SAFEGUARDING CHILDREN PROCEDURES

Nothing is more important than children's welfare.

Children who need help and protection deserve high quality and effective support as soon as a need is identified.

Everyone who comes into contact with children and families has a role to play.

Children access and engage with RET on a daily basis; as a visitor, audience member, participant and digital consumer. All staff, volunteers and freelancers play an important role in safeguarding children through the services they deliver.

The procedures outlined below should be followed if you have any concerns relating to the welfare of a child engaging in activity at RET.

- 1. Key definitions
- 2. Definitions of abuse
- 3. Incidents or concerns that must be reported
- 4. Disclosure
- 5. Signs of abuse
- 6. How to report a concern
- 7. Confidentiality
- 8. Record retention periods
- 9. Whistleblowing

Appendix A: Manchester Safeguarding Children Board Needs & Response Framework Appendix B: Useful sources of information

1. KEY DEFINITIONS

The definitions as set out below are from the UK Government publication "Working Together to Safeguard Children 2018"

Children	Anyone who has not yet reached their 18th birthday. The fact that a child has reached 16 years of age, is living independently or is in further education, is a member of the armed forces, is in hospital or in custody in the secure estate, does not change their status or entitlements to services or protection.
Safeguarding and promoting the welfare of children	Defined for the purposes of this guidance as: a. protecting children from maltreatment b. preventing impairment of children's health or development c. ensuring that children are growing up in circumstances consistent with the provision of safe and effective care d. taking action to enable all children to have the best outcomes
Child protection	Part of safeguarding and promoting welfare. This refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm.

2. DEFINITIONS OF ABUSE

What is abuse and neglect?

A form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults, or another child or children.

There are four types of abuse:

1. Physical abuse

A form of abuse which 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. Female Genital Mutilation (FGM) is a form of physical abuse.

Child Criminal Exploitation

As set out in the Serious Violence Strategy, published by the Home Office, where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18 into any criminal activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial or other advantage of the perpetrator or facilitator and/or (c) through violence or the threat of violence. The victim may have been criminally exploited even if the activity appears consensual. Child criminal exploitation does not always involve physical contact; it can also occur through the use of technology.

2. Emotional abuse

The persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as meets the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a 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 (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

3. 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 is 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 activities, 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. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Child Sexual Exploitation

Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

4. Neglect

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

a. provide adequate food, clothing and shelter (including exclusion from home or abandonment)

- b. protect a child from physical and emotional harm or danger
- c. ensure adequate supervision (including the use of inadequate caregivers)
- d. ensure access to appropriate medical care or treatment

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

3. INCIDENTS OR CONCERNS THAT MUST BE REPORTED

If any of the following occur, you should report this immediately to the appropriate DSO and record the incident or concern using the Safeguarding Concern Report Form. The DSO will ensure that the parents/carers of the child are informed, unless this puts the child in danger:

- If a child discloses anything to you that causes concern (see 4 below)
- If a child seems distressed in any manner (see 5 below)
- If a child appears to be behaving inappropriately or makes you feel uncomfortable (see 5 below)
- If you accidentally hurt a child.
- If a child misunderstands or misinterprets something you have done.
- If physical intervention is required to manage challenging behaviour.

4. DISCLOSURE

It is possible that a person, who is suffering or has suffered from abuse will confide in you. This is something that you should be prepared for and must handle carefully. The following action should be taken in this instance:

1. Remain calm and in control – don't panic

2. Listen carefully to what is being said – you need to remember as much as you can

3. Reassure the person that they have done the right thing by talking to you

- 4. Make sure that the person feels safe
- 5. Find an appropriate, early opportunity to explain you will need to share information with others do not promise to keep secrets.

6. Don't give your own views or opinions

7. Only ask questions if you don't understand what is being said

8. Be aware of appearing judgemental, think about your questions, facial expressions and body language

9. Say what you will do next and who you will share information with

10. Be very clear what you are able to do at this point and do not make promises that you are unable to keep

11. You must ensure that the information you receive remains confidential and is only shared with the people named in your policy and procedures

12. Make a record immediately afterwards on a concern report form

5. SIGNS OF ABUSE

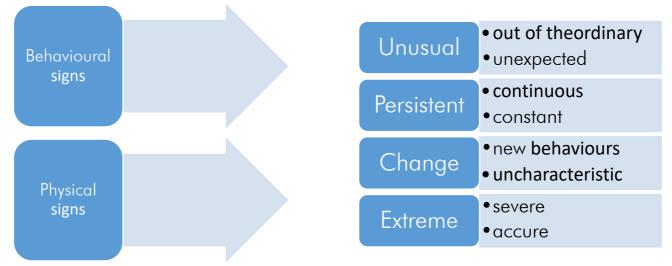
If you see or suspect abuse of a person you should make the person with legal responsibility for that individual aware of the problem. Speak to the DSO who will speak to the emergency contact of that

participant. However, if you suspect that the person with legal responsibility is actually the source of the problem you should make your concerns known to another senior member of staff at the organisation. Indicators of abuse might include:

Unexplained or suspicions injuries such as bruising, cuts or burns, especially if they are on	Inappropriate sexual knowledge
parts of the body that are to usually prone to injury	Distrusting adults where a close relationship would normally be seen for example parents, aunties, uncles, siblings
An injury where the explanation seems inconsistent	Engaging in sexually explicit behaviour
A person describing what appears to be abuse involving him / her	Possible difficulties making friends
Another child / adult showing concern about the welfare of a child / vulnerable adult	Eating patterns may vary including overeating or loss of appetite
	Losing weight unexpectedly
Unexplained changes in behaviours, for example becoming very quiet, outburst of anger etc	Becoming increasingly dirty and unkempt

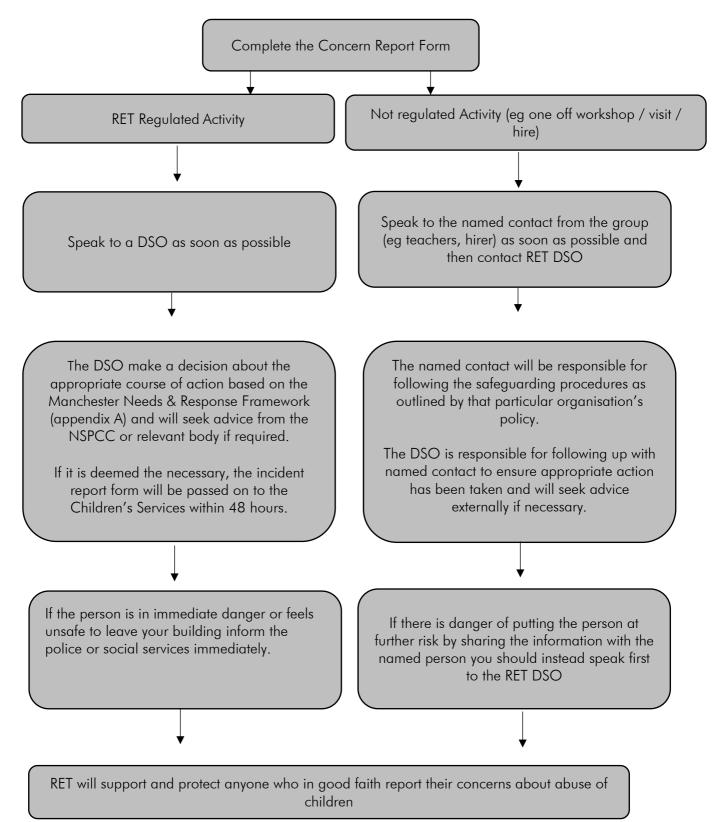
It is important to note that this list only highlights some of the common indicators of abuse and that there are many more. The indicators above can also be present but may not mean that abuse is taking place. Think about the individual and if these signs are normal to them.

It is not our responsibility to judge whether abuse is taking place, but it is our responsibility to act and report on any suspicions or concerns that we may have.



Use the **SAFEGUADING CONCERN REPORT FORM** to make a note of what you have witnessed and any action taken.

6. REPORTING A CONCERN



7. CONFIDENTIALITY

Every effort will be made to ensure that confidentiality is maintained for all concerned. Information will not be shared without consent, except where required to do so by law or by court order, or where it is in the public interest to do so, for example in cases of suspected child abuse.

Advice from NSPCC, Manchester Children's Safeguarding Board and the Local Authority Designated Officer (LADO) will be followed carefully to ensure information is not shared unless completely necessary.

Information will be stored in a secure place, will be password protected and with limited access for designated people (EG DSO and Safeguarding Lead), in line with data protection laws (e.g. that information is accurate, regularly updated, relevant and secure).

8. RECORD RETENTION

In line with RET Retention and Deletion policy personal information should not normally be held for longer than 6 years after the subject's last contact with the theatre. Exceptions to the 6-year period will occur when records:

- Need to be retained because the information in them is relevant to legal action that has been started.
- Are required to be kept longer by law.
- Are archived for historical purposes (e.g. where the organisation was party to legal proceedings or involved in proceedings brought by a local authority). Where there are legal proceedings it is best to seek legal advice about the retention period of your records.
- Relate to individuals and providers of services who have, or whose staff, have been judged unsatisfactory.
- Are held in order to provide, for the subject, aspects of his/her personal history (e.g., where the child might seek access to the file at a later date and the information would not be available elsewhere).

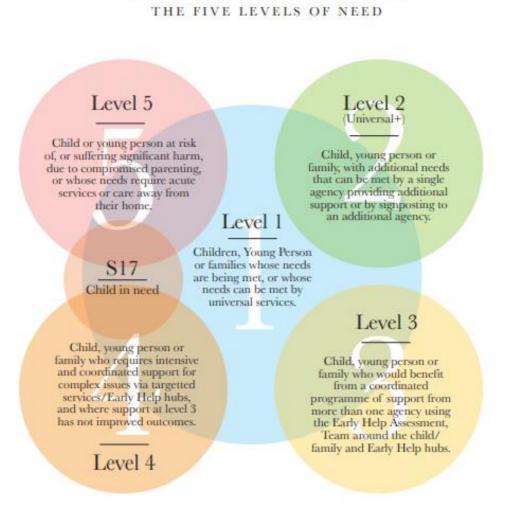
When records are being kept for more than the 6-year period files need to be clearly marked and the reasons for the extension period clearly identified.

If an allegation is made against a RET employee or volunteer a record will be kept until the person reaches normal retirement age, or for 10 years if that is longer. Such records will contain details of how the allegations were followed up and resolved, and of any action taken and decisions reached. These records will be kept in a confidential personnel file and a copy should be given to the individual whom the allegation is against.

9. WHISTLEBLOWING

The NSPCC Whistleblowing Advice Line is for anyone with child protection concerns in the workplace. The helpline provides support and advice to those who feel unable to get a child protection issue addressed by their employer. It can be contacted anonymously on 0800 028 0285.

APPENDIX A – MANCHESTER SAFEGUARDING CHILDREN'S BOARD NEEDS & RESPONSE ASSESSMENT FRAMEWORK



Royal Exchange Theatre, St Ann's Square, Manchester, M2 7DH Registered in England 927203 Registered Charity No: 255424

