions
- Malnutrition and dehydration

Discriminatory abuse

- Withdrawn appearance
- Expressions of anger, frustration, anxiety or fear
- Poor support that does not meet the needs of the individual

Institutional abuse

- Poor record-keeping and standards of care
- Lack of flexibility, procedures, management and support
- Inadequate staffing levels, recreational and educational activities
- Lack of choice
- Dehydration, hunger, lack of personal clothing and possessions
- Unnecessary exposure during bathing or when using the lavatory
- Lack of confidentiality
- Lack of visitors

Financial abuse

- Unexplained withdrawals from accounts
- Lack of available funds
- Missing personal possessions
- Rent arrears and/or eviction notice
- Unnecessary maintenance
- Lack of receipts for financial transactions
- Persons showing an unusual interest in an individual's assets
- Lack of food etc.

Modern slavery

- Isolation
- Malnutrition
- Unkempt appearance
- Always wearing the same clothes
- Lack of personal possessions
- Unable to prove identity, i.e., lack of documentation
- Signs of physical or emotional abuse

Forced marriage (adults or children)

- Siblings forced to marry
- Married young
- Self-harm or suicide of sibling(s)
- Death of a parent
- Missing and running away from home
- Unreasonable restrictions (physical and financial)
- Poor performance/attendance
- Inflexible working arrangements
- Not allowed to work
- Accompanied to and from work/locations

This crime remains largely under-reported as many victims are too frightened to come forward for fear of the repercussions on their families.

Honor based violence

- Lengthy or repeated absence from school, a decline in academic performance
- Depression, anxiety, self-harm, substance misuse, suicidal thoughts
- Poor attendance at work or a drop in performance
- Non-attendance at events outside of the normal working environment
- Restrictions on friends
- Disapproval of adopting a different style (or 'western') type of clothing and/or the wearing of make-up

Honour-based violence encompasses a range of offences including murder, rape, assault, abduction and domestic abuse. Both men and women are at risk.

County lines

- Becoming more secretive, aggressive or violent
- Meeting with unfamiliar people
- Persistently going missing from their home or local area
- Leaving home without an explanation or staying out unusually late
- Loss of interest in work and a decline in performance
- Suspicion of physical assault or unexplained injuries
- Using language relating to drug dealing, violence, or gangs
- Carrying a weapon
- Association with a gang
- Becoming isolated from peers and social networks
- Having a friendship or relationship with someone who appears controlling
- Using drugs, especially if their drug use has increased
- Unexplained acquisition of money, drugs or mobile phones

Domestic Abuse

The prevention of domestic abuse and the protection of all victims lies at the heart of the Domestic Abuse Act 2021 ('the 2021 Act') and its wider programme of work. The measures in the 2021 Act seek to:

- Promote awareness
- Protect and support victims
- Hold perpetrators to account
- Transform the justice response
- Improve performance

Domestic abuse is a high harm, high volume crime that remains largely hidden and anyone can be affected by domestic abuse, regardless of age, disability, sex, sexual orientation, gender identity, gender reassignment, race, religion or belief.

Domestic abuse is defined as follows:

The behaviour of a person (“A”) towards another person (“B”) is domestic abuse if both A and B are each aged 16 or over and are personally connected to each other and the behaviour is abusive.

It should be noted that it does not matter whether the behaviour consists of a single incident or a course of conduct.

Recognizing domestic abuse

There are a range of abusive behaviours including, but not limited to:

- Physical abuse, violent or threatening behaviour
- Sexual abuse
- Controlling or coercive behaviour
- Harassment or stalking
- Economic abuse
- Emotional or psychological abuse
- Verbal abuse
- Technology-facilitated abuse
- Abuse related to faith
- Honour-based abuse

To ensure victims of domestic abuse are well supported, all members should be aware of the different types of domestic abuse.

Understanding the impact of domestic abuse

Domestic abuse can cause serious and devastating long and short-term physical, mental, emotional and psychological health impacts for both adults and children. A victim’s day to day life can be affected by trying to manage the abuse, leading to increased anxiety and a focus on adapting their behaviour to appease the perpetrator. The psychological impact of domestic abuse can be so severe that it leads to suicide ideation and attempt.

