CHILD SAFEGUARDING POLICY



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# SECTION 1: CHILD SAFEGUARDING POLICY

## POLICY OBJECTIVES

This policy and related documents apply to Adele Stitch School of Dance (ASSOD):

The purpose of this policy is to demonstrate the commitment of ASSOD to build a safer environment in dance for children:

Participation in dance can provide valuable life experiences and has the potential to offer significant learning opportunities for children that can help develop valuable life skills as well as enhancing self-esteem and confidence.

Although the majority of children benefit from participation in sport, some young people have experienced abuse and/or poor practice linked to their participation. In addition, some children who are participating in dance may be experiencing abuse unrelated to the sport, either at home or within the wider community.

Teachers, volunteers and officials are in the privileged position of having an opportunity to build strong relationships with young people in their care and are therefore ideally placed to recognise signs that a child may be being abused. This can be achieved by being alert to and aware of the risks which individual abusers, or potential abusers, may pose to children and being aware of and responding to any indicators that a child may be experiencing abuse.

ASSOD recognises the importance of ensuring there are procedures in place that outline the appropriate steps to take in the event of a concern. In addition, it is essential to ensure there are comprehensive policies and practical guidance that promote the welfare of children and minimise any identifiable risks within the sports environment.

ASSOD aspires for dance to be provided in an environment where individuals feel able to raise concerns and where poor practice and inappropriate behaviour can be openly challenged. This can be facilitated by championing the promotion of children’s welfare and providing access to advice and training to help support staff, members and volunteers to understand their safeguarding responsibilities.

The development of ASSOD’s policy and procedures is important to support both ASSOD and its volunteers and staff to fulfil their duty to safeguard and promote the welfare of children in their care and ensure a consistent and best practice approach.

## APPLICATION

ASSOD acknowledges the duty of care to safeguard and promote the welfare of children and is fully committed to developing robust policy and procedures that minimise the risk of children experiencing abuse within the dance school setting.

ASSOD aims to ensure all children have a positive, enjoyable and beneficial experience in dance in a safe and child centered environment.

ASSOD recognises that safeguarding is everyone’s responsibility and expects all staff, members and volunteers to be fully committed to promoting and implementing the policy throughout dance.

The Safeguarding Children Policy and Procedures are mandatory for anyone within ASSOD who is involved either directly or indirectly with children as part of their role with ASSOD. Anyone who supplies a service for children on behalf of ASSOD must demonstrate that they have met equivalent standards as those set out in the policy and will be required to comply with ASSOD’s safeguarding procedures and guidance for the duration of their involvement within the dance school.

**DEFINITION OF A CHILD**

For the purposes of this policy, a child means a person who has not attained the age of 18 years.

* **The Children Act 1989**
* **The Children (Northern Ireland) Order 1995**
* **The Children and Young People (Scotland) Act 2014**
* **The Social Services and Wellbeing (Wales) Act 2014**

**If you have an immediate and serious concern about the safety or health of a child, contact the emergency services on 999.**

## KEY PRINCIPLES

* This policy is based on the following key principles:
* The welfare of children is the primary concern.
* The protection and wellbeing of all children in our care is everyone’s responsibility.
* A child, whatever their age, culture, disability, gender, language, racial origin, socio-economic status, religious belief and/or sexual identity have the right to protection from all forms of harm and abuse.
* A child has the right to express views on all matters that affect them, should they wish to do so.
* A child’s rights and opinions should be respected and promoted.
* The best way to promote the wellbeing, health and development of a child is to work in partnership with the child, parents/carers and other relevant organisations.

## IMPLEMENTATION

To implement this policy and keep children safe, ASSOD will:

* promote the health and wellbeing of children through the provision of opportunities to take part in dance safely
* put in place procedures to promote the wellbeing and protection of children
* seek to prevent and address bullying through the development and implementation of effective anti-bullying policies and practices
* appoint a Lead Safeguarding Officer
* recruit, train and support our volunteers and staff to prioritise and safeguard the wellbeing of children who take part in our activities and protect them from harm
* require volunteers and staff to adopt and abide by this safeguarding policy and related procedures and regulations, including the codes of conduct for working with children
* respect the rights of all children to express views on any matter which affect them, should they wish to do so
* respond to any child wellbeing or protection concerns in line with this policy and related procedures
* regularly monitor, review and evaluate the implementation of this policy and related procedures.
* promote safeguarding best practice in all aspects of the dance school activity
* ensure all volunteers, teachers, students and parents agree to and sign the relevant code of conduct for their role
* accept that all office bearers volunteers and staff have a responsibility for safeguarding children’s wellbeing and protecting them from harm, and are prepared to respond to any concerns of abuse or poor practice
* challenge and change poor practice
* implement any recommendations of North Somerset Council Safeguarding Team
* promote an environment where all concerns can be raised without fear of victimisation or reprisal
* ensure that everyone volunteering or working with children at the school attends a relevant child safeguarding training course every three years.

## EQUALITY

ASSOD endorses the principle of equality and will strive to ensure that everyone who wishes to be involved in the school (in all its disciplines and forms):

* has a genuine and equal opportunity to participate to the full extent of their own ambitions and abilities, without regard to their age, sex, gender identity, disability, marital or civil partnership status, pregnancy or maternity, religion, race, socio-economic status or sexual orientation
* can be assured of an environment in which their rights, dignity and individual worth are respected and, in particular, that they are able to enjoy their discipline without the threat of intimidation, victimisation, harassment or abuse.

# SECTION 2: SUPPORTING INFORMATION

This policy addresses the following forms of harm:

* **Practice concerns**
* **Wellbeing concerns**
* **Child abuse.**

## PRACTICE CONCERNS

A practice concern is behaviour that falls short of abuse but which nevertheless harms or places someone at risk of harm, or has a negative and adverse effect on the safety and wellbeing of children. Practice concerns include any behaviour, act or omission by members of staff, volunteers or students that may contravene this policy, or any associated procedures and guidelines, in particular the codes of conduct.

This policy, along with the safeguarding procedures, codes of conduct and safeguarding regulations, promotes and supports the maintenance of healthy and positive relationships between those in positions of trust, such as teachers, and the young people in their care.

In England and Wales the government has amended the Sexual Offences Act 2003 and extended the legal definition of position of trust to include non-statutory settings such as sport by reference to the activity which the adult is carrying out in relation to the child, namely, coaching, teaching,

training, supervising or instructing. In effect the changes have extended the settings and roles where it is illegal for an adult holding a position of trust to enter into a sexual relationship with a 16- or

17-year-old in their care.

However, ASSOD has adopted a broader interpretation of the term “position of trust” to acknowledge the inherent power imbalance in teacher/dancer relationships. Such relationships can be exploitative and where this happens it can impact on a child’s wellbeing and/or lead to abuse. Therefore, this policy addresses any practice in dance that may be considered an abuse of a position of trust.

In addition, it would be considered as an abuse of a position of trust in dance if a dancer is coerced or indoctrinated with attitudes to training, drugs and cheating, or social, political and religious views (radicalisation) which go against societal norms or the rules of competition.

Further examples of practice concerns may include but are not restricted to:

* Teachers who continually break rules, ignore recognised good practice guidelines, breach the codes of conduct
* individuals engaging in behaviours and practices that are known to be risk factors in cases of abuse
* continuing with a session or activity when there is a heightened risk to the group or dancer’s wellbeing and safety
* staff or volunteers leading activities for which they are not trained, insured or licensed

## WELLBEING CONCERNS

Whilst most children’s needs will be met by their parents and carers, it is acknowledged that participation in sports can support and promote a child’s wellbeing. Government policy in all parts of the UK recognises that clubs and their staff and volunteers are often significant role models and trusted people in children’s lives. They are therefore well placed to identify when a child’s wellbeing and health is, or is at risk of, being adversely affected by any matter, and to act in the child’s best interests.

A wellbeing concern can be identified in different circumstances. For example:

* A child may reveal that they are worried, anxious or upset about an incident or set of circumstances, either within or outside of the dance school.
* You may have noticed a change in a child’s behaviour, demeanour or developmental progress.
* You may have concerns about the impact on a child of an incident or set of circumstances, either within or outside of the sport.
* You may have concerns for a child’s physical or mental health.

There are of course other factors which can impact on a child’s wellbeing.

## CHILD ABUSE

There are four well established categories of abuse:

* Physical
* Sexual
* Emotional
* Neglect.

Detailed descriptions of the four main categories of abuse, along with information about additional vulnerabilities faced by some children and young people, can be found in Appendix 2.

## POLICY REVIEW

This policy will be reviewed every three years, or sooner in the event of legislative changes or revisions to related policies and guidelines.

## SAFEGUARDING CONTACT DETAILS

|  |  |  |
| --- | --- | --- |
| NAME | POSITION | CONTACT |
| **Adele Stitch** | [Welfare](mailto:safeguarding@uka.org.uk) Officer | 07974537580 |
| **North Somerset** | [Local](mailto:welfare@englandathletics.org) Authority Safeguarding | 01275 888801 |
| **NSPCC** | [National](mailto:safeguardingandwelfare@welshathletics.org) Organisation | 08088005000 |
| **Childline** | [National](mailto:safeguardingandwelfare@welshathletics.org) Organisation | 0800 1111 |
| **Family Lives** | [National](mailto:safeguardingandwelfare@welshathletics.org) Organisation | 08088002222 |
| **National Domestic Abuse Helpline** | [National](mailto:safeguardingandwelfare@welshathletics.org) Organisation | 08082000247 |
| Samaritans | [National](mailto:safeguardingandwelfare@welshathletics.org) Organisation | 116123 |

# SECTION 3: APPENDICES

## APPENDIX 1: PROCESS MAP – REPORTING A CONCERN ABOUT A CHILD

**Concern arises about a child or about the conduct of a member of staff, or volunteer towards a child.**

**Is there immediate risk to a child or young person?**

**NO**

**YES**

**Call 999 and then submit a safeguarding concern to Adele Stitch or NS Safeguarding (northsomersetsafeguarding.co.uk)**

**01275 888801**

**Is the Welfare Officer Implicated?**

**YES**

**NO**

S**ubmit a s**[**afeguarding concern**](https://www.uka.org.uk/submit-a-concern/)  **to Adele Stitch**

**07974537580**

S**ubmit a s**[**afeguarding concern**](https://www.uka.org.uk/submit-a-concern/)  **to NS Safeguarding (northsomersetsafeguarding.co.uk)**

**01275 888801**

**Statuary Agengy will review and take next actions**

**NS Safeguarding will liaise with ASSOD with next steps**

**NO**

**YES**

**Is a statuary agency required?**

**NS Safeguarding review and decide the investigation level**

**s**[**afeguarding concern**](https://www.uka.org.uk/submit-a-concern/)  **reported to NS Safeguarding with facts from report form**

## APPENDIX 2: CHILD ABUSE – DEFINITIONS, SIGNS AND INDICATORS

### What is Child Abuse and Child Neglect?

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting, or by failing to act to prevent, significant harm to the child. Children may be abused in a family, or an institutional or sporting setting, by those known to them or, more rarely, by a stranger.

It is helpful to consider the different ways in which children can be abused, both within and out or our discipline.

There are four agreed categories of abuse:

* Emotional
* Physical
* Sexual
* Neglect

These categories are not mutually exclusive. For example, a child experiencing physical abuse is undoubtedly experiencing emotional abuse as well. The definitions which follow show the different ways in which these categories of abuse may be experienced by a child.

