



Safeguarding Children Procedures

Children access and engage with Buxton Opera House (BOH) 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 BOH.

1. Key definitions
 2. Definitions of abuse
 3. Incidents or concerns that must be reported
 4. Disclosure
 5. Signs of abuse
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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.

It is illegal in the UK to subject a child to female genital mutilation (FGM) or to take a child abroad or aid or abet someone to take a child out of the country to undergo the procedure (Female Genital Mutilation Act 2003).

Despite the harm it causes, FGM practising communities consider it acceptable to protect their cultural identity. A child/young person may disclose that she is at risk of FGM, has suffered FGM or that she has a sister or family member who is at risk of mutilation. Any information or concern about a child/young person or member of their family being at risk of FGM must be reported to a DSO.

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.

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.

Radicalisation

Radicalisation is the process through which a person comes to support or be involved in extremist ideologies. It can result in a person becoming drawn into terrorism and is in itself a form of harm. The process of radicalisation may involve:

- being groomed online or in person
- exploitation, including sexual exploitation
- psychological manipulation
- exposure to violent material and other inappropriate information
- the risk of physical harm or death through extremist acts.

It happens gradually so children and young people who are affected may not realise what it is that they are being drawn into.

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:

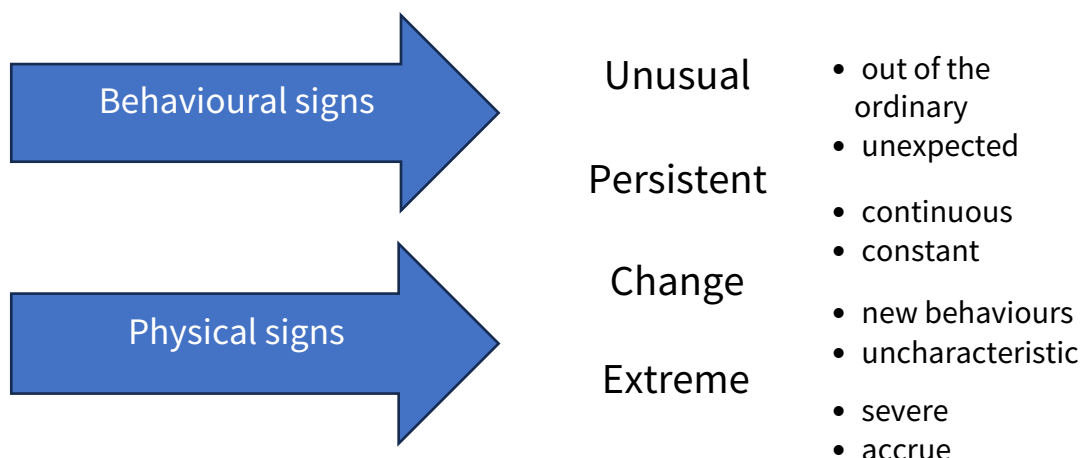
1. Remain calm and in control – don't panic
2. Listen carefully to what is being said – you need to remember as much as you can
3. Reassure the person that they have done the right thing by talking to you
4. Make sure that the person feels safe
5. Find an appropriate, early opportunity to explain you 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 suspicious injuries such as bruising, cuts or burns, especially if they are on parts of the body that are usually prone to injury
- An injury where the explanation seems inconsistent
- A person describing what appears to be abuse involving him / her
- Another child / adult showing concern about the welfare of a child / adult at risk
- Unexplained changes in behaviours, for example becoming very quiet, outburst of anger etc
- Inappropriate sexual knowledge
- Distrusting adults where a close relationship would normally be seen for example parents, aunties, uncles, siblings
- Engaging in sexually explicit behaviour
- Possible difficulties making friends
- Eating patterns may vary including overeating or loss of appetite
- Losing weight unexpectedly
- 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.



Additional signs to consider for FGM

- The family comes from a community that is known to practise FGM
- A child/young person may talk about a long holiday to a country where the practice is prevalent
- A child/young person may confide that they or a sister or family member is to have a 'special procedure' or to attend a special occasion
- A child/young person may request help from a teacher or another adult
- Any girl/young person born to a woman who has suffered FGM or has a sister or relative who has been subjected to FGM must be considered to be at potential risk

Additional signs to consider for radicalisation.

