



Safe Guarding & child protection Policy and procedures

Version: 1.1
Latest Review Date:
Next Review Date: January 2026



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1. Introduction and policy statement:

1.1 Triumph Theatre School has a 'duty of care' to provide a safe environment that is conducive to promoting the health and well-being of children and young people under the age of 18 years, and vulnerable adults. Triumph Theatre School will take all reasonable steps to ensure that safeguarding and promoting the welfare of children and vulnerable adults is embedded in our contact through the training and activities we provide for them.

1.2 The protection of children and vulnerable adults is important to Triumph Theatre School. The aim of the school's Policy and Procedures on Safeguarding Children and Vulnerable Adults (the "Policy") is to ensure that children and vulnerable adults with whom Triumph Theatre School comes into contact are well protected and that there is a system in place to protect their welfare.

1.3 Triumph Theatre School believes that; the welfare of the child is paramount, that all children regardless of age, disability, gender, race, sexual orientation or identity, or religious belief have the right to equal protection from all types of harm or abuse. Adults can be deemed to be at risk of harm as a consequence of the personal care and support they receive from others rather than because of a particular impairment or illness.

1.4 The purpose of these policies and procedures are:

- to facilitate protection for children under the age of 18 years and vulnerable adults during any activity provided by FairStage Academy.
- to provide staff with procedures to follow in the event that they suspect a child or vulnerable adult may be experiencing abuse; or be at risk of abuse or harm
- or where there is concern about the behavior of an adult that might harm a child or vulnerable adult.

1.5 Definition: Under The Children Act 1989, which applies mainly to England and Wales; 'a child' is up to the age of 18 years. For child protection purposes, all of the four nations use an age band up to 18 years old. This can also be up to the age of 25 years if they are receiving help from Social Services or Education. Other relevant legislation includes the Children Act 2004 and the Children, Schools and Families Act 2010.

Similar arrangements exist in Scotland under The Children (Scotland) Act 1995; The Protection of Children (Scotland) Act 2003; The Protection of Vulnerable Groups (Scotland) Act 2007 and in Northern Ireland; The Children (Northern Ireland) Order 1995; Safeguarding Vulnerable Groups (NI) Order 2007.



Safeguarding and promoting the welfare of children is defined as:

- protecting children from maltreatment
- preventing impairment of children's health or development
- ensuring that children grow up in circumstances consistent with the provision
- of safe and effective care, and
- taking action to enable all children to have the best outcomes.

Safeguarding is everyone's responsibility and everyone who comes into contact with children and families has a role to play. (A child is defined as anyone who has not yet reached their 18th birthday).

1.6 Vulnerable Adults: The definitions of abuse relating to vulnerable adults are taken from (No Secrets, DoH 2000 and from the 1997 Consultation Who Decides issued by the Lord Chancellor's Department). The types of abuse relating to adults can be found in Appendix 1.

1.7 Additional guidance or legislation relevant to these safeguarding procedures include; The Data Protection Act 1998; Children and Adoption Act 2006; Sexual Offences Act 2003 (Remedial Order) 2012; Safeguarding Vulnerable Groups Act 2006 and Protection of Freedoms Act 2012.

1.8 Triumph Theatre School will seek to safeguard children and vulnerable adults by:

- valuing them, listening to and respecting them
- adopting child protection procedures
- sharing information about child protection and good practice with children,
- vulnerable adults, parents, staff and the companies and organisations with
- which we work
- sharing information about concerns with the appropriate agencies
- implementing a code of conduct and policy
- ensuring safer recruitment, selection and vetting of staff
- providing effective management through supervision, appraisal, support,
- training and development.

1.9 The Policy is designed to assist all individuals whom work for or volunteer for Triumph Theatre School to meet their duty of care to safeguard all children and vulnerable adults who take part in the activities provided by Triumph Theatre School. And, to ensure that where Triumph employees, students, volunteers or visitors have concerns about the welfare of children or vulnerable adults, they are in a position to take appropriate steps to address them.

1.10 Triumph Theatre School is committed to providing a clear child protection and vulnerable adults safeguarding policy and procedures and will ensure that it is communicated to all Triumph employees, Volunteers or visitors. All Triumph Theatre school employees will undergo mandatory child protection policy briefing as part of their induction



process and relevant existing Triumph employees will undergo mandatory child protection awareness workshops annually to support understanding and implementation of the policy and supporting practice guidance.

1.11 There are four recognized categories of child abuse: physical abuse, sexual abuse, neglect and emotional abuse, in addition Triumph Theatre School are aware of other areas such as self-harm and bullying that affect children and young people.

1.12 Triumph Theatre School also works with vulnerable adults who are protected by different legislation.

The main forms of abuse in relation to a vulnerable adults include; physical abuse; sexual abuse; psychological abuse; financial or material abuse; neglect and acts of omission and discriminatory abuse.

1.13 The full definitions relating to child abuse and vulnerable adults (and additional information about bullying, self-harm and eating disorders), can be found in Appendix 1.



TRIUMPH THEATRE SCHOOL
DANCE SING ACT

**Safe Guarding & Child
Protection Policy**



TRIUMPH THEATRE SCHOOL
DANCE SING ACT

2. Key personnel:

Director/Principle

Evan Summers

Email: evan.summers@triumph-theatre-school.co.uk

Tel: 0161 560 4519

The **designated senior person** for child protection is:

Ryan Lea

Email: ryan.lea@triumph-theatre-school.co.uk

Tel: 0161 560 4519



3. Roles and Responsibilities

Triumph Theatre School has a nominated senior member of staff to coordinate child protection arrangements and this person is named in this policy guidance

The school has ensured that the DSP:

- is appropriately trained
- acts as a source of support and expertise to the school community
- has an understanding of LSCB procedures¹
- keeps written records of all concerns when noted and reported by staff or when disclosed by a child, ensuring that such records are stored securely and reported onward in accordance with this policy guidance, but kept separately from the child's general file
- refers cases of suspected neglect and/or abuse to children's social care or police in accordance with this guidance and local procedure
- develops effective links with relevant statutory and voluntary agencies
- ensures that all staff sign to indicate that they have read and understood this policy
- ensures that the child protection policy is updated annually
- keeps a record of staff attendance at child protection training
- makes this policy available to parents.

Director

- ensures that the safeguarding and child protection policy and procedures are implemented and followed by all staff
- allocates sufficient time and resources to enable the DSP to carry out their roles effectively, including the assessment of pupils and attendance at strategy discussions and other necessary meetings
- ensures that all staff feel able to raise concerns about poor or unsafe practice and that such concerns are handled sensitively and in accordance with the Schools whistle blowing procedures
- ensures that child's safety and welfare is addressed through the curriculum.



4. Good practice guidelines

To meet and maintain our responsibilities towards children, the school community agrees to the following standards of good practice;

- treating all children with respect
- setting a good example by conducting ourselves appropriately
- involving children in decision-making which affects them
- encouraging positive and safe behavior among children
- being a good listener
- being alert to changes in child's behavior
- recognizing that challenging behavior may be an indicator of abuse
- reading and understanding all of the Academy's safeguarding and guidance documents on wider safeguarding issues, for example bullying, physical contact, e-safety plans and information-sharing
- asking the child's permission before doing anything for them which is of a physical nature, such as assisting with dressing, physical support during dance class or administering first aid
- maintaining appropriate standards of conversation and interaction with and between children and avoiding the use of sexualised or derogatory language
- being aware that the personal and family circumstances and lifestyles of some children lead to an increased risk of neglect and or abuse
- Never being alone with a child
- All ways taking a child to the toilet with a toilet buddy
- Report any concerns to your line manager. How ever little it may seem.
- Record any concerns or allegations as accurately as possible
- Only enter backstage or dressing room areas on the instruction of senior Triumph Theatre School staff.
- Mobile Phones and any other mobile devices must be switched off and kept in your bag away from students at all times. There is a designated phone area, which will be disclosed to volunteers and staff.
- No volunteer or Triumph Theatre School employee must not be under the influence of Alcohol, legal highs or illegal narcotics.

5. Abuse of trust

All school staff are aware that inappropriate behavior towards children is unacceptable and that their conduct towards all children must be beyond reproach. In addition, staff should understand that, under the [Sexual Offences Act 2003](#), it is an offence for a person over the age of 18 to have a sexual relationship with a person under the age of 18, where that person is in a position of trust, even if the relationship is consensual. This means that any sexual activity between a member of School staff and a child under 18 may be a criminal offence, even if that child is over the age of consent.

The school's Code of Ethical Practice sets out our expectations of staff (see: appendix 2).



6. Children who may be particularly vulnerable

Some children are at increased risk of neglect and or abuse. Many factors can contribute to an increase in risk, including prejudice and discrimination, isolation, social exclusion, communication issues and reluctance on the part of some adults to accept that abuse happens, or who have a high level of tolerance in respect of neglect.

To ensure that all of our children receive equal protection, we will give special consideration and attention to children who are:

- disabled or have special educational needs
- living in a known domestic abuse situation
- affected by known parental substance misuse
- asylum seekers
- living away from home
- vulnerable to being bullied, or engaging in bullying
- living in temporary accommodation
- living transient lifestyles
- living in chaotic, neglectful and unsupportive home situations
- vulnerable to discrimination and maltreatment on the grounds of race, ethnicity, religion or sexuality
- involved directly or indirectly in prostitution or child trafficking
- do not have English as a first language.

Special consideration includes the provision of safeguarding information, resources and support services in community languages and accessible formats.

7. Support for those involved in a child protection issue

Child neglect and abuse is devastating for the child and can also result in distress and anxiety for staff who become involved. We will support the children and their families and staff by:

- taking all suspicions and disclosures seriously
- nominating a link person who will keep all parties informed and be the central point of contact. Where a member of staff is the subject of an allegation made by a child, a separate link person will be nominated to avoid any conflict of interest
- responding sympathetically to any request from a child or member of staff for time out to deal with distress or anxiety
- maintaining confidentiality and sharing information on a need-to-know basis only with relevant individuals and agencies
- storing records securely
- offering details of help lines, counselling or other avenues of external support
- following the procedures laid down in our whistle blowing, complaints and disciplinary procedures
- cooperating fully with relevant statutory agencies.



8. Complaints procedure in respect of poor practice behavior

Our complaints procedure will be followed where a child or parent raises a concern about poor practice towards a child that initially does not reach the threshold for child protection action. Poor practice examples include unfairly singling out a child, using sarcasm or humiliation as a form of control, bullying or belittling a child or discriminating against them in some way. Complaints are managed by our Senior Leadership Team

Complaints from staff are dealt with under the school's complaints and disciplinary and grievance procedures.

9. If you have concerns about a colleague

Staff who are concerned about the conduct of a colleague towards a child are undoubtedly placed in a very difficult situation. They may worry that they have misunderstood the situation and they will wonder whether a report could jeopardise their colleague's career. All staff must remember that the welfare of the child is paramount. The school's whistle blowing code (appendix 2) enables staff to raise concerns or allegations in confidence and for a sensitive enquiry to take place. All concerns of poor practice or concerns about a child's welfare brought about by the behavior of colleagues should be reported to the board of directors. Complaints about a member of the director should be sent to the other senior leadership staff

10. Staff who are the subject of an allegation

When an allegation is made against a member of staff, set procedures must be followed. It is rare for a child to make an entirely false or malicious allegation, although misunderstandings and misinterpretations of events can and do happen. A child may also make an allegation against an innocent party because they are too afraid to name the real perpetrator. Even so, we must accept that some adults do pose a serious risk to children's welfare and safety and we must act on every allegation made. Staff who are the subject of an allegation have the right to have their case dealt with fairly, quickly and consistently and to be kept informed of its progress. Suspension is not mandatory, nor is it automatic but, in some cases, staff may be suspended where this is deemed to be the best way to ensure that children are protected.