### Recognising the Signs of Child Abuse

After each definition that follows we have included some guidance on the main signs of abuse to look out for. However, be aware that although the physical and behavioural signs listed may be symptomatic of abuse, they may not always be an indicator and, conversely, children experiencing abuse may not demonstrate any of these signs.

Child abuse is often difficult to recognise. It is not your responsibility to decide whether a child has been abused or not. That is the role of trained professionals. At ASSOD we believe it’s

everyone’s responsibility to protect children. If you know or suspect that a child is being harmed or abused, you need to act.

### Emotional Abuse

Emotional abuse is defined as the persistent emotional neglect or ill treatment that has severe and persistent adverse effects on a child’s emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate or valued only insofar as they meet the needs of another person.

It may involve the imposition of age or developmentally inappropriate expectations of a child. It may involve causing children to feel frightened or in danger and includes exploiting or corrupting children. Some level of emotional abuse will be present in other types of ill treatment of children, but it can occur independently of other forms of abuse.

Examples of emotional abuse may include:

* a persistent failure to show any respect to a child (e.g. continually ignoring a child)
* humiliating a child by continuously criticising their performance
* continually being aggressive towards a child
* acting in a way which undermines a child’s self-esteem.

Signs which may raise concerns about emotional abuse include:

* low self-esteem
* running away from home
* extremes of passivity and aggression
* significant decline in concentration
* indiscriminate friendliness and neediness
* self-harming.

### Physical Abuse

Physical abuse is defined as the causing of physical harm to a child or young person. It may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning or suffocating. Physical harm may also be caused when a parent or carer feigns the symptoms of, or deliberately causes, ill health to a child they are looking after.

Most children sustain accidental cuts and bruises throughout childhood. These are likely to occur in parts of the body like elbows, shins and knees. An important indicator of physical abuse is when the bruises or injuries are unexplained, or the explanation does not fit the injury, or the injury appears on parts of the body where accidental injuries are unlikely (e.g. on the cheeks or thighs). The age of the child must also be considered. It is possible that some injuries may have occurred for other reasons (e.g. certain skin conditions and diseases).

Physical harm can be caused by:

* overtraining or dangerous training (e.g. sudden increases in training workloads)
* allowing a student to compete too frequently over an extended period
* failure to do a risk assessment of physical limits or pre-existing medical conditions
* administering, condoning or failure to intervene in drug use.

Signs which may raise concerns about physical abuse include:

* refusal to discuss injuries
* improbable explanations for injuries
* reluctance to go home
* repeat injuries over time
* untreated injuries
* fear of parents being asked for an explanation
* avoiding certain activities due to injury
* avoiding the removal of warm-up clothing during sessions.

### Sexual Abuse

Sexual abuse is defined as any act that involves the child in any activity for the sexual gratification of another person, whether or not it is claimed that the child either consented or assented. Sexual abuse involves forcing or enticing a child to take part in sexual activities, whether or not the child

is aware of what is happening. The activities may involve physical contact, including penetrative or non-penetrative acts. They may include non-contact activities, such as involving children in looking at, or in the production of, pornographic material or in watching sexual activities, using sexual language towards a child or encouraging children to behave in sexually inappropriate ways.

Some children may never be able to tell someone they have been sexually abused. Changes in a child’s behaviour may be a sign something has happened. In some instances, there may be no overt signs to suggest that a child has been sexually abused.

Examples of sexual abuse may include:

* exposure to sexually explicit inappropriate language or jokes
* showing a child pornographic material or using a child to produce such material
* inappropriate touching
* sexual intercourse and/or sexual activity with a child under 16.

Signs which may raise concerns about sexual abuse include:

* lack of trust in adults, overfamiliarity with adults, or fear of a particular adult
* sleep disturbance (nightmares, bed-wetting, fear of sleeping alone)
* girls taking over the mothering role
* reluctance or refusal to participate in physical activity, or to change clothes
* drug/alcohol abuse
* psychosomatic indicators such as recurrent abdominal pain or headaches
* eating disorders
* social isolation – being withdrawn or introverted, poor peer relationship
* running away from home
* school problems (e.g. falling standards, truancy)
* low self-esteem
* sexual knowledge beyond the child’s age
* sexual promiscuity/over-sexualised behaviour
* anxiety/depression/self-harm/suicide attempts.

### Neglect

Neglect is defined as the persistent failure to meet a child’s basic physical and/or psychological needs, which is likely to result in the serious impairment of the child’s health or development. It may involve a parent or carer failing to provide adequate food, shelter and clothing, to protect a child from physical harm or danger, or to ensure access to appropriate medical care or treatment. It may also include neglect of, or failure to respond to, a child’s basic emotional needs.

Neglect may also result in the child being diagnosed as suffering from ‘non-organic failure to thrive’, where they have significantly failed to reach normal weight and growth of development milestones, and where physical and genetic reasons have been medically eliminated. In its extreme form, children can be at serious risk from the effects of malnutrition, lack of nurturing and stimulation.

This can lead to serious long-term effects such as greater susceptibility to serious childhood illnesses and reduction in potential stature. With young children in particular, the consequences may be life- threatening within a relatively short period of time.

Examples of physical neglect may include:

* exposing a child to extreme weather conditions (e.g. heat and cold)
* failing to seek medical attention for injuries
* exposing a child to risk of injury through the use of unsafe equipment
* exposing a child to a hazardous environment without a proper risk assessment of the activity
* failing to provide adequate nutrition and water.

Signs which may raise concerns about neglect include:

* constant hunger
* constant tiredness
* untreated medical problems or injuries
* poor relationships with peers
* poor personal hygiene/clothing in poor condition
* being frequently late or not attending sessions
* low self-esteem
* stealing.

There are other circumstances and behaviours that can be considered as either forms of abuse, indicators that a child is at risk of abuse, or that a child’s wellbeing is being compromised. The following examples should not be considered as a definitive list.

### Bullying

Bullying is a breach of children’s rights under several articles of the UN Convention on the Rights of the Child.

There is no single legal definition of bullying in the UK, and whilst there are different descriptions of bullying across the Home Countries, it can broadly be termed as repeated behaviour which is intended to hurt someone either emotionally or physically, and is often aimed at certain people

because of their race, religion, gender or sexual orientation, or any other aspect such as appearance or disability.

ASSOD is committed to challenging all types of prejudice-based bullying and language, including bullying based on the protected characteristics listed in the Equality Act 2010.

This policy relates to both online and face-to-face bullying. We do not accept that bullying that happened online is something that happened ‘outside’ of our discipline. Bullying in any form is behaviour that happens ‘to’ someone and it will have an impact upon them.

We expect that all volunteers and staff will work together to prevent and reduce bullying and prejudice amongst children and young people by:

* developing positive relationships amongst children, young people and adults which are mutually respectful, responsible and trusting
* building capacity, resilience and skills in children and young people, and parents and carers to prevent and deal with bullying
* preventing bullying of children and young people through a range of strategies and approaches
* supporting children, young people and their parents and carers who are affected by bullying.

### Children and Young People with a Disability

Whilst disabled children are likely to suffer the same type of abuse as other children, research suggests that children with a disability are three to four times more likely to be abused than

non-disabled children (NSPCC 2014, Scottish Government 2014a). Research has also shown that children with communication impairments, behavioural disorders, learning disabilities and sensory impairments are particularly vulnerable.

The most common forms of abuse experienced by disabled children are neglect and emotional abuse, although they may experience multiple abuses.

Communicating abuse is difficult for any child. They may be confused, fearful, traumatised and uncertain about what has happened and what might happen in the future. Not every child will tell someone of their abuse or harm and there should be no greater expectation that disabled children will tell someone more readily than any other children. Telling someone about abuse can

be more difficult for children who have a wide range of communication styles, and this can be more problematic if the perpetrator is also in a trusted role.

