



SIN Cru Child and Vulnerable Adults Protection Policy

Contact for advice and support

Nominated child protection lead:	Lucy Crowe	07989 927706
Working hours 10:00 - 16:00 Monday to Friday.		
Deputy child protection lead:	Lise Smith	07984 801656
Working hours 10:00 - 18:00 Monday to Friday. Out of hours contact in an emergency.		
Senior lead for safeguarding and child protection:	James Fogerty	07780 117696
Working hours 10:00 - 16:00 Monday to Friday. Out of hours contact in an emergency.		
NSPCC Helpline		0808 800 5000
Joint Cambridgeshire and Peterborough Safeguarding		0345 045 5203
Out of hours		01733 234724
Norfolk County Council CADS		0344 800 8021
Norfolk County Council LADO – for concerns about an adult working with a child: https://www.norfolkscb.org/people-working-with-children/how-to-raise-a-concern/local-authority-designated-officer-lado/		
Norfolk Children's Services 24 hours		0344 800 8020
Norfolk Police		101/emergency 999
Local Authority Designated Officers (LADO) Team		lado@norfolk.gov.uk
Norfolk Safeguarding Children Partnership (NSCP)		norfolkscp.org.uk
Safer Programme safer@norfolk.gov.uk		01603 228966
Cambridgeshire Constabulary		101
If a child is at immediate risk of abuse, call		999



Policy Statement

SIN Cru is the UK based Hip Hop culture and arts organisation. Delivering programmes predominantly in the South East: Cambridge and Norfolk. Also delivering infrequently in London, Leeds, Coventry, and Brighton. A core part of our work involves children, young people, and vulnerable adults, taking part in workshops, exhibitions, and performances, including residential stays.

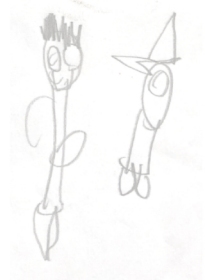
We work to ensure that dance, music, and visual arts, are available to all, both in and out of schools settings. We are dedicated to CASE – culture, art, style, expression through which, our aims for children and young people's work are to, improve teaching standards, increase access, raise standards and improve progression routes.

SIN Cru believe that:

- children, young people and vulnerable adults should never experience abuse of any kind
- we have a responsibility to promote the welfare of all children, young people, and vulnerable adults to keep them safe and to practise in a way that protects them
- all suspicions and all allegations of abuse should be taken seriously and responded to swiftly and appropriately, which may require a referral to children's services and in emergencies, the police
- all permanent and temporary staff, board members, volunteers, and freelancers working on behalf of SIN Cru, should be clear on how to respond appropriately

SIN Cru recognise that:

- the welfare of the child, young person, or vulnerable adult is paramount in all the work we do, and in all the decisions we take
- all children, young people and vulnerable adults, whatever their age, culture, disability, gender, language, racial origin, religious beliefs, sexual identity, have an equal right to protection from all types of harm or abuse



- working in partnership with children, young people, vulnerable adults, their parents, carers, and other agencies is essential in promoting young people's welfare

We will seek to keep children, young people, and vulnerable adults safe by:

- valuing, listening to, and respecting all children, young people and vulnerable adults
- appointing a nominated child protection lead and deputy, for safeguarding
- adopting child protection and safeguarding best practice through our policies, procedures and code of conduct for staff and volunteers
- recording, storing and using information professionally and securely, in line with data protection legislation and guidance
- making sure that children, young people, vulnerable adults, and their families know where to go for help if they have a concern
- using our safeguarding and child protection procedures to share concerns and relevant information with agencies who need to know, and involving children, young people, vulnerable adults, parents, families and carers appropriately
- creating and maintaining an anti-bullying environment with procedures to help us deal effectively with any bullying that does arise
- ensuring that we have effective complaints and whistleblowing measures in place
- providing a safe environment for our children, young people, vulnerable adults, staff, and volunteers, by applying health and safety measures in accordance with the law
- building a safeguarding culture where staff and volunteers, children, young people, vulnerable adults, and their families, treat each other with respect and are comfortable about sharing concerns



Roles and Responsibilities of Child Protection Lead

- In the event of a safe guarding concern, the CPL or deputy will report to the suitable County, City or company team, will keep records of the concern and the escalation and intervene to inform the police if they think necessary.
- The CPL or deputy will liaise with Children's Services and other agencies and make referrals to The Children's Advice and Duty Service or Local Authority Designated Officer when required
- The CPL is responsible for making sure the policy is reviewed yearly and updated when changes happen at local or national level
- The CPL will insure all SIN Cru staff, volunteers, visitors, and parents are aware of this policy and the procedures to follow.
- The CPL will insure all staff and volunteers have received appropriate safeguarding information during induction and have received safeguarding training
- The CPL will insure that safer recruitment practices are followed
- The CPL will update staff on changes to safeguarding
- The CPL will have completed designated safeguarding person training



Recruitment of staff

All staff, board members, volunteers, and freelancers working on behalf of SIN Cru who may have direct contact with children, young people and or vulnerable adults will be subject to enhanced disclosures through the Disclosure and Barring Service or equivalent. Disclosures will be repeated periodically, usually every three years.

SIN Cru will recruit through accurate job description, person specification including description of the qualifications, skills, experience, knowledge and other attributes which a candidate must possess to perform the job duties. Where necessary SIN Cru will use application forms, and interviews. In order to hold a temporary or permanent position with the company that includes contact with young people or vulnerable adults SIN Cru will ask for two references, and qualification check possible employees with due diligence.

Safer Working Practices for staff and volunteers

Volunteers and staff will receive the company safeguarding policy, undergo internal training, and appropriate training to for the host organisation or partner that their project works with.

All staff who will come in contact with children or vulnerable adults will undertake NSPCC child protection and safety training or equivalent which will be renewed every three years.

All staff and volunteers will have SIN Cru Code of Conduct document made available.

It can be in a separate document, but mentioned within your policy, or added to this policy appendix.

Use of video and photography

Formal written and signed consent will be obtained from parents, or guardians for the use of any images of children, young people, and vulnerable adults whether for publication on the SIN Cru website, and social medias, or in any printed materials.

Use of the Internet and Social Media

SIN Cru will remain mindful of current issues surrounding the safety of children, young people, and vulnerable adults using the internet and will stay abreast of any guidance surrounding this. Please see our device management policy here: <https://sincru.co.uk/wp-content/uploads/2023/02/Device-Safety-Policy.pdf>

Touch

SIN Cru believe that physical contact between children and adults can be healthy, positive, and important for both safety, and useful for the development of skills. Activity leaders will always:



- use touch only when appropriate to the activity (eg physically supporting a participant)
- seek permission for the use of touch in teaching activities and accept the participant's right not to be touched, with a provision for alternative means of teaching
- use touch only in whole-group, supervised activities and not in one-to-one teaching
- use touch to assist the needs of the child, not those of the adult

Implementation and monitoring

SIN Cru board of directors have responsibility to stay abreast of changes in legislation pertaining to child protection. The policy will normally be reviewed each year unless there are reasons why it should be reviewed more frequently. Staff and volunteers will be made aware every time the policy changes and will be sent the newest version.

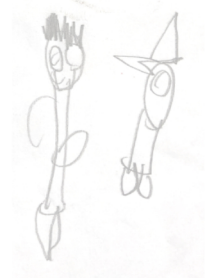
Procedures and Systems

Definitions

In the Children Act 1989 a child is defined as up to and including the age of 18. The term 'young person' is not a legal term and refers to the age ranges of the official definition of a child. There is no standard definition of 'vulnerable adult' in law, but Arts Council England uses the following definition: "Vulnerable adults are people who are or may be in need of community care services because of mental disability or other disability, age or illness, and who are, or who may be, unable to take care of themselves or unable to protect themselves against significant harm or exploitation."

The government guidance [Working Together to Safeguard Children \(July 2018\)](#) categorises abuse as:

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.

- **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.
- **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 insofar as they meet 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.
- **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,



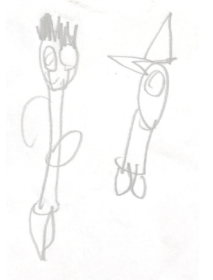
or grooming a child in preparation for abuse. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

- **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 care 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.

Additional safeguarding concerns to be aware of are:

- **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.
- **Extremism** - Extremism goes beyond terrorism and includes people who target the vulnerable - including the young - by seeking to sow division between communities on the basis of race, faith or denomination; justify discrimination towards women and girls; persuade others that minorities are inferior; or argue against the primacy of democracy and the rule of law in our society. Extremism is defined in the Counter Extremism Strategy 2015 as the vocal or active opposition to our fundamental values, including the rule of law,



individual liberty and the mutual respect and tolerance of different faiths and beliefs. We also regard calls for the death of members of our armed forces as extremist.

THE PREVENT DUTY

PREVENT - Prevent is part of the UK's Counter-terrorism strategy CONTEST. The aim of Prevent is to stop people from becoming terrorists or supporting terrorism.