Multi-agency response to domestic abuse

Responding to domestic abuse often involves many agencies such as local authorities, community-based agencies, children’s services, housing, drug and alcohol services, specialist domestic abuse agencies, the police and the criminal justice system.

Working together is pivotal if domestic abuse is to be identified at the earliest opportunity and dealt with effectively, thereby minimising the risk of escalation.

Children – Indicators of abuse

The following are common presentations in which abuse may be suspected in a child or young person:

Physical abuse

- Bruises, burns, scalds, bite marks, fractures and other injuries
- Admission by the child or young person
- Unwillingness to change into PE kit at school
- Physical signs and symptoms that could be attributed to any category of abuse and/or are inconsistent with the history given
- An inconsistent history or one that changes over a period of time
- A delay in seeking medical support
- Extreme or worrying behaviour
- Self-harm
- An accumulation of minor incidents, including repeated attendance at A&E
- Repeated attendance of a baby under 12 months of age
- Bruising or injury to a child under 24 months of age

Emotional abuse

- Overly affectionate towards strangers
- Anxious or showing a lack of confidence or appearing clingy
- Inappropriate language or subjects for their age
- Extreme outbursts or very strong emotions
- Showing isolation from parents or carers
- Lack of social skills or have very few friends
- Bed-wetting
- Poor attendance at school
- Insomnia

Sexual abuse

- Avoidance of spending time alone with certain individuals
- Fear or unwillingness to socialise with certain persons
- Use of sexual language or knowing information that would not usually be expected
- Vaginal or anal soreness and/or discharge
- Sexually transmitted infections
- Young girls or girls with learning difficulties or a disability requesting contraception, especially emergency contraception
- Girls under 16 presenting with pregnancy and/or sexually transmitted infections, especially those with learning difficulties, long-term illness or complex needs or disability
- Promiscuity
- Having unexplained physical injuries
- Association with groups of older people or antisocial groups

Neglect

- Poor appearance and hygiene
- Inadequate clothing
- Hunger or lack of money for school meals
- Untreated nappy rash in infants

- Untreated injuries, conditions and dental cases
- Recurring illness or infection
- Tiredness
- Evidence of skin sores, rashes, flea bites, scabies or ringworm
- Left alone at home for prolonged periods
- Living in unsuitable environments, e.g., no heating or hot water
- Caring for others in the home, e.g., siblings
- Failure to bring to appointments

County lines

- Persistently going missing from school or home and/or being found out of area
- Unexplained acquisition of money, clothes or mobile phones
- Excessive receipt of texts/phone calls
- Relationships with controlling/older individuals or groups
- Leaving home/care without explanation
- Suspicion of physical assault/unexplained injuries
- Parental concerns
- Carrying weapons
- Significant decline in school results/performance
- Gang association or isolation from peers or social networks
- Self-harm or significant changes in emotional wellbeing

Unborn child

Pregnancy can create circumstances and influences for both parents which need to be understood by all professionals who come into contact with these families.

These include where:

- Previous children in the family have been removed because they have suffered harm
- Concerns exist regarding the mother's ability to protect
- There are concerns regarding domestic violence and abuse
- A parent or other adult in the household, or regular visitor, has been identified as posing a risk to children
- A child in the household is the subject of a Child Protection Plan
- A sibling has previously been removed from the household either temporarily or by court order
- Either parent is a Looked After Child or are known to children's social care
- Any other concerns exist that the baby may be at risk of significant harm including a parent previously suspected of fabricating or inducing illness in a child or harming a child
- A child aged under 16 and found to be pregnant
- Either or both parents have mental health problems
- Either or both parents have a learning disability
- Either or both parents are under 18 years
- Either or both parents abuse substances, alcohol or drugs

- If the pregnancy is denied or concealed

Female genital mutilation (FGM)

FGM has been illegal in the UK since 1985. The Serious Crime Act 2015 strengthened legislation by adding requirements to report FGM.

