



# The National Youth Brass Band of Great Britain

## Safeguarding and Child Protection Policy (NYBBGB-POL006)

<b>Designated Safeguarding Officer:</b>	Richard Milton Operations Manager
<b>Designated Deputy Safeguarding Officers:</b>	Lorraine Childs, Daniel Stenhouse, Gary Walczak and Monica Walczak House Staff Leads
<b>Chief Executive Officer:</b>	Mark Bromley
<b>Chair:</b>	John Gillam
<b>Responsible Committee:</b>	Board of Trustees
<b>Date:</b>	March 2024
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## **The Designated Safeguarding Officer**

The Designated Safeguarding Officer of the NYBBGB is Richard Milton, Operations Manager. 07720 318903 or [richard.milton@nybbgb.org.uk](mailto:richard.milton@nybbgb.org.uk)

All residential courses will have a further two Designated Deputy Safeguarding Officers (House Staff Leads) one male and one female who will be additional points of contact for staff wishing to report a concern.

NSPCC Adult Helpline 080 8800 5000. If you have any concerns and need some advice on what to do.

## **The Safeguarding Committee**

The Safeguarding Committee includes the Chair, The Chief Executive Officer, The Operations Manager, House Staff Leads and the Trustee with responsibility for safeguarding. This committee will meet a minimum of four times a year to assess the safeguarding requirements, review policy, address any issues, reflect on areas for improvement, assess training needs and ensure the continuance of a culture that prioritises safeguarding.

## **Training**

All staff engaged to work with the NYBBGB will undergo safeguarding training every 2 years. This will take the form of suitably ratified e-learning modules. The DSO and DDSOs are level 3 safeguarding trained. All tutors (both Music and House) are required to cover the Child Protection in Education (Music) module or similar (at least equivalent to level 1 safeguarding) and house staff will undergo further training modules in line with their residential responsibilities. The trustee with responsibility for safeguarding has completed the NSPCC's Safeguarding Training for Charity Trustees. Evidence of this training will be securely stored by the Operations Manager in a digital format.

All staff will sign a contract to adhere to all the principles in the Safeguarding and Child Protection Policy every NYBBGB course. They will also receive a live safeguarding brief at the beginning of every course from either the Designated Safeguarding Officer or a House Staff Lead to ensure they understand how to respond to disclosures, concerns, and the reporting processes.

All new members of staff and tutors have a planned induction prior to their first course delivered by a DDSO to ensure NYBBGB policies and procedures are understood. This includes reference to an [Aide Memoire](#) and [Code of Conduct](#).

## **SUMMARY OF CONCERNS CONTACTS**

**Report safeguarding concerns about a child or young person immediately to:  
Operations Manager (DSO) directly or via House Staff Leads (DDSO)**

**Report concerns about a member of staff to: Operations Manager (DSO) 07720  
318903**

**Report concerns about the Operations Manager (DSO) to: Chief Executive Officer  
01223 737784**

**NSPCC Helpline 0808 800 5000 or in an emergency Police 101**

**NSPCC Whistle-blowing helpline 08000 280285**

**Local Authority Designated Officer (contact details to be made available at the  
start of each course)**

## Introduction

This policy has been developed in accordance with the principles established as outlined in the following:

- The Children Act 1989 (as amended 2024) ([Link](#))
- The Children and Social Work Act 2017 ([Link](#))
- The Safeguarding Vulnerable Groups Act 2006 ([Link](#))
- Working Together to Safeguard Children 2023 ([Link](#))
- Keeping Children Safe in Education 2023 ([Link](#))

The NYBBGB recognises that effective child protection work requires sound procedures, good inter-agency co-operation and a workforce that is competent and confident in responding to child protection situations.

This policy provides the basis for good practice within the NYBBGB for Child Protection work. It should be read in conjunction with other National Safeguarding Board Child Protection Policies and Procedures. These are in keeping with relevant national procedures and reflect what the Board considers to be safe and professional practice in this context. Child Protection has to be considered within professionals' wider "safeguarding" responsibilities that include a duty to cooperate under the Children Act 2004.

The policy aims to provide a framework which ensures that all practice in the area of child protection is consistent with stated values and procedures that underpin all work with children and young people.

This document also seeks to make the professional responsibilities clear to all staff to ensure that statutory and other duties are met in accordance with Safeguarding Child Protection requirements and procedures.

## Policy objectives

The NYBBGB is committed to a caring safeguarding culture that promotes the welfare and safety of all the children it works with, and expects all staff and volunteers to share this commitment.

The NYBBGB also recognises that robust safeguarding and child protection policies and procedures are of benefit to everyone involved with the NYBBGB organisation, including staff, as they can help protect them from erroneous or malicious allegations.

The NYBBGB Trustees are committed to practices that prioritises safeguarding and protect children from harm. The Board has a designated trustee with a responsibility for safeguarding who works with the Chief Executive Officer and Operations Manager to ensure a clear line of accountability for the commissioning and/or provision of services designed to safeguard and promote the welfare of children. They will support, advise, and guide the Board on safeguarding matters, ensuring that trustees receive regular reports on safeguarding and child protection policy, reviews, evaluation and action plans.

This policy applies to all applicants for volunteering and employment, all new starters and all existing staff including full-time employees, guest conductors, all course staff, all staff and volunteers who have unsupervised access to, or contact with, children are required to:

- develop and maintain an awareness of the issues which can cause children harm
- report concerns following the procedures described in this policy document
- hold a current enhanced level Disclosure and Barring Service (DBS) check and wherever possible be signed up to the DBS update service so regular checks can take place. Where the update service has not been subscribed to, the NYBBGB will conduct a further DBS check prior to each engagement. Where the DBS update service has been subscribed to the Operations Manager still requires a copy of the original DBS check. Any visitor to a course that has not been subject to a DBS check (or similar depending on country of residence) will NOT have unsupervised access to any child or young person.

The NYBBGB will endeavour to safeguard children by:

- adopting this Safeguarding Child Protection Policy and a Code of Conduct which all who govern or work on behalf of the organisation are required to follow

- keeping parents/carers informed of any safeguarding or other concerns as appropriate, unless informing parents/carers would place the child at greater risk.
- reporting any concerns to the authorities as appropriate (e.g. NSPCC, police, social services, Charity Commission)
- carefully following Safer Recruitment procedures for recruitment and selection of staff and volunteers.
- providing effective management for all staff and volunteers through support and training.
- All children/ young people, their parent/carers and staff will be given the name of the Designated Safeguarding Officer and House Staff Leads prior to each course. Visual reminders of the DSO and HSLs will be signposted at the residential courses.

NYBBGB is also committed to reviewing its Safeguarding and Child Protection Policy and [Code of Conduct](#) annually.

### **Policy Statement**

It is NYBBGB's policy to:

- foster a caring culture of listening to children and young people, taking account of their wishes and feelings, both in individual decisions and the planning and provision of services
- ensure that staff and volunteers are competent to carry out their responsibilities for safeguarding and promoting the welfare of children and creating an environment where they feel able to raise concerns and feel supported in their safeguarding role
- remind staff that they should never put themselves at risk and should avoid interaction with a child in any circumstances which might be misinterpreted.

The NYBBGB undertakes that:

- All staff and volunteers working on behalf of the NYBBGB accept responsibility for the welfare and safety of children in their care, for reporting any concerns, and for adhering to the Code of Practice
- The DSO will be supported by two Designated Deputy Safeguarding Officers (House Staff Leads), one male and one female, are appointed for each course where we are working with children and young people.
- For events outside of the residential courses appropriate staff/ volunteers will be engaged by the Operations Manager in accordance with a 1:12 ratio, although never fewer than 2 responsible and suitably trained adults. This staffing will be outlined in the event risk assessment.
- The DSO and HSLs will be trained to safeguarding level 3 in order to make referrals to child protection agencies, social services, police and/or Local Authority Designated Officers (LADOs) as and when appropriate and required
- Information relating to any allegation or disclosure will be clearly recorded and reported directly to the DSO or via the House Staff Leads as soon as possible.
- All staff and volunteers working on behalf of the NYBBGB will be reminded that any disclosure from a child to an adult must be reported directly to the DSO or via the House Staff Leads (DDSOs) and it is for the DSO to determine the action to be taken. Particular care must be taken with confidentiality. The principle is that confidentiality should be maintained where possible, remembering that where a safeguarding allegation has been made a prompt referral should be made and information should be shared with others (such as social services or the police).
- The NYBBGB is aware that a child or young person must clearly understand the circumstances where information might be shared in order to establish that child's confidence and ensure that any further information is forthcoming.
- A culture of mutual respect between children and those who represent the NYBBGB in all its activities will be encouraged, with adults modelling good practice in this context
- All staff and volunteers with unsupervised access to children will have current enhanced DBS checks
- Anybody who reports safeguarding or child protection concerns in the context of their work on behalf of the NYBBGB will be supported throughout the process including any necessary referrals made to outside agencies.
- The NYBBGB's policy will be made available to staff, volunteers and visitors before each course or event and actively promoted within the organisation including on our website.
- All safeguarding incidents will be reviewed to ensure a culture of continuous improvement

## **Establishing a Safer Environment**

The NYBBGB will:

- Establish and maintain an environment where children feel secure, are encouraged to talk, and are listened to.
- Ensure children know that there are adults in the NYBBGB whom they can approach if they are worried.
- Include opportunities for children to develop the skills they need to recognise risks and stay safe from abuse.
- Ensure every member of staff (including temporary, supply staff and volunteers) knows the name of the Designated Safeguarding Officer responsible for child protection and their role in helping staff to safeguard young people.
- Ensure all players and parent/carers know the name of the Designated Safeguarding Officer responsible for child protection and their role in helping staff to safeguard young people.
- Ensure all staff and volunteers understand their responsibilities in being alert to the signs of abuse and their responsibility for referring any concerns to the Designated Safeguarding Officer responsible for child protection.
- Work with parents and carers to ensure that parents have an understanding of the responsibility placed on the NYBBGB and staff for child protection by setting out its obligations on the website. This may occasionally require cases to be referred to investigative agencies.
- Develop effective links with relevant agencies and co-operate as required with their enquiries regarding child protection matters including attendance at case conferences and core groups.
- Ensure all documentation relating to safeguarding concerns is kept securely in digital format in line with GDPR requirements and the statutory duty to confidentiality.
- Where an allegation is made against a member of staff or volunteer this should be referred to the DSO, or CEO if in respect of the DSO.
- Ensure that all staff are fully DBS checked.
- When rooming requires mixed age groups (under 18 and over 18) parents/carers will be notified and any concerns addressed.

The NYBBGB will endeavour to support young people through:

- An ethos which promotes a positive, supportive, and secure environment and gives young people a sense of being valued. Notifying any concerns about a child who has a Child Protection Plan or is known to have an allocated social worker, to the child's social worker or, in his/her absence the manager or duty officer in the team.
- Ensuring it discusses with Central Advice and Duty Team (CADT) any significant concerns about a child which may indicate physical abuse, emotional abuse, sexual abuse, or neglect in accordance with the Local Safeguarding Children Board child protection procedures.
- Require each member of staff to sign a specific register to indicate that they have read the policy in its entirety and agree to:
  - Adhere to this policy
  - Implement the policy and cooperate with management in promoting safeguarding or children and young people
- This policy will be reviewed annually by the Safeguarding Committee and other nominated persons, in addition to annual review and ratification undertaken by the NYBBGB Trustees Board.

## **Good Practice Guidelines**

To meet and maintain our responsibilities towards young people we need to agree standards of good practice. Good practice includes:

- treating all young people with respect
- setting a good example by conducting ourselves appropriately
- involving young people in decisions that affect them
- encouraging positive and safe behaviour among young people
- being a good listener
- being alert to changes in young people's "behaviour"

- recognising that challenging behaviour may be an indicator of abuse
- reading and understanding the child protection policy and guidance documents on wider safeguarding issues, for example bullying, physical contact and information-sharing
- asking the young person's permission before doing anything for them of a physical nature, such as assisting with dressing, physical support during activities or administering first aid
- maintain appropriate standards of conversation and interaction with and between young people and avoiding the use of sexualized or derogatory language being aware that the personal and family circumstances and lifestyles of some young people lead to an increased risk of abuse
- Challenge inappropriate behaviour or language used by others both students and adults.
- Appropriate and careful use of social media

### **Abuse of Trust**

All staff are aware that inappropriate behaviour towards young people is unacceptable and that their conduct towards young people 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 staff and a young person under 18 may be a criminal offence, even if that young person is over the age of consent.

### **Children Who May Be Particularly Vulnerable**

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 can occur.

To ensure that all of our young people receive equal protection, we will be particularly aware of children who are:

- disabled or have special educational needs
- disability and sensory loss i.e. hearing loss/visual impairment
- vulnerable to discrimination and maltreatment on the grounds of race, ethnicity, religion or sexuality
- do not have English as a first language

We will be vigilant and sensitive to the possibility of having children or young people who are:

- living in a domestic abuse situation
- affected by parental substance misuse
- asylum seekers
- living away from home
- vulnerable to being bullied, or engaging in bullying
- living in temporary accommodation
- living in chaotic and unsupportive home situations
- involved directly or indirectly in prostitution or child trafficking
- any other factors that could increase the likelihood of vulnerability

### **Support for Those Involved in a Child Protection Issue**

Child abuse is devastating for the child and can also result in distress and anxiety for staff who become involved. We will support young people 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 young person, independent link people will be nominated to avoid any conflict of interest
- responding sympathetically to any request from young people or staff for time out to deal with distress or anxiety
- maintaining confidentiality and sharing information only with relevant individuals and agencies



- storing records securely in an encrypted digital folder
- offering details of helplines, counselling or other avenues of external support
- following the procedures laid down in our [Disciplinary, Whistleblowing, and Grievance](#) policy
- cooperating fully with relevant statutory agencies
- ensuring that staff within the organisation meet for supervision meetings regularly
- Provide the opportunity for further training for staff where appropriate

### **Complaints Procedure**

Our complaints procedure will be followed where a young person or parent raises a concern about poor practice towards a young person that initially does not reach the threshold for child protection action. Complaints are managed by the Chair, Chief Executive, Operations Manager and Trustees.

### **If you have Concerns about a Colleague**

Staff who are concerned about the conduct of a colleague towards a young person 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 whistleblowing policy enables staff to raise concerns or allegations in confidence and for a sensitive enquiry to take place. All concerns of poor practice or possible child abuse by colleagues should be reported to the Operations Manager (DSO). Complaints about the Operations Manager should be reported to the Chief Executive Officer.

### **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 entirely false or malicious allegations, 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, the NYBBGB accepts that some professionals do pose a serious risk to young people and will act on every allegation. Staff who are the subject of an allegation have the right to have their case dealt with fairly, professionally, in a timely manner 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.

### **Safer Recruitment**

The NYBBGB endeavours to do its utmost to employ "safe" staff. All are checked through the Disclosure and Barring service and have an enhanced certificate; staff are asked to subscribe to the DBS update service to ensure continuity of service. All new members of staff will be required to undertake appropriate safeguarding training as previously outlined. All staff resident on each course sign to confirm they have read, understood, and will adhere to the Safeguarding Child Protection policy before the start of each course.

### **Photography and Images**

Most people who take or view photographs of 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 appropriate safeguards in place.

To protect children and young people we will:

- seek their written consent for photographs to be taken or published (for example, on our website or in newspapers or publications).
- seek parental consent for those children and young people under the age of 18.
- ensure young people are appropriately dressed.
- Encourage children and young people to tell us if they are worried about any photographs that are take

### **E-Safety**

Most of our children and young people will use mobile phones and computers at some time. They are a source of fun, entertainment, communication and education. However, we know that some adults 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. The National Youth Brass Band of

Great Britain has a safeguarding child protection responsibility to keep young people safe.

Bullying via texts and emails, will be treated as seriously as any other type of bullying and will be managed according to the [Anti-Bullying policy](#).

### **Personal Contact and Social Media Code of Conduct**

The NYBBGB recognises that, due to the nature of the brass band sector, tutors and students will often cross paths with one another, whether it is in a peripatetic setting; at school, in local youth bands, at junior conservatoires or community bands. However, if tutors develop a relationship with a player as a result of their involvement with The NYBBGB they are asked not to further develop their relationship with students through any forum including all social media networking sites or phone/email exchange. Tutors are asked not to engage with social media requests (e.g. Facebook friend request) and not to give out or accept personal contact information. This is in place to protect tutors and staff from conduct that may be deemed inappropriate from any side. Staff have a responsibility to report any concerns they may have regarding interactions with a child or young person on social media in the same way any other safeguarding concern would be reported.

### **Child Protection Procedures**

#### **Recognising abuse**

To ensure that our young people are protected from harm, we need to understand what types of behaviour 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 their 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 (for example, rape, buggery or oral sex) or non-penetrative acts. This 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, meeting a child following "sexual grooming" or preparation with the intention of abusing them.

#### **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 because of maternal substance misuse. Once a child is born, neglect may involve apparent 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 caretakers, 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 (HM Government, 2018)  
For further information and explanation of types of abuse and their symptoms see Appendix 2

### **Child on Child abuse**

Child on child abuse is most likely to include, but may not be limited to:

- bullying (including cyberbullying, prejudice-based and discriminatory bullying);
- abuse in intimate personal relationships between peers;
- physical abuse which can include hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm;
- sexual violence, such as rape, assault by penetration and sexual assault;
- sexual harassment, such as sexual comments, remarks, jokes, and online sexual harassment; (Including any reference to sexual violence)
- non-consensual sharing of nude and semi-nude images and/or videos;
- causing someone to engage in sexual activity without consent, such as forcing someone to strip, touch themselves sexually, or to engage in sexual activity with a third party;
- up skirting, which typically involves taking a picture under a person's clothing without their permission, with the intention of viewing their genitals or buttocks to obtain sexual gratification or cause the victim humiliation, distress or alarm;
- initiation/hazing type violence and rituals (this could include activities involving harassment, abuse or humiliation used as a way of initiating a person into a group and may also include an online element).

### **Sexual Violence and harassment**

The NYBBGB take a zero tolerance approach to sexual violence and sexual harassment, that is never acceptable and will never be tolerated. It should never be passed off as "banter", "just having a laugh", "a part of growing up" or "boys being boys". To ignore this can lead to a culture that normalises abuse. All reports of sexual violence or harassment should be reported immediately.

### **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.

### **Radicalisation**

HM Government's 'Prevent' Strategy (published June 2011): whilst the NYBBGB considers that given the relatively short period of time for which children attend courses it is extremely difficult to observe and assess patterns of behaviour that might give rise to concern, care will be taken to note any causes for concern.

### **Sexting**

Sexting is defined as the production and/or sharing of sexual photos and videos of and by people who are under the age of 18. It includes nude and nearly nude and/or sexual acts.

### **Procedures**

Key points for acting are:

- Any member of staff who has concerns about a child relating to Child Protection (it should be made clear to students that confidentiality CANNOT be guaranteed in respect of child protection issues) must report their concerns directly to the Designated Safeguarding Officer or via the House Staff Leads at the earliest possible opportunity.
- In accordance with the Local Safeguarding Children Board procedures, the agreement of the family for a referral to Children's Services Emergency Duty Team should be sought where possible. However, if it is felt that any such agreement seeking would increase the level of significant risk to the child, the matter would be discussed with Social Services and their advice followed.

- All staff must protect themselves against allegations especially when meeting on a 1 to 1 basis with students.
- If the suspicions in any way involve another member of staff the matter needs to be brought to the attention of the DSO who will act in accordance with safeguarding procedures.
- If the suspicion in any way involves the DSO the Chief Executive is to be informed immediately who will act in accordance with safeguarding procedures.
- In an emergency take the action necessary to help the child, for example call 999 or 101
- Report your concern to the DSO as soon as possible.
- 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.
- Following verbal reporting, complete a digital record of concern within 12hrs
- Seek support for yourself if you are distressed.

### **If you suspect a young person is at risk of harm**

There will be occasions when you suspect that a young person may be at risk, but you have no “real” evidence. The young person’s behaviour may have changed, their artwork could be bizarre, they may write stories or poetry that reveal confusion or distress, or you may have noticed physical but inconclusive signs. In these circumstances, you should try to give the young person the opportunity to talk. The signs you have noticed may be due to a variety of factors, for example, a parent has moved out, a pet has died, a grandparent is very ill. It is fine to ask the young person if they are OK or if you can help in any way.

Use the record of concern form to record these early concerns. If the young person does begin to reveal that they are being harmed, you should follow the advice in the section “if a young person discloses to you”. If, following your conversation, you remain concerned, you should discuss your concerns directly with the Designated Safeguarding Officer or via the House Staff Leads. Any handwritten notes to aid the completion of the digital record of concern form will be scanned and securely stored in an encrypted digital folder. Handwritten notes will then be destroyed.

### **If a young person discloses to you**

It takes a lot of courage for a child to disclose that they are being 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 young person talks to you about 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 young person may think that you do not want to listen, if you leave it till the very end of the conversation, the young person may feel that you have misled them into revealing more than they would have otherwise.

During your conversation with the young person:

- Allow them to speak freely
- Remain calm and do not overreact – the young person may stop talking if they feel they are upsetting you. Give reassuring nods or words of comfort – “I’m 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 young person.
- Under no circumstances ask investigative or leading questions – such as how many times this has happened, whether it happens to siblings too, or what does the young person’s mother think about all this.
- At an appropriate time tell the young person that in order to help them you must pass the information on.
- Do not automatically offer any physical touch as comfort. It may not be 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 young person what will happen next. The young person may agree to go with you to see the Designated Safeguarding Officer. Otherwise let them know that someone will come to see them before the end of the day.
- Report verbally to the DSO or via a House Staff Lead.
- Document your conversation as soon as possible on the record of concern form, which will be submitted to the DSO.
- Try to write the exact language the young person has used where possible.
- Seek support if you feel distressed.
- Report the disclosure to the DSO or via a HSL as a priority.

### **Notifying parents/carers**

The NYBBGB will normally seek to discuss any concerns about a young person with their parents. This must be handled sensitively and the Operations Manager (DSO) or Chief Executive (where the concern implicates the DSO) will make contact with the parent in the event of a concern, suspicion or disclosure. However, if the NYBBGB 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 services or the NSPCC.

### **Referral to children's social care**

The DSO will make referral to children's social services if it is believed that a young person is suffering or is at risk of suffering significant harm. The young person (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 Behaviour**

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

Child-on-child abuse must be taken seriously by all staff and all inappropriate behaviour should always be challenged.

Staff must remain alert to any behaviour which, although it may not appear significant at face value, if downplayed could become unacceptable, lead to a culture that normalises abuse and result in an unsafe environment for children and young people.

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

### **Monitoring and Record Keeping**

It is essential that accurate records be kept where there are concerns about the welfare of a child even where there is no need to refer to the matter immediately. These records will be kept in a separate encrypted confidential digital folder.

Staff should keep the DSO/DDSO informed of:

- Concerns about appearance and dress
- Changed or unusual behaviour
- Concerns about health and emotional wellbeing
- Deterioration in educational progress
- Discussion with parents about concerns relating to the child
- Concerns about home condition or situations
- Concerns about young person on young person abuse

Reports may be needed for Child Protection Case conferences or the criminal/civil courts.

Consequently, records and reports should be:

- Factual (no opinions)
- Non-judgmental (no assumptions)
- Clear

- Accurate
- Relevant

### **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 Services, Police, and the NSPCC if:

- The situation is an emergency and the DSO, House Staff Leads, the Chief Executive Officer are all unavailable
- They are convinced that a direct report is the only way to ensure the young persons' safety
- This information will be shared with the Local Authorities of the course venue and the home of the child(ren) concerned.

## **Appendices**

Appendix 1 – Record of Safeguarding Child Protection Concern

Appendix 1a – Record of Action in Response to Safeguarding Child Protection Concern

Appendix 2 -- Guidance on whether this is a child protection incident

Appendix 3 -- Protecting yourself against allegations of abuse

Appendix 4 -- Multi Agency Safeguarding Hub referral form

Appendix 5 – Safeguarding and Child Protection Summary

## Appendix 1

### Record of Safeguarding Child Protection Concern

This form should be completed electronically as soon as possible (and certainly within 12hours) of the concern being brought to your attention via this [link](#).

The form will ask you for information on the following.

**What should I do?** This form should be completed in as much detail as possible as soon as possible after a concern is raised with you by a child. The information on this form should be submitted directly to the DSO or via a DDSO as soon as possible.

<b>Child/ young person's name</b>
<b>Date and time of concern</b>
<b>Summary of concern</b> <i>(Include location)</i>
<b>Details of Concern</b> <i>(Exactly what the child said and what you said - record actual details. Continue on a separate sheet if necessary. There is no need to repeat the summary.</i>
<b>Action Taken</b>
<b>Your name</b>
<b>Your position</b>



## Appendix 1a

### Record of Action in Response to Safeguarding Child Protection Concern

**To be completed by the DSO or CEO (where the concern implicates the DSO)**

This form should be completed electronically as soon as possible (and certainly within 12hours) of the concern being brought to your attention via this [link](#).

The form will ask you for information on the following.

<b>Your name</b>
<b>Your position</b>
<b>Child/ young person's name</b>
<b>Child/ young person's address</b>
<b>Parents/Carers name and address (where different from above)</b>
<b>Child's date of birth</b>
<b>Date and time of concern</b>
<b>Concern Summary</b>

Date and time	Action Taken	By Whom

<b>External agencies contacted.</b> <i>(date and time)</i>	
<b>Police</b>  Yes/No	If yes - which?  Name and Contact Number  Details of advice received
<b>Social Services</b>  Yes/No	If yes - which?  Name and Contact Number  Details of advice received

<p><b>Local Authority</b></p> <p>Yes/No</p>	<p>If yes - which?</p> <p>Name and Contact Number</p> <p>Details of advice received</p>
<p><b>Other</b> eg. NSPCC</p> <p>Yes/No</p>	<p>If yes - which?</p> <p>Name and Contact Number</p> <p>Details of advice received</p>
<p><b>Charity Commission</b></p> <p>Yes/No</p>	<p>If yes - which?</p> <p>Name and Contact Number</p> <p>Details of advice received</p>

## Appendix 2

### Guidance on 'Whether this is a Child Protection Matter'

If staff have significant concerns about any child they should make them known to the organisation's Designated Safeguarding Officer or the House Staff Leads. These concerns may include:

#### 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.

#### 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 insofar as they meet 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 over protection and limitation of exploration and learning, or preventing the child from participating in normal social interaction. It may involve seeing or hearing the 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, though it may occur alone.

#### 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 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)
- Ensure access to appropriate medical care or treatment.
- It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

#### 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 (e.g. rape, buggery or oral sex) or non-penetrative acts. They may include non-contact activities, such as involving children in looking at, or in the production of, sexual online images, watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

#### FGM (Female Genital Mutilation):

FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons. It has no health benefits and harms girls and women in many ways. It involves removing and damaging healthy and normal female genital tissue, and hence interferes with the natural function of girls' and women's bodies. The practice causes severe pain and has several

immediate and long-term health consequences, including difficulties in childbirth also causing dangers to the child.

It is not possible to rely on one absolute criterion when judging what constitutes significant harm. Consideration of the severity of ill-treatment may include the extent of the harm suffered, the context within which it occurred and its duration.

Significant harm may also arise from a combination of significant events which are both acute and long standing and which may impair the child's physical, psychological and social development. In order to both understand and establish significant harm, it is necessary to consider the family context, together with the child's development within their wider social and cultural environment. It is also necessary to consider any special needs, e.g. medical condition, communication difficulties or disability that may affect the child's development and care within the family. The nature of harm, in terms of ill-treatment or failure to provide adequate care also needs consideration alongside the impact on the child's health and development and the adequacy of care provided.

### **Confidentiality:**

Confidentiality is an issue that needs to be understood by all those working with children, particularly in the context of child protection. This is a complex area and involves consideration of a number of pieces of legislation.

You can never guarantee confidentiality to a child as some kinds of information may need to be shared with others. A suggested form of words that may help when talking to children is as follows:

*"There are some secrets I can't keep; but I promise that if someone is hurting or frightening you I will help keep you safe. I cannot do that on my own and will need to talk to ..... about it"*

Professionals can only work together to safeguard children if there is an exchange of relevant information between them. This has been recognised in principle by the courts. However, any disclosure of personal information to others, included social service departments, must always have regard to both common and statute law.

Normally, personal information should only be disclosed to third parties (including other agencies) with the consent of the subject of that information (Data Protection Act 1998 European Convention on Human Rights, Article 8). Wherever possible consent should be obtained before sharing personal information with third parties. In some circumstances, however, consent may not be possible or desirable but the safety and welfare of the child dictate that the information should be shared.

The law requires the disclosure of confidential information necessary to safeguard a child or children. Under Section 47 of the Children Act 1989 statutory agencies have a duty to co-operate. Therefore, if the Police or Social Care/Services are conducting a Section 47 investigation under the 1989 Children Act, staff must share requested information relevant to the investigation. In such cases legal advice should be sought from NYBBGB's solicitors Blandy and Blandy.

### **Talking to and listening to children**

If a child chooses to disclose, you SHOULD:

- be accessible and receptive;
- listen carefully and uncritically at the child's pace;
- take what is said seriously;
- reassure the child that they are right to tell;
- tell the child that you must pass this information on;
- make a careful record of exactly what was said.

You should NEVER:

- take photographs or examine an injury;
- investigate or probe aiming to prove or disprove possible abuse – never ask leading questions;
- make promises to children about confidentiality or keeping ‘secrets’;
- assume that someone else will take the necessary action;
- jump to conclusions or react with shock, anger or horror;
- speculate or accuse anybody;
- confront another person (adult or child) allegedly involved;
- offer opinions about what is being said or about the persons allegedly involved;
- forget to record what you have been told;
- fail to pass the information on to the correct person;
- ask a child to sign a written copy of the disclosure.

For children with communication difficulties or who use alternative/augmented communication systems, you may need to take extra care to ensure that signs of abuse and neglect are identified and interpreted correctly, but concerns should be reported in exactly the same manner as for other children.

### **Record keeping**

Well-kept records are essential in situations where it is suspected or believed that a child may be at risk from harm.

Records should:

- state who was present, time, date and place;
- use the child’s words wherever possible;
- be factual/state exactly what was said;
- differentiate clearly between fact, opinion, interpretation, observation and/or allegation;
- be completed digitally using the Record of Safeguarding Child Protection Form. Any handwritten notes to aid the completion of the digital record of concern form will be scanned and securely stored in an encrypted digital folder. Handwritten notes will then be destroyed.

## **Appendix 3**

### **Protecting yourself against allegations of abuse**

You should seek to keep your personal contact with children under review and seek to minimise the risk of any situation arising in which misunderstandings can occur. The following sensible precautions can be taken when working alone with children:

- work in a room where there is a glass panel in the door or leave the door open.
- make sure that other adults visit the room occasionally.
- avoid working in isolation with children unless thought has been given to safeguards.
- should not give out personal mobile phone numbers or private email addresses.
- should not give young people lifts home in your cars.
- should not arrange to meet them outside of organisation hours.
- should not chat to young people on social websites.

Under the Sexual Offences Act 2003 it is a criminal offence for anyone working in an educational setting to have a sexual relationship with a young person even when the young person is over the age of consent.

Any use of physical force or restraint against young people will be carried out and documented in accordance with the relevant physical restraint policy. If it is necessary to use physical action to prevent a child from injury to themselves or others parents will be informed.

Children will not be punished by any form of hitting, slapping, shaking or other degrading treatment.

### **Allegations of abuse against a professional**

Children can be the victims of abuse by those who work with them in any setting. All allegations of abuse of children carried out by any staff member or volunteer should therefore be taken seriously.

If an allegation is received by the DSO or CEO the following should be considered. Has the member of staff:

- behaved in a way that has harmed a child, or may have harmed a child;
- possibly committed a criminal offence against or related to a child;
- behaved towards a child or children in a way that indicates s/he is unsuitable to work with children

Allegations of abuse made against staff, whether historical or contemporary, should be dealt with by the Operations Manager; not the DSO in cases where this role is not undertaken by the Operations Manager (if the allegation is against the Operations Manager then it should be dealt with by the CEO). The Operations Manager / CEO should contact the Local Authority Designated Officer (LADO) to discuss the allegation.

This initial conversation will establish the validity of any allegation and if a referral is needed to CADT. If this is the case a strategy meeting will be called that the Operations Manager / CEO should attend.

The fact that a member of staff offers to resign should not prevent the allegation procedure reaching a conclusion.

**Appendix 4**

**MULTI-AGENCY SAFEGUARDING HUB REQUEST FOR SERVICES FORM**

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\* N.B. The form for each LA will be different. What follows is the information that is common for referrals. The link for the LA where residential courses will take place are shared previously in this policy.

**This form is to ensure that you provide the necessary information to make a request for service and to aid your decision, in making that request to the Children and Young People’s Department.**

**Do you have consent to make this request for service - YES / NO**

**Whilst professionals should seek, in general, to discuss any concerns with the family and where possible seek their agreement to make referrals to LA children’s Social Care, this should only be done where such discussion and agreement seeking will not place a child at increased risk of significant harm.**

---

Section 1 - CHILD / FAMILY DETAILS

**Name of child / children:**

.....

**Date of Birth:** .....

**Address:** .....

.....

**Ethnicity:**

**Communication needs:**

**Name of parents:**

.....

**Parents /Carers contact numbers;**

.....

**Parents Date of Birth:** .....

**Do the parents live with the child / children: YES / NO**

If NO what address do they reside at:

.....

**Schools attended:** .....

**GP details:** .....

**Health Visitor details:** .....

**Are any other professionals involved with the family? YES / NO**

If YES please detail: .....

---

SECTION 2 - REFERRER DETAILS

**Name of Referrer:** .....

**Date:** .....

**Agency:** .....

**Address** .....

**Telephone number** .....

**E-mail address** .....

**Is this child subject to TAF: YES / NO**

Are you the lead professional within TAC If NO who is (person and agency name):

.....

Please detail why you are requesting a service from Children's Social

Care:.....  
.....  
.....

..... If you  
have completed a CAF please attach

SECTION 3  
**Child's Needs**

Please comment on each of the following: health, education, emotional and behavioural development, identity, family and social relationships, social presentation and self care skills.

.....  
.....  
.....

**Parenting Capacity**

Please comment on each of the following: basic care, ensuring safety, emotional warmth, stimulation, guidance and boundaries and stability.

**Summarise detail of previous Children's Services' involvement**

Child/ren subject to Child Protection Registration? Yes \_ No \_ Child/ren  
previously on Child Protection Register? Yes \_ No \_ Child/ren previously  
Looked After? Yes \_ No \_  
Child/ren on the Disability Register? Yes \_ No \_

.....  
.....  
.....

Family

**& Environmental Factors**

Please comment on each of the following: family history, wider family, housing, employment, income, community integration and community services.

.....  
.....  
.....

Please

**detail any additional services that are already provided or have been attempted:**

.....  
.....  
.....

**Consent**

I agree with this referral being made and I am aware that the information is being shared

**Name of family member/person** .....  
**with Parental Responsibility:**

**Signed:** .....

**Date:** .....

**If consent has NOT been obtained have you advised the parents of the request for service YES/ NO**



If not

Requests for service can only be accepted if it is deemed that to seek parental/ Carers agreement “would place the child at increased risk of significant harm”.

(Working Together to Safeguard Children 2006)

.....  
.....

You will receive confirmation of the action taken by the Children’s Social Care within one working day based on the attached form



**REFERRER FEEDBACK FORM FROM CADT**



Name of Referrer: .....

Date of referral: .....

Name of child/children: .....

Address: .....

.....

Date of feedback: .....

**Outcome Detail**

Sent to District office Assessment team for a decision Provision of advice and information

Advice Team Around Family Meeting to be held Advice and Information given

Signed..... Dated.....

Contact Number.....

If you disagree with the decision please see the LSCB Escalation Process

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## Safeguarding and Child Protection

### When and what might I be concerned about?

At any time, you may be concerned about information which suggests a child or young person is being neglected or experiencing physical, emotional or sexual harm.

You may observe physical signs, notice changes in the child or young person's behaviour or presentation, pick up on signs of emotional distress or have a child or young person disclose a harmful experience to you.

Harm to a child can be caused by:

- A parent/carer
- A family member/friend
- Another child or young person
- A stranger
- A member of staff/volunteer\*

### \* What should I do if the alleged abuser is a member of the NYBBGB staff? \*

If your concern is about a staff member or volunteer, you should report this to the DSO (Operations Manager). If your concern is about the DSO (Operations Manager), you should report such allegations to the CEO.

### What should I do if a child or young person discloses that s/he is being harmed?

#### 1. Listen

Listen carefully to what is being said to you, do not interrupt.

#### 2. Reassure

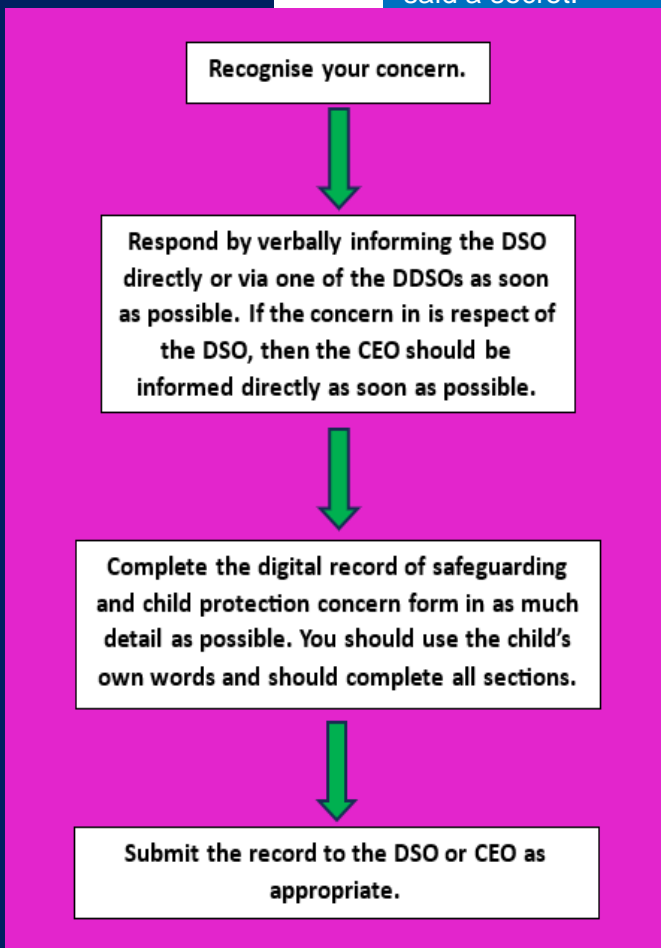
Reassure the child or young person that it is not their fault. Stress that it was the right thing to tell. Be calm, attentive, and non-judgmental. Do not promise to keep what is said a secret.

Ask non-leading questions to clarify if necessary:

- Tell me more...
- Explain that to me...
- Describe what happened...

**Then follow the steps in the flowchart to the left.**

The information you have may not be enough on its own for a child protection referral, however it will help your DSO to make a decision about the risk of harm to the child.



### Contacts

**Designated Safeguarding Officer**  
**Richard Milton**  
**Operations Manger**  
**07720 318903**  
[Richard.milton@nybbgb.org.uk](mailto:Richard.milton@nybbgb.org.uk)

**NSPCC Helpline 0808 800 5000 or in an emergency Police 101 or 999**  
**NSPCC Whistle-blowing helpline 08000 280285**  
**Local Authority Designated Officer**  
 (contact details to be made available at the start of each course)