The key terms to be aware of are as follows:

Extremism - the vocal or active opposition to our fundamental values, including the rule of law, individual liberty and the mutual respect and tolerance of different faiths and beliefs.

Radicalisation - refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups.

Terrorism - action that endangers / causes serious violence to a person/people; causes serious damage to property; or seriously interferes with / disrupts an electronic system.

In Norfolk the following procedure is to be followed:

Responding to a concern: Notice - Check - Share

Notice

A staff member or volunteer working with a child or young person could be the person to notice that there has been a change in the individual's behaviour that may suggest they are vulnerable to radicalisation. Every case is different, and there is no checklist that can tell us if someone is being radicalised or becoming involved in terrorism. There are some common signs that may mean someone is being radicalised.

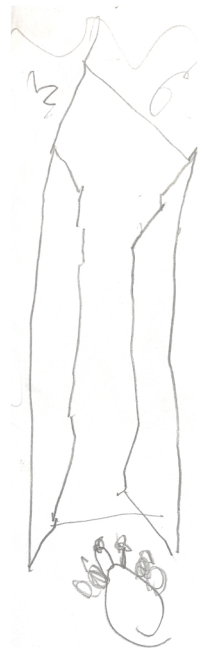
Expressing an obsessive or angry sense of injustice about a situation and blaming this on others.

Expressing anger or extreme views towards a particular group such as a different race or religion.

Suggesting that violent action is the only way to solve an issue, sharing extreme views or hatred on social media.

Check

The next step is for the staff member or volunteer to speak to the manager or safeguarding lead to better understand the concerns raised by the behaviours observed to decide whether intervention



and support is needed. In many cases there will be an explanation for the behaviours that either requires no further action or a referral not related to radicalisation or extremism.

Share

Where the staff member or volunteer still has concerns that the individual may be vulnerable to radicalisation, then the organisation's safeguarding procedures will be followed, and this safeguarding concern will be reported to the Children's Advice and Duty Service (CADS).

Following this the Prevent referral form should be completed, which can be downloaded from [here](#) referral form and sent to: preventreferrals-NC@Norfolk.police.uk

An initial assessment of the referral will be carried out prior to any further information gathering on the individual.

For urgent radicalisation concerns contact Norfolk police on 101 or, in an emergency, 999.

Additional information and guidance on Prevent is available on the Norfolk County Council website.

- **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.

- **Female Genital Mutilation**

From October 2015, the [Female Genital Mutilation Act 2003](#) (as amended by section 74 of the [Serious Crime Act 2015](#)) introduced a [mandatory reporting duty](#) for all regulated health and social care professionals and teachers in England and Wales. **Professionals must make a report to the police, if, in the course of their duties:**

- a. they are informed by a girl under the age of 18 that she has undergone an act of FGM



- b. they observe physical signs that an act of FGM may have been carried out on a girl under the age of 18

Responding to possible abuse and to disclosure

Extract from 'Keep Arts Safe', Arts Council England and NSPCC, 2nd Edition Oct 2005

[Currently not available on Arts Council website]

As an artist or arts organisation working directly with children, young people or vulnerable adults, you should always have a contact person with legal responsibility for the child, young person or vulnerable adult. You should never assume sole responsibility for a child, young person or vulnerable adult.

Suspicious

If you see or suspect abuse of a child, young person or vulnerable adult you should make a person not associated with the allegation with legal responsibility for the child, young person or vulnerable adult (e.g. the teacher, youth or care worker) aware of the problem.

If you suspect that the person with legal responsibility (i.e. the teacher, parent, youth or care worker) is actually the source of the problem, you should make your concerns known to another member of staff employed at the site, call the local safeguarding team, or the police: see page 1.

Take notes of what you witnessed as well as your response, and make your line manager (or other relevant person, such as the project organiser) aware of the situation. This will immediately be passed on to the child protection lead, you will be informed of the escalation and supported on further action.

Accidents and injuries

If a child, young person or vulnerable adult is injured – while at SIN Cru or while involved in a project you have organised – you must record the injury in the accident book, countersigned by the person with responsibility for the individual. If a child, young person or vulnerable adult arrives



at SIN Cru's venue or project with an obvious physical injury, make a record of this in your accident book, countersigned by the person with responsibility for the individual. This record can be useful if a formal allegation is made later. It will also be a record that the individual did not sustain the injury whilst at your venue or on your project. The accident book should be kept for 21 years.

Eating disorders

SIN Cru recognises that eating disorders are a potential problem among the age group that we work with, as disorders such as anorexia or bulimia nervosa arise most often during adolescence. The causes of eating disorders are not well understood by medical science; however, it is known that children, young people, and vulnerable adults with eating disorders are typically preoccupied with food, weight and their personal body image, and in general, those with eating disorders experience depression or low self-esteem and relate these problems to their body image. Eating, or not eating, may be seen as an attempt to regain some element of control, communicate needs and to cope with high stress levels.

It is important to recognise that exercise and over-exercising may be being used in order to control weight, so that a healthy physical pastime may, if pursued in an extreme or obsessive manner, indicate an unhealthy relationship with the body. Some individuals may pursue a particular pastime or even career and claim that it is this pastime that prompts them to lose weight in an attempt to hide the disorder. Society accepts that there is pressure on dancers (as also on models, actors or gymnasts) to be thin, and an individual may claim that it is Dance not the disorder, that necessitates their maintaining a low body weight or losing even more weight.

WHAT TO DO IF YOU SUSPECT A CHILD HAS AN EATING DISORDER

Keep records.

There is a chance that the child, young person, vulnerable adult, and even parents/carers, will react negatively to any suggestion that there is an eating disorder. Workers are advised to keep clear, concise notes of the incidents that have led them to suspect that a child, young person, vulnerable



adult has a problem. These notes should focus on specific observed behaviours, without attempting to reach any definitive conclusion.

Consult other workers, and take professional advice

Compare notes with other workers, who may share concerns about the child, young person, vulnerable adult. Consult resource material on eating disorders, and information on support services available in the community.

If there is reason to believe that the child, young person, vulnerable adult, has been, or is likely to be, abused, neglected or in need of protection, the nominated child protection lead must report the matter immediately to Children's Services Department (whose task it is to investigate the matter under Section 47 of the Children's Act 1989).

Approach the child with your concerns regarding the eating disorder

When speaking to a child, young person, vulnerable adult, you suspect may have an eating disorder, do:

- listen carefully and be empathic
- communicate your care and concern
- develop a compassionate conversation that is understanding and supportive
- direct child, young person, vulnerable adult, to a counsellor or family doctor
- recognize that eating disorders are about low self-esteem, fear and other unresolved issues
- provide support by referring child, young person, vulnerable adult to community resources and reading materials
- support the treatment plan developed by health care professionals to help child, young person, vulnerable adult recover
- have patience

For further information on how to talk about an eating disorder with a child, see **Appendix 2**.

Responding to Abuse

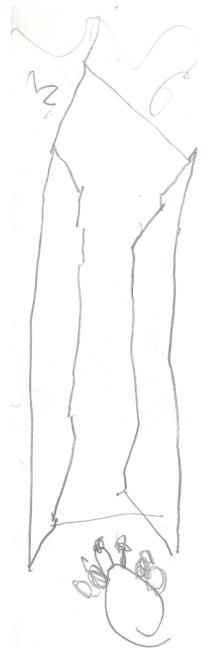


Any form of abuse is serious and should be treated as that by adults to whom it is disclosed, and handled with care. It is not easy to give precise guidelines but the following may be of help if there are concerns of abuse of a child, young person or vulnerable adult:



GENERAL POINTS

- accept what the child, young person, vulnerable adult says (however unlikely the story may sound)
- remain calm and in control but don't delay acting
- look at the child, young person, vulnerable adult directly
- be honest. Let them know you will need to tell someone else – don't promise confidentiality
- even when a child, young person, vulnerable adult has broken a rule they are not to blame for the abuse
- be aware that the child, young person, vulnerable adult may have been threatened
- never push for information
- listen carefully to what is said. Allow the person to tell you at their own pace and ask questions only for clarification

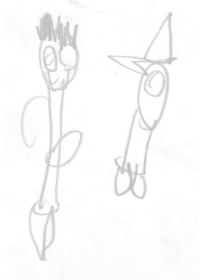


HELPFUL THINGS TO SAY OR SHOW

- I believe you (or showing acceptance of what the child says)
- I am glad that you have told me
- it's not your fault
- I will help you

AVOID SAYING

- why didn't you tell anyone before?
- I can't believe it
- are you sure this is true?



- why? how? when? who? where?
- don't promise to 'keep it a secret'. Make it clear that you will only tell the people who need to know and who should be able to help
- never make statements such as "I am shocked, don't tell anyone else"
- don't ask questions that suggest a particular answer



CONCLUDING

- again, reassure the child, young person or vulnerable adult that they were right to tell you and that you believe them
- let the child, young person or vulnerable adult know what you are going to do next and that you will let them know what happens
- immediately refer to someone appropriately qualified. If on outreach, speak immediately to the person in the school/ educational setting, youth or care setting who has designated responsibility for protection of children, young people or vulnerable adults. (This is likely to be the head teacher for a school, the youth group leader or the director of the youth or care setting.) If inhouse activity or project, speak immediately to SIN Cru's nominated child protection lead, Lucy Crowe. It is that person's responsibility to liaise with relevant authorities, usually social services. In Norfolk a referral will be made to Children's Advice and Duty Service when required. Refer to Appendix 6 for the CADS Flowchart and Procedure.
- **make notes as soon as possible, preferably within an hour of the disclosure, writing down exactly what the child/ young person/ vulnerable adult said, using their own words.** Note the date, time, any names that were involved or mentioned and who you gave the information to. Make sure you sign and date your record
- in confidence, make your line manager or other appropriate colleague (for instance the project organiser) aware of the situation



Social services will liaise with the relevant departments on a 'need-to-know' basis and will, if appropriate, inform the police. It is the responsibility of the authorities to determine whether abuse has occurred.

Managing Allegations against people working with children

Our aim is to provide a safe and supportive environment which secures the wellbeing and very best outcomes for the children who attend our setting. We do recognise that sometimes the behaviour of adults may lead to an allegation of abuse being made.

Allegations sometimes arise from a differing understanding of the same event, but when they occur, they are distressing and difficult for all concerned. We also recognise that many allegations are genuine and there are some adults who deliberately seek to harm or abuse children. We work to the thresholds for harm as set out in 'Working Together to Safeguard Children' (2018).

An allegation may relate to a person who works / volunteers with children who has:
behaved in a way that has harmed a child, or may have harmed a child and/or;
possibly committed a criminal offence against or related to a child and/or;
behaved towards a child or children in a way that indicates he or she may pose a risk of harm to children; and/or behaved or may have behaved in a way that indicates they may not be suitable to work with children. The point above recognises circumstances where a member of staff (including locum or supply staff) or volunteer is involved in an incident outside of setting/agency/work place which did not involve children but could have an impact on their suitability to work with children; this is known as transferrable risk.



At SIN Cru we recognise our responsibility to report / refer allegations or behaviours of concern and / or harm to children by adults in positions of trust known to us, but who are not employed by our organisation to the LADO service directly.

In Norfolk we contact lado@norfolk.gov.uk

In Leeds we contact LADO@leeds.gov.uk

In Cambridge we contact LADO@cambridgeshire.gov.uk



We will take all possible steps to safeguard our children and to ensure that the adults at SIN Cru are safe to work with children.



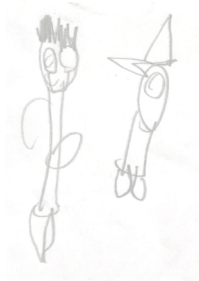
When concerns arise, we will always ensure that the safeguarding actions outlined in the local protocol and procedures of the local safeguarding children's board are followed.

In Norfolk we consult this guidance: NSCP Protocol 8.3 – Allegations Against Persons who Work/ Volunteer with Children and The Management of Allegations Against People Working with Children Procedure are adhered to and will seek appropriate advice.



If an allegation is made or information is received about any adult who works/ volunteer in our setting which indicates that they may be unsuitable to work / volunteer with children, the member of staff receiving the information will inform SIN Cru immediately. This includes concerns relating to agency, supply and specialist staff, students and volunteers.

Should an allegation be made against the Senior Safeguarding Lead this will be reported to the Nominated Safeguarding Lead. In the event that the Nominated Safeguarding Lead is not contactable on that day, the information must be passed to and dealt with by the Deputy Safeguarding Lead (see page one for details).



Records and Confidentiality

In any case of recording a safeguarding matter, SIN Cru will keep the written reports, and any informations pertaining to escalation of a report or concern on our encrypted and password protected drive.

This information will include the names and particulars of individuals if they were included in a reported incident. The information will only be accessible to the three named safeguarding personal and the authorities or other safeguarding teams if needed.

Our organisation cannot guarantee confidentiality if there is a child safeguarding concern, as we will need to share these concerns with the Children's Services. It is an expectation that our organisation will seek consent to share information first unless to do so would place somebody at risk of harm or undermine a criminal investigation.

Rights and confidentiality

If a complaint or allegation is made against a member of staff, he or she should be made aware of his or her rights under both employment law and internal disciplinary procedures.

No matter how you feel about the accusation, both the alleged abuser and the person who is thought to have been abused have the right to confidentiality under the Data Protection Act 2018. Remember also that any possible criminal investigation could be compromised through inappropriate information being released.

In criminal law the Crown or other prosecuting authority has to prove guilt and the defendant is presumed innocent until proven guilty.

Relevant Guidance and Legislation

- Working Together to Safeguard Children 2018
- What to do if You're Worried a Child is Being Abused 2015
- Children Act 2004
- Children Act 1989



-Norfolk Continuum of Needs Guidance Norfolk Guidance to Understanding Continuum of Needs | NSCP | PWWC (norfolklscp.org.uk)

-Norfolk Safeguarding Children Partnership Policies and Procedures

Polices & Procedures | Norfolk Safeguarding Children Partnership (norfolklscp.org.uk)

-Online Safety Bill (once it is law)

Working with parents and carers

-Parents will be sent consent forms or will submit consent clauses in sign up at the start of their child's involvement, which will trigger emails out with signposting to the policy to read.

-Policy available on our company website SIN Cru.co.uk, with link emailed out to each new participants parents, carer, or guardian. In the event that sign ups to classes have been made through a teacher or temporary carer, SIN Cru will make sure the suitable legal guardian has been made aware of the policy and it's ramifications.

-Policy sent to new parents by email

-Parents will be informed of our legal duty to assist other agencies with Safeguarding enquiries and what happens should we make a referral to Children's Services.

-Parents will be made aware that we will need to share information with the relevant authorities if we have concerns about the welfare of their child, and that we do not have to seek consent from them, if there are serious concerns about harm or likely harm to their child/children.



Other Relevant Policies

Our safeguarding policy should be read in conjunction with the other following policies which also fall under our safeguarding umbrella:

- Accessibility and SEND policy: <https://sincru.co.uk/wp-content/uploads/2022/11/Accessibility-and-SEND-Policy.pdf>
- Device safety policy: <https://sincru.co.uk/wp-content/uploads/2023/02/Device-Safety-Policy.pdf>
- Equality policy: <https://sincru.co.uk/wp-content/uploads/2023/04/Equality-Policy.pdf>
- Positive behaviour management policy: https://sincru.co.uk/wp-content/uploads/2021/06/positive_behaviour_management_statement.pdf

This policy statement came into force on September 2021 (date)

We are committed to reviewing our policy and good practice **annually**.

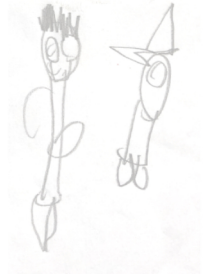
This policy statement and accompanying procedures were last reviewed on 14-12-23

Signed:



Date: 14.12.23

Senior lead for safeguarding and child protection



Appendix 1:

Recognising and Responding to Abuse

The following behavioural signs *may* be indications of child abuse, but not to be taken in isolation:

PHYSICAL SIGNS

- any injuries not consistent with the explanation given for them
- injuries which occur to the body in places which are not normally exposed to falls, rough games etc or dance related
- injuries which have not received medical attention
- instances where children, young people, vulnerable adults are kept away from the group inappropriately
- reluctance to change for, or participate in, dance, games or swimming
- bruises, bites, burns, fractures etc which do not have an accidental explanation
- cutting/ slashing/ drug abuse

INDICATORS OF POSSIBLE SEXUAL ABUSE

- any allegations made by a child, young person, vulnerable adult concerning sexual abuse
- child, young person, vulnerable adult with excessive pre-occupation with sexual matters and detailed knowledge of adult sexual behaviour, or who regularly engages in age-inappropriate sexual play
- child, young person, vulnerable adult who is sexually provocative or seductive with adults
- inappropriate bed-sharing arrangements at home
- severe sleep disturbances with fears, phobias, vivid dreams or nightmares, sometimes with overt or veiled sexual connotations

EMOTIONAL SIGNS

- changes or regression in mood and behaviour, particularly where a child, young person, vulnerable adult withdraws or becomes clingy. Also depression/ aggression



- nervousness/ frozen watchfulness
- sudden under achievement or lack of concentration
- inappropriate relationships with peers and/ or adults
- attention seeking behaviour
- persistent tiredness
- running away/ stealing/ lying

It is important that the above signs are not taken as indicating that abuse has taken place, but the possibility should be considered far more than in the past.

RECOGNISING A POTENTIAL EATING DISORDER

Medical experts advise that early intervention in an eating disorder may greatly improve the prognosis. It is therefore important to be aware of signs of a potential eating disorder, and to have guidelines for dealing with any instances where concern may be expressed about an individual.

Symptoms of common eating disorders include:

- dramatic weight loss in a relatively short period of time
- wearing big or baggy clothes or dressing in layers to hide body shape and/or weight loss
- obsession with weight/ complaining of weight problems (even if "average" weight or thin)
- obsession with calories and fat content of foods
- obsession with continuous exercise
- frequent trips to the bathroom immediately following meals (sometimes accompanied with water running in the bathroom for a long period of time to hide the sound of vomiting)
- visible food restriction and self-starvation
- visible bingeing and/or purging
- self-defeating statements after food consumption
- hair loss, pale or "grey" appearance to the skin
- dizziness and headaches
- low self-esteem, feeling worthless



- need for acceptance and approval from others
- mood swings, depression, fatigue

Appendix 2:

Talking about eating disorders

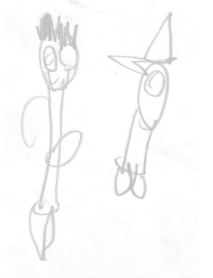
Be as supportive as possible, while clarifying that any important information will be shared with parents and carers.

The following are a few practical suggestions to consider when talking with a child, young person, vulnerable adult about a potential eating disorder:

- express your concerns candidly to the child, young person, or vulnerable adult, without criticism, and let them know you care and want to talk about what you are observing
- tell the child, young person, vulnerable adult that you must share your concerns with others. Make it clear that you will only tell those who need to know and are able to help
- listen. The child, young person, vulnerable adult needs to be heard and feel understood.
- communicate clearly that you understand the courage it takes to talk about the problem
- encourage the child, young person, vulnerable adult to seek help as soon as possible, and support them by ensuring they have access to appropriate information and resources
- control the impulse to overreact. Emphasizing the severity of the problem with the child, young person, vulnerable adult may add to the stress level and intensify the problem
- share all information with nominated lead. It is likely the child, young person, vulnerable adult has approached you in an effort to begin a process to deal with the eating disorder

When talking with a child, young person, or vulnerable adult with an eating disorder, don't:

- be punitive or judgmental, argue or get into a battle of wills
- comment **at all** on the appearance of the child, young person, vulnerable adult
- imply that eating disorders are about food, weight and body size



- place barriers to the participation of the child, young person, vulnerable adult in company dance or other activities
- blame the child, young person, vulnerable adult, the family or yourself for the disorder
- diagnose, moralize, develop treatment plans, or monitor the eating patterns of the child, young person, or vulnerable adult



Appendix 3:

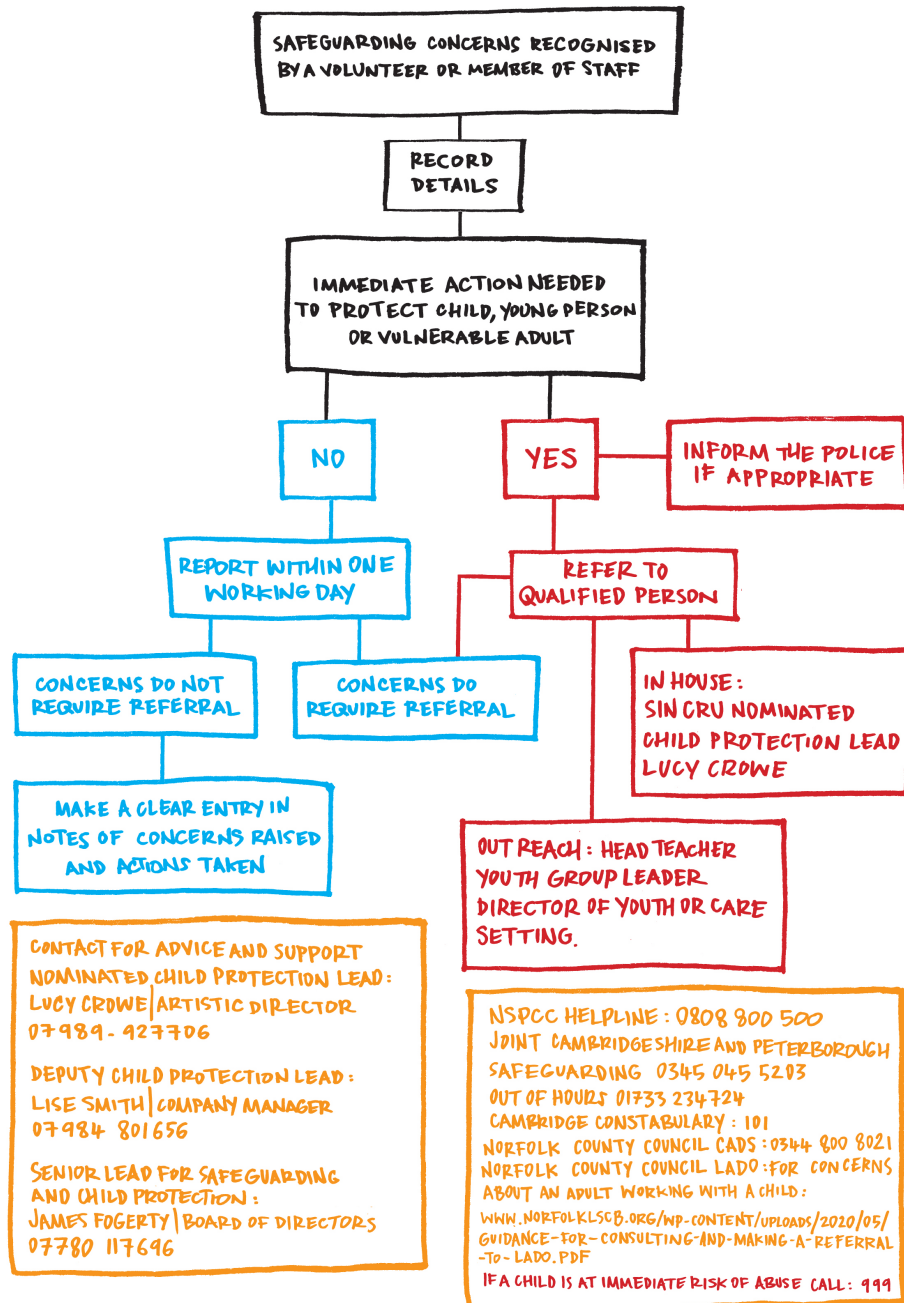
SIN Cru team training overview

	PREVENT training	L.Smith	June 2023
	Refresher safeguarding	L.Smith	June 2023
	Refresher safeguarding	L. Smith	June 2021
NSPCC	<i>Safer Recruitment</i>	L.Crowe	July 2021
		J.Fogerty	July 2021
NSPCC	<i>Safeguarding 16 – 25 year olds</i>	L.Crowe	July 2021
		J.Fogerty	July 2021
NSPCC	<i>Safeguarding children with SEND</i>	L.Crowe	July 2021
		J.Fogerty	July 2021
NSPCC	<i>Protecting children in entertainment</i>	L.Crowe	July 2021
		J.Fogerty	July 2021
NSPCC	<i>Child protection training for tutors</i>	L.Crowe	July 2021
		J.Fogerty	July 2021
UK Coaching	<i>Safeguarding and protecting children</i>	T.Hamilton	Feb 2021
QCF	<i>Principles of the Prevention and Control of Infection</i>	L.Crowe	June 2020
		J.Crowe	May 2020
Cambridgeshire County Council	<i>Child Protection</i>	L.Crowe	Feb 2018



Appendix 4:

SAFEGUARDING OF CHILDREN, YOUNG PEOPLE AND VULNERABLE ADULTS



Appendix 5:

Relevant Documents and Additional Contacts

E-Safety Policy Advice, The UK Safer Internet Centre

<https://www.saferinternet.org.uk/advice-centre/teachers-and-school-staff/online-safety-policy>

A step by step guide for organisations to safeguard children, NSPCC

<https://learning.nspcc.org.uk/>

Working Together to Safeguard Children, HM Government

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/779401/Working_Together_to_Safeguard-Children.pdf

Disclosure & Barring Service

DBS helpline: 03000 200 190

<https://www.gov.uk/government/organisations/disclosure-and-barring-service>

NSPCC

Weston House

42 Curtain Road

London EC2A 3NH

Tel: 0808 800 5000

www.nspcc.org.uk



Appendix 6:

Making a Referral to the Children's Advice and Duty Service

The Children's Advice and Duty Service-CADS

SIN Cru Child Protection and Vulnerable Adults Policy and Procedures

Last Review: Dec 2023

logo by NonSINthetic | illustrations by James Brown

- If we are concerned that a child or children is experiencing or likely to suffer significant harm we will telephone (CADS) immediately on 0344 800 8021
- When considering whether to make a referral to CADS we will consult the CADS Flowchart
- We will gain consent from the parent to contact CADS, unless to do so would place the child at further risk of harm or undermine a criminal investigation.
- CADS will agree a way forward and keep us informed. They will send a written record of our conversation within 5 working days.
- The outcomes could include a full referral to the Multi Agency Safeguarding Hub (MASH) for further investigation, the Police, or for work with Early Help.
- We will not investigate and will be led by the Local Authority and/or the Police.
- We will keep written dated records of all conversations with CADS.
- We understand if we are unhappy about a decision made by CADS or MASH we can use the Resolving Professional Disagreements policy on <https://norfolkscp.org.uk/>
- Members of the public or parents can contact CADS on 0344 800 8020.