### Negative Discriminatory Behaviour

Children and young people may experience harassment or negative discrimination because of their race or ethnic origin, socio-economic status, culture, age, disability, gender, sexuality or religious beliefs. Although not in itself a category of abuse, for the purposes of this policy, negative discriminatory behaviour is categorised as a wellbeing concern, but in serious cases it can be considered emotional abuse.

### Children and Young People Experiencing or Affected by Mental Health Problems

The emotional wellbeing of children and young people is just as important as their physical health. Most children grow up mentally healthy, but certain risk factors make some more likely to experience problems than others. Evidence suggests that more children and young people have problems with their mental health today than 30 years ago. Traumatic events in themselves will not usually lead to mental health problems, but they may trigger problems in those children and young people whose mental health is not robust.

Two separate but not necessarily unconnected issues relate to children affected by mental health problems:

* children and young people who are experiencing mental health problems themselves
* children and young people whose lives are affected by the mental illness or mental health problems of a parent/carer.

### Financial Abuse

Children and young people can be subject to financial abuse and this may include:

* theft of money or possessions
* fraud/scamming
* being prevented from accessing their own money, benefits or assets
* undue pressure, duress, threat or undue influence put on the person in connection with financial matters. In a sport setting this could include being asked to pay a coach’s expenses or being asked for a loan by a teacher or volunteer
* misuse of benefits by a parent/carer
* false representation, or using another person’s bank account, cards or documents
* misuse of a power of attorney or other legal authority.

### Parental Problematic Alcohol and Drug Misuse

Problematic parental substance use can involve alcohol and/or drug use (including prescription as well as illegal drugs). The risks to, and impacts on, children of parents and carers who use alcohol and drugs are known and well-researched.

### Domestic Abuse

Domestic abuse describes any behaviour that involves exerting control over a partner or ex-partner’s life choices and that undermines their personal autonomy. Children and young people living with domestic abuse are at increased risk of significant harm, both as a result of witnessing the abuse and of being abused themselves. However, children can also be affected by abuse even when they are not witnessing it or being subjected to abuse themselves. Domestic abuse can profoundly disrupt a child’s environment, undermining their stability and damaging their physical, mental and emotional health.

### Female Genital Mutilation (FGM)

Female genital mutilation is a culture-specific abusive practice affecting some communities. If it is suspected a child is at risk of FGM abuse, then this should always trigger a child safeguarding referral.

### Honour-based Violence and Forced Marriage

Honour-based violence is a spectrum of criminal conduct which includes threats and abuse and which can escalate to honour killing. Such violence can occur when perpetrators believe that a relative/community member, who may be a child, has shamed the family and/or the community by breaking their honour code. The punishment may include assault, abduction, confinement, threats and murder.

### Child Criminal Exploitation (CCE)

Child criminal exploitation is a form of child abuse which involves criminal exploitation and requires a safeguarding response. It includes children who are involved in criminal activities, including the movement of drugs or money which results in personal gain for an individual, group or organised criminal gang. This can involve an element of exchange and can still be exploitation even if the activity appears consensual. It is typified by some form of power imbalance in favour of those perpetrating the exploitation.

### Child Trafficking

Child trafficking typically exposes children to continuous and severe risk of significant harm. It involves the recruitment, transportation, transfer, harbouring and/or receipt of a child for purposes of exploitation. This definition holds whether or not there has been any coercion or deception, as children are not considered capable of informed consent to such activity. It applies to activity within a country as well as between countries.

### Further Information

Further information on abuse and neglect is available from [NSPCC](https://www.nspcc.org.uk/what-is-child-abuse/spotting-signs-child-abuse/) and [Children 1st](https://www.children1st.org.uk/help-for-families/parentline-scotland/guidance-advice/cat/help-to-protect-children).