Allegations against staff should be reported to the Senior Leadership Team. Allegations against the Managing Director should be reported to the board of directors.

11. Staff training

It is important that all staff have training to enable them to recognize the possible signs of abuse and neglect and to know what to do if they have a concern. New staff and volunteers will receive a briefing during their induction.

12. Safer recruitment

Triumph Theatre School endeavors to ensure that it does its utmost to employ 'safe' staff by following the guidance in the school's individual procedures.



Safer recruitment means that all applicants will:

- complete an application form
- provide two referees, including at least one who can comment on the applicant's suitability to work with children
- provide evidence of identity and qualifications
- be checked through the Criminal Records Bureau as appropriate to their role and be registered with the Independent Safeguarding Authority (from 2010 onwards)
- be interviewed.

All new members of staff will undergo an induction that includes familiarization with the school's safeguarding and child protection policy and identification of their own safeguarding and child protection training needs. All staff sign to confirm they have received a copy of the child protection policy (see: appendix 4).

13. Photography and images

The vast majority of people who take or view photographs or videos of children do so for entirely innocent, understandable and acceptable reasons. Sadly, some people abuse children through taking or using images, so we must ensure that we have some safeguards in place. To protect children we will:

- seek their consent for photographs to be taken or published (for example, on our website or in newspapers or publications)
- seek parental consent
- use only the child's first name with an image
- ensure that children are appropriately dressed
- encourage children to tell us if they are worried about any photographs that are taken of them.

All consent forms will be sent out by the director/principle to seek permission for the taking of images or videos of students for the above reasons. If a child tells you that they do not wish for their photo to be used, you must report it immediately your line manager.



14. E-Safety

Most of our children will use mobile phones and computers at some time. They are a source of fun, entertainment, communication and education. However, we know that some men, women and young people will use these technologies to harm children. The harm might range from sending hurtful or abusive texts and emails, to enticing children to engage in sexually harmful conversations, webcam photography or face-to-face meetings.

Chat rooms and social networking sites are the more obvious sources of inappropriate and harmful behavior and children are not allowed to access these sites whilst in school. Some children will undoubtedly be 'chatting' on mobiles or social networking sites at home and we have produced a short factsheet to help parents and children understand the possible risks.

No student is allowed to use any PC/MAC/Ipad or tablet during class.

All students of Triumph Theatre School are required to hand their Mobile devices in to the front desk before class. All staff mobile devices should be switched off and store in their bags away from the students. If staff or volunteers wish to use their mobile devices, there is a designated area which will be disclosed in their induction.

15. Safeguarding and Child Protection Procedures

Recognising abuse

To ensure that our children are protected from harm, we need to understand what types of behavior constitute abuse and neglect.

Abuse and neglect are forms of maltreatment. Somebody may abuse or neglect a child by inflicting harm, for example by hitting them, or by failing to act to prevent harm, for example by leaving a small child home alone, or leaving knives or matches within reach of an unattended toddler.

There are four categories of abuse: physical abuse, emotional abuse, sexual abuse and neglect.

Physical abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces illness in a child (this used to be called Munchausen's Syndrome by Proxy, but is now more usually referred to as fabricated or induced illness).

Emotional abuse

Emotional abuse is 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 or unloved, inadequate or valued only for meeting the needs of another person. 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 overprotection and limitation of exploration and learning, or preventing the child



participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying, causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

Sexual abuse

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, including prostitution, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative and non-penetrative acts. They may include non-contact activities, such as involving children in looking at, or in the production of, pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

Neglect

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

[\(Definitions taken from Working Together to Safeguard Children\)](#)

Bullying

While bullying between children is not a separate category of abuse and neglect, it is a very serious issue that can cause considerable anxiety and distress. At its most serious level, bullying is thought to result in up to 12 child suicides each year. All incidences of bullying should be reported and will be managed through our anti-bullying procedures. All pupils and parents receive a copy of the anti-bullying procedures on joining the school. If the bullying is particularly serious, or the anti-bullying procedures are deemed to be ineffective, the managing director and the DSP will consider implementing child protection procedures.

County Lines

County lines is a form of criminal exploitation where urban gangs persuade, coerce or force children and young people to store drugs and money and/or transport them to suburban areas, market towns and coastal towns (Home Office, 2018). It can happen in any part of the UK and is against the law and a form of child abuse.

Children and young people may be criminally exploited in multiple ways. Other forms of criminal exploitation include child sexual exploitation, trafficking, gang and knife crime.

County lines gangs are highly organised criminal networks that use sophisticated, frequently evolving techniques to groom young people and evade capture by the police.



Perpetrators use children and young people to maximise profits and distance themselves from the criminal act of physically dealing drugs (National Crime agency, 2019). Young people do the majority of the work and take the most risk.

Dedicated mobile phone lines or “deal lines” are used to help facilitate county lines drug deals. Phones are usually cheap, disposable and old fashioned, because they are changed frequently to avoid detection by the police.

Gangs use the phones to receive orders and contact young people to instruct them where to deliver drugs. This may be to a local dealer or drug user, or a dealer or drug user in another county.

Phrases that young people may use to refer to county lines include:

- ‘running a line’,
- ‘going OT/out there’
- ‘going country’
- ‘going cunch’.

These all refer to going out of town to deliver drugs or money (Thurrock Council, 2020).

Grooming

The grooming process involves the gang:

seeking out a child to exploit

observing the child for vulnerabilities

finding out what the child’s needs and wants are

manipulating the child into believing that being in the gang can fulfil these needs.

Once they have identified a child, the gang will make some form of contact and the grooming process will begin. This could be in person or via mobile phone. Social media profiles may also be used to glamourise gang life and entice young people.

Some children are groomed through family members, for instance if they have a sibling or relative who is already involved with a county lines gang.

County lines gangs offer money and status to attract young people. Children may also be attracted to joining a gang by the prospect of belonging to a ‘family’ that will protect them if their own family feels unstable or unsafe.

The following have been identified as key places where county lines gangs target and approach vulnerable young people:

- schools and further and higher educational institutions
- special educational needs schools
- places for alternative provision outside of mainstream education
- foster homes
- homeless shelters.

Once a child is part of a county lines gang their loyalty and commitment will be tested. The gang will begin to trap the child by making them feel powerless to leave. This might include threats of violence if they leave, making the child feel like they are betraying their new ‘family’, or telling the child they will get in trouble if they seek help because they have committed a criminal offence (Children’s Society, 2019).



Indicators of abuse and what you might see

Physical signs define some types of abuse, for example, bruising, bleeding or broken bones resulting from physical or sexual abuse, or injuries sustained while a child has been inadequately supervised. The identification of physical signs is complicated, as children may go to great lengths to hide injuries, often because they are ashamed or embarrassed, or their abuser has threatened further violence or trauma if they 'tell'. It is also quite difficult for anyone without medical training to categorize injuries into accidental or deliberate with any degree of certainty. For these reasons it is vital that staff are also aware of the range of behavioral indicators of abuse and report any concerns to the designated person.

Remember, it is your responsibility to report your concerns. It is not your responsibility to investigate or decide whether a child has been abused. A child who is being abused and/or neglected may:

- have bruises, bleeding, burns, fractures or other injuries
- show signs of pain or discomfort
- keep arms and legs covered, even in warm weather
- be concerned about changing for dance class or for performances
- look unkempt and uncared for
- change their eating habits
- have difficulty in making or sustaining friendships
- appear fearful
- be reckless with regard to their own or other's safety
- self-harm
- show signs of not wanting to go home
- display a change in behavior – from quiet to aggressive, or happy-go-lucky to withdrawn
- challenge authority
- become disinterested in their class work
- be constantly tired or preoccupied
- be wary of physical contact
- be involved in, or particularly knowledgeable about drugs or alcohol
- display sexual knowledge or behavior beyond that normally expected for their age.

Individual indicators will rarely, in isolation, provide conclusive evidence of abuse. They should be viewed as part of a jigsaw, and each small piece of information will help the DSP to decide how to proceed. It is very important that you report your concerns – you do not need 'absolute proof' that the child is at risk.

The impact of abuse

The impact of child abuse should not be underestimated. Many children do recover well and go on to lead healthy, happy and productive lives, although most adult survivors agree that the emotional scars remain, however well buried. For some children, full recovery is beyond their reach, and the rest of their childhood and their adulthood may be characterised by anxiety or depression, self-harm, eating disorders, alcohol and substance misuse, unequal and destructive relationships and long-term medical or psychiatric difficulties.



Taking action

Key points to remember for taking action are:

- in an emergency take the action necessary to help the child, for example, call 999
- report your concern to the DSP by the end of the day
- if the DSP is not around, ensure the information is shared with the most senior person in the school that day and ensure action is taken to report the concern to children's social care
- do not start your own investigation
- share information on a need-to-know basis only – do not discuss the issue with colleagues, friends or family
- complete a record of concern (ROC form) Which can be found on SharePoint
- seek support for yourself if you are distressed.

If you suspect a child is at risk of harm

There will be occasions when you suspect that a child may be at serious risk, but you have no 'real' evidence. The child's behavior may have changed, their artwork could be bizarre or you may have noticed other physical but inconclusive signs. In these circumstances, you should try to give the child the opportunity to talk. The signs you have noticed may be due to a variety of factors and it is fine to ask the child if they are all right or if you can help in any way.

Use the Record Of Concern (ROC) form to record these early concerns. If the child does begin to reveal that they are being harmed you should follow the advice in the section 'If a child discloses to you'.

If, following your conversation, you remain concerned; you should discuss your concerns with the designated person.

If a child discloses information to you

It takes a lot of courage for a child to disclose that they are being neglected and or abused. They may feel ashamed, particularly if the abuse is sexual, their abuser may have threatened what will happen if they tell, they may have lost all trust in adults, or they may believe, or have been told, that the abuse is their own fault.

If a child talks to you about any risks to their safety or wellbeing you will need to let them know that **you must** pass the information on – you are not allowed to keep secrets. The point at which you do this is a matter for professional judgment. If you jump in immediately the child may think that you do not want to listen, if you leave it till the very end of the conversation, the child may feel that you have misled them into revealing more than they would have otherwise.

During your conversation with the child:

- Allow them to speak freely.
- Remain calm and do not over react – the child may stop talking if they feel they are upsetting you.



- Give reassuring nods or words of comfort – ‘I’m so sorry this has happened’, ‘I want to help’, ‘This isn’t your fault’, ‘You are doing the right thing in talking to me’.
- Do not be afraid of silences – remember how hard this must be for the child.
- Under no circumstances ask investigative questions – such as how many times this has happened, whether it happens to siblings too, or what does the child’s mother think about all this.
- At an appropriate time, tell the child that in order to help them you must pass the information on.
- Do not automatically offer any physical touch as comfort. It may be anything but comforting to a child who has been abused.
- Avoid admonishing the child for not disclosing earlier. Saying ‘I do wish you had told me about this when it started’ or ‘I can’t believe what I’m hearing’ may be your way of being supportive but the child may interpret it that they have done something wrong.
- Tell the child what will happen next. The child may agree to go with you to see the designated person. Otherwise let them know that someone will come to see them before the end of the day.
- Report verbally to the designated person.
- Write up your conversation as soon as possible on the record of concern form and submit it to the designated person.
- Seek support if you feel distressed.

A record of concern form (ROC) can be found on Triumph Theatre Staff sharepoint site.

Notifying parents

The school will normally seek to discuss any concerns about a child with their parents. This must be handled sensitively and the DSP will make contact with the parent in the event of a concern, suspicion or disclosure. However, if the school believes that notifying parents could increase the risk to the child or exacerbate the problem, then advice will first be sought from children’s social care.