Lord 1 Child, young person or family whose needs are being met, or whose needs can be met by universal services. At this level, needs are met by parents, carers, communities and universal services. Lord 1 Child, young person or family with additional meeds that take met by universal services. Consider an Early Help Assessment (EFA) Consider using the EFA tool as a means of identifying needs and plan a response, either single agency or with the providing additional mormation, support additional agency Lord 2 Child, young person or family that needs a to ordinated programme of support firm more than one agency Complete an Early Help Assessment (EFA) Consider using the EFA tool as a means of identifying needs and plan a response, either single agency or with the single agency providing additional mormation, support additional agency Lord 3 Child, young person or family that needs a co- ordinated programme dua one agency Complete an Early Help Assessment (EFA) An EFA must be undertaken to identify and show evidence of the level of need, and to plan the holosic indicategroup response. This is done with parental consent its a tran Anound the Family meeding co-ordinated by the star family manufactor of 0161 224 5001. Lord 4 Child, young person family who requires and the star provide and the family meeting co-ordinated by which will advise fa an use agency to need the rank increases the response. This is done with parental the family who requires and the scal advise. Lord 4 Child, young person family who requires and family who requires andefame ano bearn meet by the mustagency action plan. The child,		NEED	ASSESSMENT	RESPONSE
Level 2 Image: high scale and be methy by a single agency or with the power of the scale and plan a response, either single agency or with the support of other agencies. Contact the Safeguarding Lead with your agency for further support and guidance at this level. With the scale of the sc	Level 1	family whose needs are being met, or whose needs can be met by	Universal Services	
Level 3 family that meeds a co- of support from more than one agency (EHA) evidence of the level of need, and to plan the holistic multi-agency response. This is done with agenchal consent via a Team Around the Family meeting co-ordinated by the nominated lead professional. Ensure the family understand the benefits of engaging in an EHA Make it clear that Early Help is about being supportive. If the family still refuse consent, you should contact an Early Help Co-ordinator. If you have any safeguarding concerns, ring Contact Manchester on 0161 234 5001. If you have any safeguarding concerns, ring Contact Manchester on 0161 234 5001. Icvel 4 Child, young person or family who requires intensive and co- ordinated support for complex issues via Targeted Services?. An Early Help Assessment (EHA) been completed, but hean on improved outcomes. Contact your Early Help hub, which will advise if a Statutory/Specialist Assessment is required outcomes. Contact your Early Help hub, which will support in co-ordinating more specialist and targeted intervention from statutory and specialist Assessment improved outcomes Statutory Assessment improved outcomes Some CIN will be well supported and have their needs and will require Social Work support within Level 5. There will be social workers within the Early Help hub, who will screen and escalate cases where the threshold for Sec 17 assessment and will for solicity 245 5001 worker support assessment in access specialist advice on safeguarding concerns. You must from significant harm due to compromised parenting, or whose needs require acut services or care avary If a child is in immediate danger, then an urgent referral to worke within the Early Help hub, who will screen and escalate cases where the threshold for Sec 17 assessment		family with additional needs that can be met by a single agency providing additional information, support and guidance, or by signposting to an	Help Assessment	needs and plan a response, either single agency or with the support of other agencies. Contact the Safeguarding Lead with your agency for further support and guidance at this level. Visit the Early Help Zone of Help and Support Manchester (Manchester City Council webpage) for further information and advice. Signpost family to Help and Support Manchester/SEND
Level 4or family who requires intensive and co- ordinated support for complex issues via Targeted Services/ Early Help hubs, and/ or where support at Level 3 has not improved outcomesAssessment (ÉHA) should have already been completed, but has not improved outcomes. Contact your Early Help hub, which will advise if a Statutory/Specialist Assessment is required outcomes. Contact your Early Help hub, which will advise if a Statutory/Specialist Assessment is required and will support in co-ordinating more specialist and targeted interventions if appropriate.Some CIN will be well supported and have their needs met at Level 4 without the requirement for Social Work Intervention. Other CIN will have more accute needs and will require Social Work support within Level 5. There will be social workers within the Early Help hubs who will screen and escalate cases where the threshold for Sec 17 assessment and intervention is met.Level 5Child or young person at risk of or suffering from significant harm due to compromised parenting or whose needs require acute services or care awayStatutory/Specialist AssessmentIf a child is in immediate danger, then an urgent referral should be made to the police. Otherwise, urgently refer to the MASH on 0161 234 5001 where practitioners can access specialist advice on safeguarding concerns. You must follow up the referral in writing in 48 hours.	Level 3	family that needs a co- ordinated programme of support from more	Help Assessment	 evidence of the level of need, and to plan the holistic multi-agency response. This is done with parental consent via a Team Around the Family meeting co-ordinated by the nominated lead professional. Ensure the family understand the benefits of engaging in an EHA. Make it clear that Early Help is about being supportive. If the family still refuse consent, you should contact an Early Help Co-ordinator. If you have any safeguarding concerns, ring Contact Manchester on 0161 234 5001. Visit/Signpost to Help and Support Manchester/SEND
S17 Child in Need Work Intervention. Other CIN will have more acute needs and will require Social Work support within Level 5. There will be social workers within the Early Help hubs who will screen and escalate cases where the threshold for Sec 17 assessment and intervention is met. Level 5 Child or young person at risk of or suffering from significant harm due to compromised parenting, or whose needs require acute services or care away Statutory/Specialist Assessment If a child is in immediate danger, then an urgent referral should be made to the police. Otherwise, urgently refer to the MASH on 0161 234 5001 where practitioners can access specialist advice on safeguarding concerns. You must follow up the referral in writing in 48 hours. Visit/Signpost to Help and Support Manchester/SEND	Level 4	or family who requires intensive and co- ordinated support for complex issues via Targeted Services/ Early Help hubs, and/ or where support at Level 3 has not	Assessment (EHA) should have already been completed, but has not improved outcomes. Contact your Early Help hub, which will advise if a Statutory Assessment	needs have not been met by the multi-agency action plan. The child, young person and/or their family may require long-term intervention from statutory and specialist services. Please contact your local Early Help hub, which will advise if a Statutory/Specialist Assessment is required and will support in co-ordinating more specialist and targeted interventions if appropriate. Visit/Signpost to Help and Support Manchester/SEND
Level 5 at risk of or suffering from significant harm due to compromised parenting, or whose needs require acute services or care away Assessment Assessment should be made to the police. Otherwise, urgently refer to the MASH on 0161 234 5001 where practitioners can access specialist advice on safeguarding concerns. You must follow up the referral in writing in 48 hours. Visit/Signpost to Help and Support Manchester/SEND		Work Intervention. Other CIN will have more acute needs and will require Social Work support within Level 5. There will be social workers within the Early Help hubs who will screen and escalate cases where the		
	Level 5	at risk of or suffering from significant harm due to compromised parenting, or whose needs require acute services or care away		should be made to the police. Otherwise, urgently refer to the MASH on 0161 234 5001 where practitioners can access specialist advice on safeguarding concerns. You must follow up the referral in writing in 48 hours. Visit/Signpost to Help and Support Manchester/SEND

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APPENDIX B: USEFUL SOURCES OF INFORMATION

Working Together To Safeguard Children 2018	https://www.gov.uk/government/publications/wo rking-together-to-safeguard-children2
Manchester Safeguarding Children Board	https://www.manchestersafeguardingboards.co.u k/practitioners-cyp/
	https://www.manchestersafeguardingboards.co.u k/resource/levels-need-multi-agency-decisions- framework/
Wigan Safeguarding Children's Board	http://www.wiganlscb.com/home.aspx
	Child Referral: https://apps.wigan.gov.uk/ChildReferral/
	01942 486042 or 01942 828300 (out of normal office hours) Email: lado@wigan.gov.uk
Tameside Safeguarding Children Board	https://www.tamesidesafeguardingchildren.org.u k/
	0161 342 4101 or 0161 342 2222 (out of office hours)
NSPCC	www.nspcc.org.uk
Independent Theatre Council Various resources including child performers	https://www.itc-arts.org/resources/working-with- young-people
Disclosure and Barring Service Website	https://www.gov.uk/government/organisations/di sclosure-and-barring-service
CEOP (Child Exploitation and Online Protection)	http://www.ceop.police.uk/safety-centre/
Internet watch Foundation	www.iwf.org.uk
UK Council for Child Internet Safety	http://dera.ioe.ac.uk/1970/ http://www.education.gov.uk/ukccis
The United Nations Convention on the Rights of the Child	https://www.unicef.org/crc/
Child Protection in Sport Unit	www.sportprotects.co.uk