The Act details that:

- It grants lifelong anonymity to alleged FGM victims
- It is an offence for parents to fail to protect their child from FGM
- FGM Protection Orders can be introduced to prevent potential victims from travelling abroad
- It is a mandatory reporting duty for nurses, midwives, doctors, social workers and teachers to report to the police whenever they observe physical signs of FGM on a person under the age of 18 or where a girl tells them it has been carried out on her
- It is an offence for FGM to be committed abroad against UK residents

Glossary of terms

Adults with care and support needs (adults)

The Care Act 2014 defines adults with care and support needs as those aged 18 and over who:

Have needs for care and support (whether the local authority is meeting any of those needs) and are experiencing, or at risk of, abuse or neglect and as a result of those care and support needs, are unable to protect themselves from either the risk of or the experience of abuse or neglect.

Advocacy

Advocates help to ensure that a person's rights are upheld and that their views, wishes and needs are heard, respected and acted on.

Child

A person under the age of eighteen.

Child criminal exploitation (children)

Child criminal exploitation (CCE) occurs when an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18. The victim may have been criminally exploited even if the activity appears to be consensual.

CCE does not always involve physical contact; it can also occur through the use of technology.

Child in need (children)

Under Section 17 of the Children Act 1989, a child will be considered in need if:

- They are unlikely to achieve or maintain or to have the opportunity to achieve or maintain a reasonable standard of health or development without the provision of services from the Local Authority.
- Their health or development is likely to be significantly impaired, or further impaired, without the provision of services from the Local Authority.
- They have a disability. Disability includes blindness, deafness or dumbness, mental disorders and permanent illnesses, injuries or congenital deformities.

Child protection (children)

Child protection sets out the clear actions needed to keep a child safe and well.

Where a child is at risk of harm, a conference with key agencies will share information, identify any risks to the child and outline the actions required to protect the child.

County lines

County lines is a term used to describe gangs, groups or drug networks that supply drugs from urban to suburban areas across the country, including market and coastal towns, using dedicated mobile phone lines or 'deal lines'. It involves exploiting children and vulnerable adults to move drugs and money to and from the urban area and to store the drugs in local markets. It involves intimidation, violence and the use of weapons including knives, corrosives and firearms.

Discriminatory abuse

Discriminatory abuse occurs when values, beliefs or culture result in a misuse of power, causing denied opportunities. Motivating factors include age, gender, sexuality, disability, religion, class, culture, language, race or ethnic origin.

Emotional abuse

For a child, emotional abuse is the constant emotional mistreatment, the intention of which is to cause significant adverse effects on the emotional development of the child. Emotional abuse also includes overprotection and the restriction of a child learning or partaking in normal social interaction.

For all, emotional abuse is behaviour that has a detrimental effect on the individual's emotional wellbeing and may result in distress, e.g., bullying, verbal abuse, intimidation, isolation, over-protection or a restriction or withdrawal of an individual's human and/or civil rights.

Female genital mutilation

Female genital mutilation (FGM) comprises all procedures that involve partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons.

Financial abuse

Financial abuse is the use of an individual's funds, property, assets, income or other resources without their informed consent or authorisation. This is a crime. Financial abuse includes theft, fraud, exploitation, misuse of benefits or the misappropriation of property, inheritance or financial transactions.

Forced marriage.

A forced marriage became illegal in June 2014 under the Anti-social Behaviour Crime and Policing Act 2014 and it is a form of domestic abuse. It is primarily against women, although not exclusively, and most cases involve females aged between 13 and 30.

Forced marriage is a marriage conducted without the consent of one or both parties or where consent is obtained under duress and is markedly different from an arranged marriage in which the individuals retain free will and have the choice to accept the arrangement.

In forced marriage, perpetrators use physical, sexual, psychological or financial abuse to pressurise people to marry against their will.

Honor-based violence

This term is used to describe violent or threatening behaviour which is committed to protect or defend perceived cultural beliefs or the honour of the family.