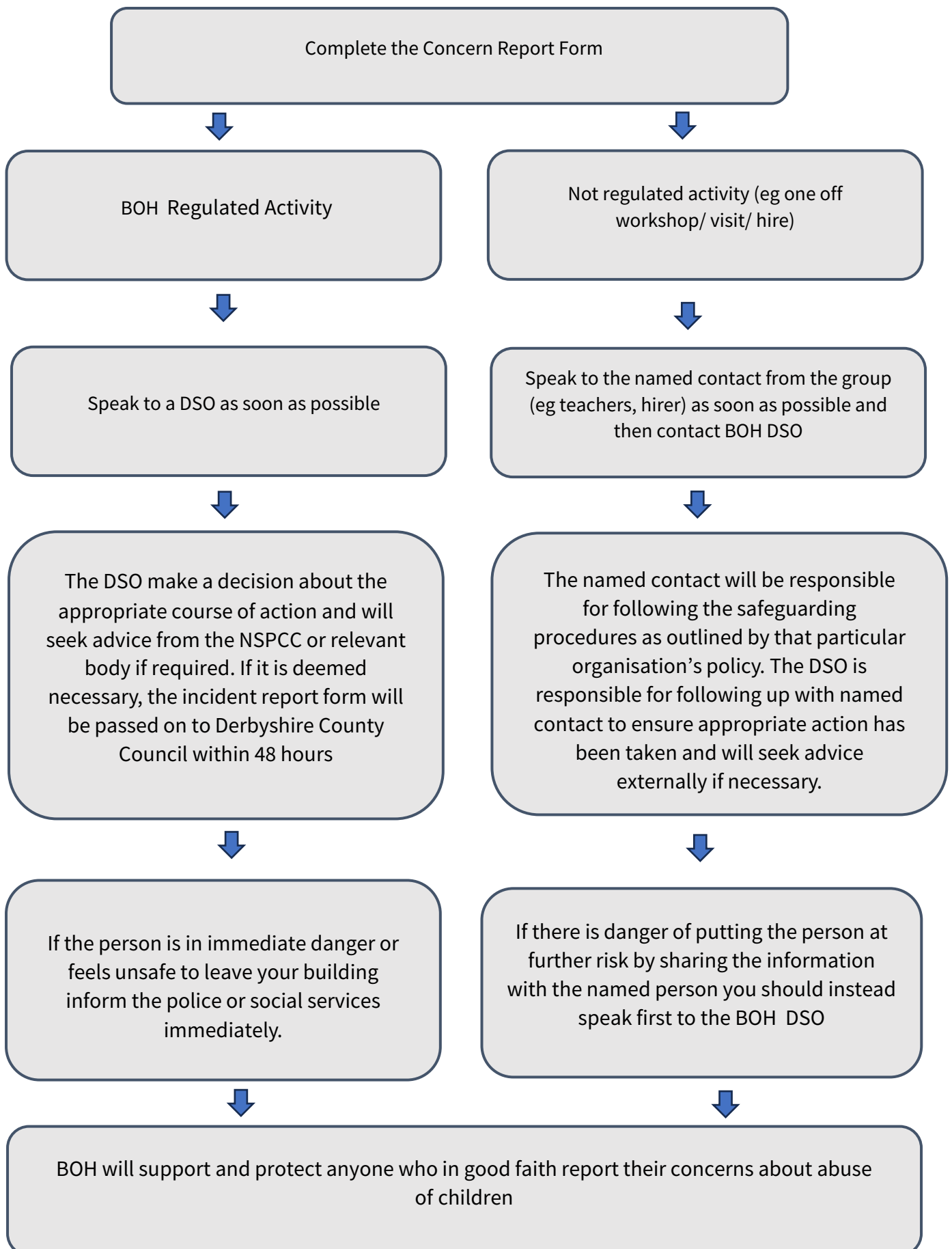
If a child or young person is being radicalised their day-to-day behaviour may become increasingly centred around an extremist ideology, group or cause. For example, they may:

- spend increasing amounts of time talking to people with extreme views (this includes online and offline communication)
- change their style of dress or personal appearance.
- lose interest in friends and activities that are not associated with the extremist ideology, group or cause
- have material or symbols associated with an extreme cause
- try to recruit others to join the cause

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 SAFEGUARDING 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, Derby and Derbyshire Children's Safeguarding Children Partnership and DCC Designated Officer (formerly known as the 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

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 BOH 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: USEFUL SOURCES OF INFORMATION

Working Together To Safeguard Children 2015	https://www.gov.uk/government/publications/working-together-to-safeguard-children--2
Derby and Derbyshire Safeguarding Children Partnership	www.ddscp.org.uk
NSPCC	www.nspcc.org.uk
National Network for Children in Employment and Entertainment (NNCEE)	https://www.nncee.org.uk/
Disclosure and Barring Service Website	https://www.gov.uk/government/organisations/disclosure-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 Internet Safety	https://www.gov.uk/government/organisations/uk-council-for-internet-safety
The United Nations Convention on the Rights of the Child	https://www.unicef.org/crc/
Childline	https://www.childline.org.uk/