Referral to children’s social care

The DSP will make a referral to children’s social care if it is believed that a child is suffering or is at risk of suffering significant harm. The child (subject to their age and understanding) and the parents will be told that a referral is being made, unless to do so would increase the risk to the child.

Children with sexually harmful behavior

Children may be harmed by other children or young people. Staff will be aware of the harm caused by bullying and will use the school’s anti-bullying procedures where necessary. However, there will be occasions when a child’s behavior warrants a response under child protection rather than anti-bullying procedures. In particular, research suggests that up to 30 per cent of child sexual abuse is committed by someone under the age of 18.



The management of children and young people with sexually harmful behavior is complex and the school will work with other relevant agencies to maintain the safety of the whole school community. Young people who display such behavior may be victims of abuse themselves and the child protection procedures will be followed for both victim and perpetrator.

Confidentiality and sharing information

All staff will understand that child protection issues warrant a high level of confidentiality, not only out of respect for the child and staff involved but also to ensure that being released into the public domain does not compromise evidence. Staff should only discuss concerns with the designated person and/or the Principle/Director. That person will then decide who else needs to have the information and they will disseminate it on a 'need-to-know' basis.

Child protection information will be stored and handled in line with [Data Protection Act 1998](#) principles. Information is:

- Processed for limited purposes
- Adequate, relevant and not excessive
- Accurate
- Kept no longer than necessary
- Processed in accordance with the data subject's rights
- Secure.

ROC forms will be completed electronically and stored on a secure area and password protected with limited personal access. All other handwritten notes will be securely scanned and stored in our secure area, password protected and limited personnel access. The original notes will be destroyed.

Every effort should be made to prevent unauthorized access and sensitive information should not be stored on laptop computers, which, by the nature of their portability, could be lost or stolen. If it is necessary to store child protection information on portable media, such as a CD or flash drive, these items should also be kept in locked storage. Child protection information will be stored separately from the child's academy file and the academy file will be 'tagged' to indicate that separate information is held.

Child protection records are normally exempt from the disclosure provisions of the Data Protection Act, which means that children and parents do not have an automatic right to see them. If any member of staff receives a request from a child or parent to see child protection records, they should refer the request to the principle/director.

The Data Protection Act does not prevent school staff from sharing information with relevant agencies, where that information may help to protect a child.

The school's policy on confidentiality and information sharing is available to parents and children on request.

Reporting directly to child protection agencies

Staff should follow the reporting procedures outlined in this policy.



However, they may also share information directly with children's social care, police or the NSPCC if:

- The situation is an emergency and the designated senior person, their deputy, the Managing Director are all unavailable
- They are convinced that a direct report is the only way to ensure the child's safety.



Appendix 1

Types & Definitions of abuse; child protection & vulnerable adults

Child Protection:

The original statutory guidance of 'Working Together to Safeguard Children 2010' defined four areas of abuse relating to children. This guidance has been replaced by 'Working Together to Safeguard Children 2013', which covers the legislative requirements and expectations on individual services to safeguard and promote the welfare of children. The definitions from the original 2010 guidance are still relevant and are as follows:

Physical Abuse:

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

Emotional Abuse:

The persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person.

It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's development capability, as well as over protection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another.

It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

Sexual Abuse:

This involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration, or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing.

They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual images, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the Internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.



Neglect:

The persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- ☐ provide adequate food, clothing and shelter (including exclusion from home or abandonment),
- ☐ protect a child from physical and emotional harm or danger,
- ☐ ensure adequate supervision (including the use of inadequate care-givers),
or
- ☐ ensure access to appropriate medical care or treatment.

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

The new Working Together to Safeguard Children 2013 streamlines previous guidance to clarify the responsibilities of professionals in terms of safeguarding children. There is greater emphasis on effective systems to ensure that the child's needs are paramount, and that all professionals who come into contact with children and families are alert to their needs and any risks of harm, and to share information in a timely way.

Vulnerable Adults:

Definitions of abuse relating to vulnerable adults (No Secrets, DoH 2000 and from the 1997 Consultation 'Who Decides' issued by the Lord Chancellor's Department)

What constitutes abuse? This term 'abuse' can be subject to wide interpretation; the starting point for a definition is the following statement:

Abuse is a violation of an individual's human and civil rights by any other person or persons.

The core definition of a 'vulnerable adult' taken from the above Consultation is a person: "Who is or may be in need of community care services by reason of disability, age or illness; and is or may be unable to take care or unable to protect him or herself against significant harm or exploitation" This definition covers all people over the age of 18 years.

Consideration, however, needs to be given to a number of factors:

- ☐ Abuse may consist of a single act or repeated acts.
- ☐ it may be physical, verbal or psychological.
- ☐ It may be an act of neglect or an omission to act, or it may occur when a vulnerable person is persuaded to enter into a financial or sexual transaction to which he or she has not consented, or cannot consent.
- ☐ Abuse can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it.

Abuse can happen anywhere:

- ☐ In a person's own home
- ☐ In a residential or nursing home
- ☐ In a hospital
- ☐ In the workplace
- ☐ At a day center or educational establishment
- ☐ In supported housing, or In the street



Who can abuse?

The person responsible for the abuse is often well known to the victim, and could be:

- ☐ a paid career in a residential establishment or from a home care service,
- ☐ a social care worker, health worker, nurse, doctor or therapist, or
- ☐ a relative, friend or neighbor.

The following main different forms of abuse in relation to a Vulnerable Adult are:

Physical Abuse: includes hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate sanctions;

Sexual Abuse:

including rape and sexual assault or sexual acts to which the vulnerable adult has not consented, or could not consent or was pressured into consenting;

Psychological Abuse:

including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks;

Financial or Material Abuse:

including theft, fraud, exploitation, pressure in connection with wills, property or inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits;

Neglect and Acts of Omission:

including ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating; and

Discriminatory Abuse:

including racist, sexist, that based on a person's disability, and other forms of harassment, slurs or similar treatment.

Any or all of these types of abuse may be perpetrated as the result of deliberate intent, negligence or ignorance.

Incidents of abuse may be multiple, either to one person in a continuing relationship or service context or to more than one person at a time. This makes it important to look beyond the single incident or breach in standards to underlying dynamics and patterns of harm. Some instances of abuse will constitute a criminal offence. In this respect vulnerable adults are entitled to the protection of the law in the same way as any other member of the public.

In addition, statutory offences have been created which specifically protect those who may be incapacitated in various ways. Examples of actions, which may constitute criminal

offences are; assault, whether physical or psychological, sexual assault and rape, theft, fraud or other forms of financial exploitation, and certain forms of discrimination, whether racial or gender grounds.



Criminal Offences:

These offences differ from all other non-criminal forms of abuse in that the responsibility for initiating action rests with the police and the Crown Prosecution Service. Also when complaints about alleged abuse suggest that a criminal offence may have been committed, it is imperative that reference should be made to the police as a matter of urgency.

Bullying:

- The Anti-Bullying Alliance defines bullying as:
- Bullying behavior deliberately causes hurt (either physically or emotionally)
- Bullying behavior is repetitive (though one-off incidents such as the posting of an image, or the sending of a text which is then forwarded to a group, can quickly become
- repetitive and spiral into bullying behavior)
- Bullying behavior involves an imbalance of power (the person on the receiving end feels like they cannot defend themselves)

Bullying is not:

- Teasing and banter between friends without intention to cause hurt
- Falling out between friends after a quarrel or disagreement
- Behavior that all parties have consented to and enjoy (though watch this one as coercion can be very subtle)
- Bullying can take the following forms:
- Emotional – being unfriendly, ignoring someone, not involving them in activities, sending hurtful or tormenting texts, humiliating or ridiculing someone
- Physical – pushing, kicking, hitting, punching or pinching or any use of violence
- Racist – racial taunts, graffiti or gestures
- Disability – bullying because of how somebody looks or presents related to their disabilities. Children with disabilities are more likely than their non-disabled peers to be
- excluded from activities
- Sexual – unwanted physical contact or sexually abusive comments. Sexual bullying can
- also relate to gender and gender identity and includes those who do not fit with the
- gender role prescribed to them
- Homophobic – because of, or focusing, on the issue of a young person's actual or perceived sexual orientation
- Verbal – in the case of children with disabilities this can take place in sign language –
- name calling, sarcasm, spreading rumors or teasing

Self-Harm:

- Self-harm is where a person hurts himself or herself intentionally and this can occur in a range of ways:
- Cutting themselves (usually with a knife or razor)
- Burning their body
- Bang their heads (not to be confused in situations when working with a young person
- who may have additional (special) needs, but this could be an indicator)



- Throw their body against something hard
- Punch themselves
- Stick things in their body
- Swallow inappropriate objects or tablets

Eating disorders:

- Eating disorders are not just about food, they are a way of coping with emotional distress. Eating disorders can affect both sexes, people of any background and any age. About 10% of people with eating disorders are male. 18% of anorexics will die.
- Eating disorders can be recognized by a persistent pattern of unhealthy eating or dieting
- behavior that can cause health problems and/or emotional and social distress.
- There are three official categories of eating disorders:
- Anorexia nervosa
- Bulimia nervosa
- Eating disorder not otherwise specified (EDNOS)

People with EDNOS do not have the full set of symptoms for either anorexia or bulimia but may have aspects of both. EDNOS is as serious as other eating disorders and as potentially damaging to health.

Anorexia Nervosa:

- The rarest – 10% of eating disorders – typically affects young people aged 12-20 years
- Individuals with anorexia nervosa do not maintain or have a body weight that is normal
- or expected for their age and height – they are usually less than 86% of their expected
- weight
- Even when underweight, individuals with anorexia continue to be fearful of weight gain.
- Their thoughts and feelings about their size and shape have a profound impact on their
- sense of self-esteem as well as their relationships
- Women with anorexia often stop having their periods
- They often do not recognize or admit the seriousness of their weight loss and deny that
- it may have permanent adverse health consequences
- Bulimia Nervosa:
- 40% of cases mainly with adolescent onset – affects individuals between the ages of 18-
- years
- Individuals with bulimia nervosa experience binge-eating episodes, which are marked by
- eating an unusually large amount of food within a couple of hours, feeling compelled to



- eat and find it difficult if not ‘impossible’ to stop eating
- This is then followed by attempts to ‘undo’ the consequences of the binge by using
- unhealthy behaviors such as self-induced vomiting, misuse of laxatives, enemas, diuretics, severe caloric restriction or excessive exercising
- Individuals are obsessed and preoccupied with their shape and weight and often feel their self-worth is dependent on their weight or shape

Binge Eating Disorder:

- Individuals with binge eating disorder (BED) engage in binge eating, but do not regularly use inappropriate or unhealthy weight control behaviors such as fasting or purging to counteract the binges
- BED is more common amongst individuals who are overweight or obese, terms used to
- describe these problems include; compulsive overeating, emotional eating or food
- addiction
- BED is not an officially recognized disorder, but is included in the EDNOS category
- Eating problems never exist in isolation; they are usually a symptom of other problems e.g. coping with painful feelings and/or situations, boredom, anxiety, anger, shame, sadness, loneliness. Adolescence can be a key time. Stressful or traumatic events can trigger an eating problem; e.g. bullying, bereavement, family tensions, school problems, self-harm, low self-esteem, sexual, physical, emotional abuse or neglect, negative criticism, fragile sense of self, and it can be more about control than about food itself.

County Lines

County lines is a form of criminal exploitation where urban gangs persuade, coerce or force children and young people to store drugs and money and/or transport them to suburban areas, market towns and coastal towns (Home Office, 2018). It can happen in any part of the UK and is against the law and a form of child abuse.

Children and young people may be criminally exploited in multiple ways. Other forms of criminal exploitation include child sexual exploitation, trafficking, gang and knife crime.

County lines gangs are highly organised criminal networks that use sophisticated, frequently evolving techniques to groom young people and evade capture by the police.