Honour-based violence is not acceptable behaviour and is illegal. Some of those who commit this crime mistakenly believe someone has brought shame on their family or community that compromises their traditional beliefs or culture.

Human rights

The rights inherent to all human beings, regardless of race, sex, nationality, ethnicity, language, religion or any other status.

Institutional abuse

Institutional abuse refers to a lack of respect in a health or care setting which involves routines that meet the needs of staff as opposed to the needs of the individual at risk and violate the individual's dignity and human rights.

Looked after children (LAC) (children)

A child placed in the care of their local authority for more than 24 hours. A looked after child may also be referred to as a 'child in care'. Looked after children may be living with foster parents, living in residential children's homes or other residential settings e.g. a secure unit.

Making safeguarding personal (MSP)

A Local Government Association initiative which aims to develop an outcomes focus to safeguarding work, and a range of responses to support people to improve or resolve their circumstances.

Modern slavery

This includes slavery, human trafficking, servitude and forced labour. Individuals are coerced, deceived and forced into a life of abusive and inhumane treatment.

Neglect

For a child, neglect is the continued failure to ensure that a child's physical and psychological needs are met, resulting in significant impairment of the development of the child.

Examples of neglect include failing to provide adequate supervision, failing to respond to emotional needs, a lack of protection (from emotional or physical harm), failing to provide clothing, accommodation and food. Drug and alcohol misuse is a factor in a significant number of children in need and child protection cases.

For all, neglect has two forms; it can be intentional or unintentional and it results in the needs of the individual not being met. Examples of intentional neglect include failure to provide the required level of care, preventing care from being administered, failure to provide access to services such as health and social care, education and other support services. Unintentional neglect may include a failure to provide the at-risk individual with the necessary level of care as the responsible person (e.g. the carer) fails to understand the needs of the individual.

Physical abuse

For adults and children, physical abuse can involve burning or scalding, drowning, suffocating, hitting, shaking, throwing, pushing, pinching, exposure to extreme temperatures (hot and cold), female genital mutilation, inappropriate use of medication, poisoning or other means of causing physical harm.

For adults, additionally, it could also involve inappropriate restraint and deprivation of liberty.

Private fostering (children)

A private arrangement (without the involvement of a local authority) to care for a child under 16, or under 18 if disabled, by a person other than the parent or close relative for an expected period of more than 28 days.

Safeguarding

Safeguarding means protecting people's health, wellbeing and human rights and enabling them to live free from harm, abuse and neglect. It is fundamental to high-quality health and social care.

Self-neglect

Self-neglect includes a lack of self-care, a lack of care of one's environment and the refusal of services that would reduce the risk of harm. Self-neglect may occur because the individual is unable to care for or manage themselves, they are unwilling to manage themselves, or both.

Sexual abuse

For a child, sexual abuse is the enticement or forcing of a child/young person to participate in sexual activities. This involves penetration or non-penetrative acts, physical contact or non-contact activities such as the encouraging of a child or young person to watch sexually inappropriate content.

For all, sexual abuse includes sexual exploitation, including the involvement of an adult in a sexual activity they have not consented to, the encouragement to watch any form of sexual activity, coercion into any form of sexual activity or the involvement of the adult in such scenarios when they lack the capacity to consent.

Sexual exploitation (children)

Child sexual exploitation (CSE) occurs when an individual takes sexual advantage of a child or young person (anyone under the age of 18) for his or her own benefit.

Power is developed over the child or young person through threats, bribes, violence and humiliation or by telling the child or young person that he or she is loved by the exploiter. This power is then used to induce the child or young person to take part in sexual activity.

Significant harm (children)

Section 31 (3c) (9) of the Children Act 1989 defines 'harm' as the ill-treatment or impairment of the child. Whilst 'significant' harm is not defined under the Act, this will be decided by the local authorities working with family members to assess the child.

Young carers (children)

A person who regularly provides emotional and/or practical support and assistance for a family member who is disabled, physically or mentally unwell or misuses substances.

Notes: