

MACCLESFIELD MUSIC CENTRE

SAFEGUARDING: POLICY, PROCEDURES AND GUIDANCE

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This document and the implementation of the procedures and good practice guidelines it describes will be monitored and reviewed by the Trustees at least once per year

Changes from 2012 following recent legislation changes.

1) Some activities are now called “regulated”. These include any activity which involve physical assistance (eg taking to toilet or dressing), or being alone and unsupervised with children “once a week or more”. In this case an “enhanced disclosure with a check of the barred list” (DBS) is required. We do not believe MMC members will need this.

2) Other activities, for instance where a MMC member is never alone with children do not now require checking, though we can do just the “enhanced disclosure” without the check of the barring list if we wish.

MJS for MMC

Document Date: February 2016

POLICY

AIM

To ensure that the Macclesfield Music Centre (MMC) does everything possible to safeguard children and young people who are involved with the MMC in any way.

OBJECTIVES

1. To set standards for promoting the safety and welfare of children and young people connected with the MMC
2. To outline how these standards are maintained
3. To help anyone who has a concern or receives an allegation of harm to respond appropriately
4. To support those who work with children on the MMC's behalf

For the purpose of this document a child is considered to be anyone under the age of 18. However the safeguarding principles and practice may be applied to adults who are vulnerable as a result of disability, mental illness, age or other challenge.

PRINCIPLES

We believe that

- every person has a value and dignity.
- It is the responsibility of all MMC members to care for and safeguard all children and adults
- MMC should be a safe community where abuse is prevented
- appropriate response to allegations or concerns about abuse is a means to preventing further harm

PROCEDURES AND GUIDANCE

PRACTICE

Therefore we will:

- a. follow legislation, guidance and recognised good practice in safeguarding children
- b. promote good practice to everyone in the MMC community in order that they recognise and fulfil their responsibility to safeguard
- c. empower our children and young people to voice concerns about themselves or others
- d. carefully select and train all those with any responsibility within the MMC, in line with safer recruitment principles, including the use of criminal record disclosures and registration with the relevant disclosure and barring schemes (DBS).
- e. appoint a Safeguarding Adviser to support the MCC's work in the safeguarding arena
- f. provide support for anyone working directly with children and young people
- g. respond without delay to every concern raised that an adult, child or young person may have been harmed, co-operating with the police and local authority in any investigation

- h. seek to challenge any abuse of power, especially by anyone in a position of trust
- i. respond to anyone known to have offended against a child, young person or vulnerable adult in a way which promotes accountability and is in line with procedures outlined by Cheshire East Local Safeguarding Children Board

WHAT IS CHILD ABUSE?

Abuse and neglect are defined in “Working Together to Safeguard Children” 2015 at <http://webarchive.nationalarchives.gov.uk/20130401151715/https://www.education.gov.uk/publications/eOrderingDownload/Working%20Together%202013.pdf>

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 the 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 insofar as they meet the needs of another person.

It may include not giving the child the opportunity 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 developmental capability, as well as overprotection 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 (domestic abuse).

It may involve serious bullying (including cyber bullying), causing children 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

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

The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing.

They may also include non-contact, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, 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

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 and abandonment);
- Protect a child from physical and emotional harm or danger;
- Ensure adequate supervision (including the use of adequate care givers); or
- Ensure access to appropriate medical treatment.

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

Spiritual Harm

The inappropriate use of any religious belief or practice which may harm somebody spiritually, emotionally or physically.

Domestic Abuse

Witnessing harm to others is a form of child abuse. Thus children who are, often repeatedly, exposed to domestic abuse are considered to be emotionally abused. There is also a strong correlation between domestic abuse and direct child abuse. Where child abuse is present professionals should be alert to the possibility of domestic abuse and vice versa.

WHO ABUSES CHILDREN?

Anyone can abuse children, including both women and men. The majority of incidents occur within families but abuse can occur anywhere and be perpetrated by anyone. It is very important never to make assumptions about who may or may not be abusing children.

It is also important to note that some people target children's groups in order to perpetrate abuse.

INDICATORS OF ABUSE

Those who work with children should be familiar with the common symptoms of child abuse listed at **Appendix A**. These signs do not necessarily indicate that a child has been abused but they may help adults recognise that something is wrong. The possibility of abuse should be investigated if a child shows a number of these symptoms, or any of them to a marked degree.

It should also be noted that an absence of external indicators does not mean that a child is not suffering abuse.

RESPONDING TO DISCLOSURE FROM A CHILD OR YOUNG PERSON

Anyone may receive a disclosure of abuse but those who work directly with our children and young people are more likely to be in a position where disclosures are made

DO

- Make it clear that you cannot keep anything which is harmful a secret
- Listen to the child or young person, let them express their views and feelings without interruption, accept what they are saying
- Reassure the child or young person that they have done the right thing in telling someone
- Reassure the child or young person that you take what they say seriously and will do something about it, including sharing the information with the Safeguarding Adviser
- Make notes of what was said using the child or young person's words whenever possible
- Speak to the Safeguarding Adviser as soon as possible to decide on next steps unless the subject of the allegation is that person

DO NOT

- Show shock or disbelief
- Agree to keep the disclosure a secret
- Make a promise or suggestion that you can stop the abuse
- Ask questions seeking further detail – you risk contaminating evidence
- Investigate any allegation - specially trained professionals undertake this role
- Contact the alleged perpetrator
- Make any statement or comment to the press

RESPONDING TO CONCERNS WHERE NO DISCLOSURE HAS BEEN MADE

Everyone in the MMC should feel able to express a concern about a child's safety or wellbeing and such concerns should be communicated to the Safeguarding Adviser or their deputy.

NEXT STEPS

The **priority in responding to any disclosure or concern is the protection of the child** and any other children or vulnerable people who may be linked to the situation.

1. If the child is in immediate danger or you fear that serious harm is about to take place phone the police on 999
2. If the child is not at immediate risk of serious harm contact the Safeguarding Adviser or their deputy
3. Together, take further advice from the Local Authority
4. Consider if/how to share the information about the disclosure or concern with the parent/carer of the child. This consideration is vital where the alleged harm is happening within the family
5. Document the advice given and ensure the Safeguarding Adviser has a copy
6. If necessary make a referral to the Local Authority First Contact Team
7. Continue to support the child and/or family through the progress of a local authority safeguarding process

Please refer to **Appendix E** for a simplified flow-chart of the referral procedure.

ROLE OF THE MMC TRUSTEES AND BUSINESS TEAM

The MMC's Board of Trustees, together with the Business Team, share the responsibility for keeping the children and young people safe whilst at the MMC.

The Trustees will:

- approve the MMC Safeguarding Policy
- receive reports on implementation of the policy at any Board Meeting and as a minimum review the policy annually
- appoint a Trustee as Safeguarding Trustee to liaise with the Safeguarding Adviser and ensure the policy is implemented
- appoint a Safeguarding Adviser who should be a person with appropriate training and experience to fulfil this role (preferably someone with professional experience of working with children and safeguarding)

- ensure that people who are authorized to work with the children and young people within the MMC or who hold a position of responsibility are properly appointed, trained and supported
- ensure that all health and safety aspects of safeguarding are fulfilled
- ensure that people who pose a threat to children and young people are effectively managed and monitored in the MMC context

THE ROLE OF THE SAFEGUARDING ADVISER

The Safeguarding Adviser is appointed by the MMC's Board of Trustees annually and is accountable to them. This person will have up to date knowledge and have at least completed Level 3 for safeguarding children prior to taking on the role and then will be responsible for ensuring that:

- The MMC Policy is presented to the Trustees annually for review, update and adoption by the Trustees on an annual basis together with a brief report on the current implementation.
- the policy document is widely available and given to all existing and new workers in the various groups within MMC.
- all MMC Tutors to go through the appropriate recruitment process in conjunction with the Safe Recruitment Policy provided by the Trustees.
- each Tutor has an agreement which outlines their and the MMC's responsibilities for their role
- each Tutor has an opportunity for an annual review of their work and that this review is recorded and details kept on file.
- Messages about sources of help for children and young people are displayed in a variety of formats e.g. notice boards, notice sheets, message screens
- All should be aware of the procedures to follow, should there be an issue, so a flow chart will be included with the welcome leaflet.
- On leaving the post all records, documents and resources are in good order and passed to their successor.

GOOD PRACTICE GUIDE

Anyone under the age of age of 18 should never work unsupervised and should be given clear guidance and support.

Casual visitors i.e. those who have not been authorised by the MMC as leaders or helpers, should not have access to children without the presence of an adult who is deemed to be responsible for the group.

A. TIME ALONE

All those in contact with children should minimise time alone with any child or young person. If possible remain in the view of another leader or other MMC members at all times.

If being alone with a child is unavoidable (e.g. taking a toddler to the toilet or giving a lift, with parental permission, at the end of a session) ensure that another leader is informed of where you will be and why.

Workers should be particularly careful not to engage in any lengthy electronic correspondence with children or young people. Reminders about meetings are acceptable but any communication on other than practical matters should take place in a public space.

B. TOUCH

Touch is an important part of human relationships: for example, it can be necessary to stop a young child from hurting herself or himself; it can also be a natural way of responding to someone in distress.

However, everyone working with children should be sensitive to what is appropriate and inappropriate physical contact, both in general terms, and in relation to a specific individual. These guidelines should be followed:

- Touching should always be with the child's permission. If a child or young person shows any resistance to touch, i.e. if you put your hand on their arm and they pull away, it is important that this is respected.
- touching a child in the genital area, buttocks or breasts is never acceptable
- Touch should always be conducted in an open manner. It should never be carried out in 'secret' or in a surreptitious manner.
- Touch should always be in response to the needs of the child and not the needs of the adult.

C. GOOD PRACTICE WITH OTHER LEADERS OR MEMBERS

If you see someone else acting in ways which might be misconstrued or about which you have concerns, be prepared to speak to them or to the Safeguarding Adviser about your concerns.

D. INCLUSION

Leaders will, with the support of parents and MMC members, do their best to ensure that groups and activities are accessible to all children and young people.

E. PREMISES

The MMC, in association with the King's School Macclesfield, is responsible for ensuring that the indoor and outdoor space complies with all health and safety guidance and legislation

Toilets - 1 toilet and 1 hand basin per 10 children

Warm and Clean - Group areas should be warm, clean, adequately lit and ventilated.

Entrances and Exits - Should be well lit and easily accessible

Insurance – insurance should cover all planned activity

Access to help – a mobile phone is kept at the Desk in the Coffee Shop (School Canteen) which is permanently on charge

Fire Safety – leaders should know fire safety procedures and all equipment must be up to date and tested

Accidents and Incidents – leaders should know the whereabouts of the Accident and Incident book and should complete the necessary documentation. The Trustees should review the contents at each of their meetings

First Aid – leaders should have a basic knowledge of first aid

F. ADMINISTRATION

Each leader should maintain an attendance register for the children or young people involved in each session of the activity for which they are responsible.

G. RISK ASSESSMENT AND MANAGEMENT

The Trustees must be informed about all activities which are conducted in the name of the MMC.

Group leaders must alert the Trustees to any out of the ordinary activity that may not be covered under general insurance. A Risk Assessment Form is found at **Appendix D**

APPENDIX A Indicators of Abuse

Physical Abuse

- Unexplained recurrent injuries or burns
- Improbable excuses or refusal to explain injuries
- Wearing clothes to cover injuries, even in hot weather
- Refusal to undress for gym
- Bald patches
- Chronic running away
- Fear of medical help or examination
- Self-destructive tendencies
- Aggression towards others
- Fear of physical contact - shrinking back if touched
- Admitting that they are punished, but the punishment is excessive (such as a child being beaten every night to 'make him study')
- Fear of suspected abuser being contacted

Emotional Abuse

- Physical, mental and emotional development lags
- Sudden speech disorders
- Continual self-depreciation ('I'm stupid, ugly, worthless, etc')
- Overreaction to mistakes
- Extreme fear of any new situation
- Inappropriate response to pain ('I deserve this')
- Neurotic behaviour (rocking, hair twisting, self-mutilation)
- Extremes of passivity or aggression

Neglect

- Constant hunger
- Poor personal hygiene
- Constant tiredness
- Poor state of clothing
- Emaciation
- Untreated medical problems
- No social relationships
- Compulsive scavenging
- Destructive tendencies

Sexual Abuse

- Being overly affectionate or knowledgeable in a sexual way inappropriate to the child's age
- Medical problems such as chronic itching, pain in the genitals, venereal diseases
- Other extreme reactions, such as depression, self-mutilation, suicide attempts, running away, overdoses, anorexia
- Personality changes such as becoming insecure or clinging
- Regressing to younger behaviour patterns such as thumb sucking or bringing out discarded cuddly toys
- Sudden loss of appetite or compulsive eating
- Being isolated or withdrawn
- Inability to concentrate
- Lack of trust or fear of someone they know well, such as not wanting to be alone with a babysitter or child minder
- Starting to wet again, day or night/nightmares
- Become worried about clothing being removed
- Suddenly drawing sexually explicit pictures
- Trying to be 'ultra-good' or perfect; overreacting to criticism

Note: A child may be subjected to a combination of different kinds of abuse. It is also possible that a child may show no outward signs and hide what is happening from everyone

APPENDIX B Working with Children and Young People

PARENT/CARER AGREEMENT

We hope you and your child's time at the MMC will be positive. We have prepared the following information to clearly describe what you can expect from us and what we expect from you and your child/ren to help ensure a safe and enjoyable experience for everyone.

You can expect MMC staff and volunteers to

1. Be subject to the appropriate disclosure and barring schemes (DBS)
2. Promote a healthy and safe environment for children, and adhere to the MMC's safeguarding policy. Please talk to any leader if you have any concerns of any sort
3. Provide the regular advertised activities
4. Respond to your child's individual needs as much as is possible
5. Work with you to overcome any difficulties with your child's participation in activities, such as disruptive behaviour, hurting other children or rudeness

We expect

1. Children to cooperate in group activities and for each child to show respect for other children and leaders
2. To discuss with you and your child the best way of managing behaviour should difficulties arise
3. To ask you to collect or return your child to you if their behaviour is too difficult to manage within the group

Bringing friends

We are delighted to welcome other children into activities at MMC. However you will need to take responsibility for them in the same way that you do for your own children. Please make sure that you have contact details for their parents and have completed a profile for them while they are with us.

APPENDIX C Working with Children and Young People – Volunteer Agreement

When additional help is required for children's work, the role should be agreed by activity/group leader(s) in conjunction with the Safeguarding Adviser, and information about the role and what it involves should be made available via a notice sheet and/or MMC website.

Activity/group leaders should check applications (which may be verbal or written) and seek verbal or written reference(s) if required before discussing the role with the applicant. If the leader is satisfied that the applicant is suitable, he/she, together with the applicant, should sign the Agreement for Volunteers form (below) and pass it on to the Safeguarding Adviser.

The volunteer should be given a copy of the Safeguarding Policy and Procedures document.

The disclosure and barring scheme (DBS) process should be used where appropriate and the volunteer should be informed that the role is dependent upon a satisfactory check.

Working with Children and Young People – Agreement for Volunteers

Name _____

Address _____

Email _____

Phone _____

Thank you for agreeing to work with the children and young people at MMC. We want to be sure that you are clear about the role you are undertaking and feel supported in it. This agreement assures you of the support of the MMC membership in the work you are doing.

We have discussed the following responsibilities:

1. _____

2. _____

3. _____

If you have any queries or concerns about your role, please talk to

We also want to be sure that our children and young people are safe when they are here at the MMC, so we ask you to confirm that you have read and agree to act in accordance with MMC Safeguarding Policy and Procedure.

Signature of volunteer _____ Date _____

Signature of leader _____ Date _____

Date Self-Declaration form completed: _____

Date DBS form submitted to Making Music: _____

Date DBS form received and approved: _____

Date Identity check carried out: _____

Copy: Volunteer

Copy: Volunteer file

Received by Safeguarding Adviser:

Signature _____ Date _____

APPENDIX D MMC - Activity Risk Assessment Form

This form should be completed by the leader of the proposed event and submitted to the Desk at least one week before the proposed event.

Group/activity/event: _____

Date of event: _____

Event Organiser: _____

Risk Assessment undertaken by: _____

Date: _____ Signed: _____

Hazard	Severity (1-4)	Likelihood (1-4)	Risk Level	a) Action taken to reduce risk b) Who is taking this action

Sheet Number _____ of _____

Activity Risk Assessment Form - Risk Evaluation Matrix

		SEVERITY			
		1 Minor injury	2 First Aid	3 Major injury	4 Fatality
LIKELIHOOD	4 Highly likely	Tolerable Risk	Moderate Risk	Substantial Risk	Intolerable Risk
	3 Probable	Tolerable Risk	Moderate Risk	Substantial Risk	Substantial Risk
	2 Possible	Tolerable Risk	Tolerable Risk	Moderate Risk	Moderate Risk
	1 Improbable	Trivial Risk	Trivial Risk	Tolerable Risk	Tolerable Risk

Intolerable Risk Activity should be suspended immediately until action is taken to reduce the risk.

Substantial Risk Significantly high risk that where reasonably practical activity should be suspended until significant action has been taken to reduce the risk. Where this is not reasonably practicable, strict deadlines should be agreed for further action to reduce the risk.

Moderate Risk Significant action should be planned in accordance with overall risk management program to reduce the risk.

Tolerable Risk Risk level is acceptable as long as all reasonably practicable controls are in place.

Trivial Risk Risk level is low no significant action required.

Activity Risk Assessment Form - Checklist

Where appropriate the leader(s) should consider:

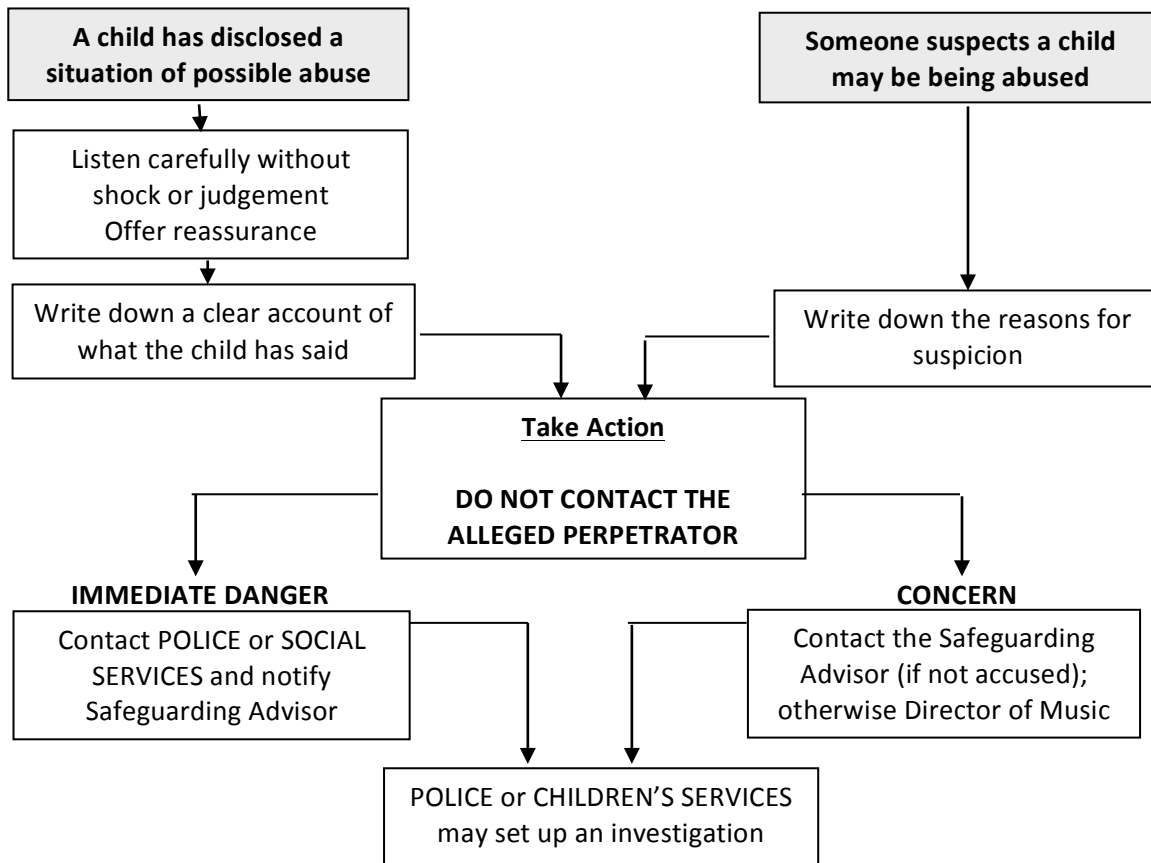
(These examples are for guidance; many will not apply to your activity but likewise there may be additional risks not included in this list that are specific to your activity.)

- Weather forecast checked and programme amended if necessary with alternatives for bad weather
 - Vehicles: Driving hours limited with back-up driver on long journeys and seat belts used at all times
 - Marshalling as group leaves coach, etc
 - Appropriate stops for eating and care arrangements en route
 - Clothing appropriate to the activities / location, including the use of weatherproof clothing and footwear
 - All equipment appropriate to the activities, children's ability level and location
 - Special equipment checked
 - 'Free time' arrangements
 - Adequate supervision at all times, with a duty rota in place if necessary
 - Agree standards of behaviour and conduct
 - Prior assessment of leaders and helpers in relation to the visit, the young people involved and the activities taking place / Adequate leader numbers available
 - Supervision ratio to keep sufficient check on all the party
 - Code of conduct established and maintained
 - Only suitable accommodation used and checked for appropriate facilities. Fire precautions and certification checked and a fire drill carried out
 - Emergency arrangements include carrying the contact numbers for all the participants, the emergency contact person at the establishment and for emergency services maintained by the leader of the party
 - Mobile telephone available for emergency use
 - Established appropriate emergency contacts with parents
 - Set up effective communication procedures with the group
 - Prior approval/notification of adventurous activities, overseas visits or visits to challenging geographical areas / Researched the area, site / Pre visit carried out
 - Specific adventure activity guidelines being followed
 - All relevant medical information of all participants, including allergies, medical conditions etc
 - All appropriate medical arrangements, including first aid
 - Special potential health hazards associated with the site
 - Appropriate information for parents / Meeting with parents / Parental Consent
 - Full account taken of any special needs involved
 - Safeguarding (any risk of physical, sexual or emotional harm eg bullying, sexual abuse, abduction, asking a child to do something they are not capable of doing.)
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APPENDIX E - KEY RESOURCES FOR SAFEGUARDING CHILDREN AND YOUNG PEOPLE

LOCAL AUTHORITY Contact: Cheshire East Consultation Team	Advice and support as well as referral point for safeguarding concerns	0300 123 5012 (Select option 2) 0300 123 5022 (Emergency Duty Team for out of hours) checs@cheshireeast.gov.uk www.cheshireeast.gov.uk/fidy
NSPCC HELPLINE	Advice, information and support for children and carers	0808 800 5000 , text 88858 , www.nspcc.org.uk/helpline
24/7 DOMESTIC ABUSE HELPLINE	National Helpline for Domestic Abuse	0808 2000 247

REFERRAL FLOW CHART



Acknowledgements:

This document is based on the St Michael & All Angels', Macclesfield Policy, which itself is based on the Safeguarding Children Diocesan Policy and Procedures 2011 which derives from:

- the House of Bishops' Child Protection Policy, "Protecting all God's children" House of Bishops (2010)
- "Working Together to Safeguard Children" A guide to inter-agency working to safeguard and promote the welfare of children (2015)
- "Safeguarding Guidelines relating to Safer Recruitment" House of Bishops (2010)

REVIEWED by MMC TRUSTEES NOV 2017

NEXT REVIEW NOV 2018