Perpetrators use children and young people to maximise profits and distance themselves from the criminal act of physically dealing drugs (National Crime agency, 2019). Young people do the majority of the work and take the most risk.

Dedicated mobile phone lines or “deal lines” are used to help facilitate county lines drug deals. Phones are usually cheap, disposable and old fashioned, because they are changed frequently to avoid detection by the police.

Gangs use the phones to receive orders and contact young people to instruct them where to deliver drugs. This may be to a local dealer or drug user, or a dealer or drug user in another county.



Phrases that young people may use to refer to county lines include:

- 'running a line',
- 'going OT/out there'
- 'going country'
- 'going cunch'.

These all refer to going out of town to deliver drugs or money (Thurrock Council, 2020).

Risks

County lines is a cross-cutting issue that often overlaps with other forms of abuse and criminal exploitation. It can lead to serious physical and emotional harm to young people (Home Office, 2020a).

Criminalisation

If adults who work with children don't understand that county lines is a form of abuse, they may see children involved in county lines activity as criminals rather than as victims of criminal exploitation (Children's Society, 2019).

This can lead to children not getting the safeguarding support and protection they need.

Drugs

Perpetrators may use drugs and alcohol to entice young people into the gang lifestyle. In some cases gangs trick young people into incurring drug debts that they then have to pay off through county lines activity. This is often referred to as 'debt bondage'.

Physical violence

There is a strong link between county lines activity and:

- serious violence such as knife and gun crime
- the use of substances such as acid as a weapon
- homicide

(Home Office, 2018).

Conflict between rival gangs that are in dispute over who controls an area can lead to serious injury or death for young people who get caught in the wrong place.

The fear of serious physical violence as revenge for disrespecting, 'snitching' or 'grassing' is one of the things that prevents young people from leaving gangs or seeking help from the police and other agencies.

Sexual abuse and exploitation

As well as being used to transport drugs, county lines gangs may sexually abuse and exploit children of any gender (National Crime Agency, 2019).

This can happen through:

- young people being forced into sexual activity with gang members or for the gang's financial gain
- vulnerable children being made to work off drug debts through sexual exploitation as 'payment' (this might happen after the child has been coerced into becoming dependent on drugs by the gang)
- children being groomed into what they believe is a romantic relationship with a gang member which then leads to exploitation

(National Crime Agency, 2019).



Some children are forced to transport drugs in ways that are invasive and harmful to their bodies. Young people may be forced to swallow bags of drugs to transport them, which could potentially be life threatening.

The practice of 'plugging' is also common, whereby drugs are inserted into a child's rectum or vagina. This is a form of sexual abuse and in some cases it can cause a child's death (Ofsted et al, 2018).

Trafficking and missing children

Young people can be trafficked to locations far away from where they live for long periods of time by a county lines gang. They may end up staying in unsuitable accommodation in an area that is unknown to them. This might include short term holiday lets or budget hotels.

Cuckooing

Cuckooing happens when a county lines gang takes over the home of a vulnerable adult by coercion or force, and use it as a base to deal drugs from. The vulnerable adult may have issues with substance misuse or mental health problems, be elderly or disabled or be in debt to the gang. These factors can make it easier for the gang to exploit and control them.

Children can be forced or coerced to stay at cuckooed addresses for long periods of time to deal drugs.

A cuckooed address is sometimes referred to as a 'bando' or a 'spot' by county lines gangs (Thurrock Council, 2020).

Financial exploitation and abuse

Gangs are known to launder money from drug sales through children's bank accounts, either by using an existing account or forcing or persuading the child to open a new one (Children's Society, 2019).

Female Genital Mutilation (FGM)

Female genital mutilation (FGM) is the partial or total removal of the external female genitalia for non-medical reasons. It's also known as female circumcision or cutting. FGM is often performed by someone with no medical training who uses instruments such as a knife, scalpel, scissors, glass or razor blade. Children are rarely given anaesthetic or antiseptic treatment and are often forcibly restrained.

The age at which FGM is carried out varies. It may take place:

- when a female baby is newborn
- during childhood or adolescence
- just before marriage
- during pregnancy.



There are four main types of FGM:

- Type 1 (clitoridectomy) – removing part or all of the clitoris.
- Type 2 (excision) – removing part or all of the clitoris and cutting the inner and/or outer labia.
- Type 3 (infibulation) – narrowing the vaginal opening.
- Type 4 – other harmful procedures to the female genitals including pricking, piercing, cutting, scraping or burning (NHS Choices, 2021).

Labia elongation (also referred to as labia stretching or labia pulling) involves stretching the labia minora, sometimes using sticks, harnesses or weights (AFRUCA, 2016).

FGM is child abuse and is illegal in the UK. It can be extremely dangerous and can cause:

- severe pain
- shock
- bleeding
- infection such as tetanus, HIV and hepatitis B and C
- organ damage
- blood loss and infections
- death in some cases.

Sometimes religious, social and cultural reasons are given to justify FGM, however it's a dangerous practice and can cause long-lasting health problems that continue throughout a child's life, including:

- [incontinence or difficulties urinating](#)
- frequent or chronic vaginal, pelvic or urinary infections
- menstrual problems
- kidney damage and possible kidney failure
- cysts and abscesses
- pain during sex
- infertility
- complications during pregnancy and childbirth
- emotional and mental health problems (NHS Choices, 2021).

Recognising FGM

Risks and vulnerability factors

FGM can happen in the UK or abroad. Instances of FGM have been recorded in some African countries, areas of the Middle East, some Asian countries, the Americas, Europe and Australia (Department for Education (DfE), Department of Health and Social Care (DHSC) and Home Office, 2020).

The DfE, DHSC and Home Office have identified higher rates of FGM in certain countries, which may put children from these communities at higher risk. A list of these countries is provided in the [multi-agency statutory guidance on female genital mutilation](#) (DfE, DHSC and Home Office, 2020).

Children are also considered to be at higher risk if FGM has already been carried out on their mother, sister or a member of their extended family (DfE, DHSC and Home Office, 2020).



Signs and indicators

A child at immediate risk of FGM may ask you directly for help. But even if they don't know what's going to happen, there may be other signs. You may become aware of:

- a relative or 'cutter' visiting from abroad
- a special occasion or ceremony to 'become a woman' or prepare for marriage
- a female relative being cut – a sister, cousin, or an older female relative such as a mother or aunt
- a family arranging a long holiday or visit to family overseas during the summer holidays
- unexpected, repeated or prolonged absence from school
- a girl struggling to keep up in school and the quality of her academic work declining
- a child running away from or planning to leave home.

A child or woman who's had female genital mutilation (FGM) may:

- have difficulty walking, standing or sitting
- spend longer in the bathroom or toilet
- appear withdrawn, anxious or depressed
- display unusual behaviour after an absence from school or college
- be particularly reluctant to have routine medical examinations
- ask for help, but may not be explicit about the problem due to embarrassment or fear.

Assessing risk

The National FGM Centre has produced an assessment tool to help social workers dealing with situations where there are concerns about FGM to decide on the most appropriate action to take (National FGM Centre, 2021).

The Department of Health also provides guidance to help health professionals identify and assess the risk of female genital mutilation (FGM) for patients in their care and talk to patients and family members about FGM (Department of Health, 2017).



Appendix 2

Code of ethical practice for School staff

All School staff/volunteers are valued members of the school community. Everyone is expected to set and maintain the highest standards for their own performance, to work as part of a team and to be an excellent role model for our children.

All school staff/volunteers should:

- place the safety and welfare of children above all other considerations
- treat all members of the school community, including children, parents, colleagues and governors with consideration and respect
- adhere to the principles and procedures contained in the policies in our safeguarding portfolio and in teaching and learning policies
- treat each child as an individual and make adjustments to meet individual need
- demonstrate a clear understanding of and commitment to non-discriminatory practice
- recognize the power imbalances between children and staff, and different levels of seniority of staff and ensure that power and authority are never misused
- understand that school staff are in a position of trust and that sexual relationships with a child, even over the age of 16, may be an offence
- be alert to, and report appropriately, any behavior that may indicate that a child is at risk of harm
- encourage all children to reach their full potential
- never condone inappropriate behavior by children or staff
- take responsibility for their own continuing professional development
- refrain from any action that would bring the school into disrepute
- value themselves and seek appropriate support for any issue that may have an adverse effect on their professional practice.
- Remember all the good practice guidelines.

Staff name _____

Signature _____

Date _____

Please sign and return to the DSP or Director/Principle.



Appendix 3

Whistle blowing code for issues relating to children and young people

Purpose of the code

The school adheres to the local authority whistleblowing policy and procedures that enable staff to raise concerns relating to:

- crime
- a miscarriage of justice
- illegality
- health and safety
- environmental or property damage
- unauthorized use of public funds
- concealing or attempting to cover up any of the above.

This code provides additional information to help staff to understand the role of whistle blowing in the context of poor practice and unacceptable conduct and attitudes towards children.

When to use the code

The whistle blowing procedures and this code may be used by anyone employed by the school in a paid or voluntary capacity who believes they have reason to suspect that the conduct of an employee towards a child is inappropriate.

Inappropriate conduct includes, but is not confined to:

- bullying or humiliation
- contravening health and safety guidelines
- serious breaches of the school's code of ethical practice
- professional practice that falls short of normally accepted standards
- compromising pupils' welfare but in a way that does not meet the threshold for child protection intervention.

Reasons for blowing the whistle

Staff will naturally be reticent to report a concern about the conduct of a colleague. However, each individual must take responsibility for ensuring that children are fairly treated. If poor practice is allowed to continue unchecked, it could escalate with serious consequences.

Your action not only protects children, but also deters any suggestion that you have colluded with poor practice that you knew was occurring but chose to ignore.

Whistle blowing can also support the member of staff who is the subject of the concern. Their conduct may result from inexperience or lack of training that can be addressed by the academy, or they may be under stress and be relieved when their conduct is questioned.

Staff who deliberately fail children and show no remorse or desire to improve are unlikely to welcome being exposed, but their conduct has to be confronted for the sake of the child and the reputation of the whole school.



**Safe Guarding & Child
Protection Policy**



Confirmation of receipt of safeguarding children and child protection policy

I can confirm that I have had read this safe guarding children policy and procedure and will adhere to the good practice set out below.

- treating all children with respect
- setting a good example by conducting ourselves appropriately
- involving children in decision-making which affects them
- encouraging positive and safe behavior among children
- being a good listener
- being alert to changes in child's behavior
- recognising that challenging behavior may be an indicator of abuse
- reading and understanding all of the Academy's safeguarding and guidance documents on wider safeguarding issues, for example bullying, physical contact, e-safety plans and information-sharing
- asking the child's permission before doing anything for them which is of a physical nature, such as assisting with dressing, physical support during dance class or administering first aid
- maintaining appropriate standards of conversation and interaction with and between children and avoiding the use of sexualised or derogatory language
- being aware that the personal and family circumstances and lifestyles of some children lead to an increased risk of neglect and or abuse
- Never being alone with a child
- All ways taking a child to the toilet with a toilet buddy
- Report any concerns to your line manager. However little it may seem.
- Record any concerns or allegations as accurately as possible
- Only enter backstage or dressing room areas on the instruction of senior Triumph Theatre School staff.
- Mobile Phones and any other mobile devices must be switched off and kept in your bag away from students at all times. There is a designated phone area, which will be disclosed to volunteers and staff.
- No volunteer or Triumph Theatre School employee must not be under the influence of Alcohol, legal highs or illegal narcotics.

I confirm that I have received and read the academy's child protection policy.
I have been made aware of my duty to safeguard and promote children's welfare.
The procedure for reporting concerns about a child has been explained to me.

Signed: _____

Print: _____

Date: _____

Position: _____

Please sign and return to the DSP or Principle/Director.