



Registered Charity No. 1178401

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THE OTAKAR KRAUS MUSIC TRUST (OKMT) POLICY FOR THE SAFEGUARDING OF CHILDREN & YOUNG PEOPLE

Preamble

OKMT (**the Charity's**) activities involve working with vulnerable people, often in one-to-one therapy sessions. Accordingly, the Charity's trustees (**'Trustees'**) have determined that it should adopt a policy to ensure, so far as is reasonably possible, that every activity of the Charity is conducted in a safe environment for vulnerable people. The Trustees have determined that *everyone involved in working on behalf of the Charity has a responsibility to safeguard and promote the wellbeing of those who seek to benefit from its activities and therapies.*

Policy Statement

OKMT recognises that it has a duty of care, moral and legal obligations to ensure that all children and young people involved in the activities of OKMT have protection from harm and have the opportunity to learn and experience OKMT in a safe and supportive environment. The needs of disabled children and others who may be vulnerable must be taken into account.

Introduction

This policy defines how The Otakar Kraus Music Trust operates to safeguard children and young people. OKMT is committed to the protection and safety of children and young people involved as visitors and/or as participants in all OKMT activities both on and off site. The Trust wants to ensure that staff, freelance contractors and volunteers (hereafter referred to as 'Staff') are properly trained, protected and supported when coming into contact with these groups.

Background

Music therapy is an established discipline allied to the health services. The Otakar Kraus Music Trust uses music therapy in its various forms for the benefits of its clients' health and mental wellbeing. OKMT also contributes towards the wider understanding of the benefits of music therapy and provides information and advice, working alongside parents, carers, teachers, doctors and other health professionals.

Each member of our team of therapists/teachers are State Registered under the Health and Care Professions Council (HCPC) and are members of the British Association for Music Therapy (BAMT).

The parent/carer will be required to sign a statement of agreement for the child or young person to remain alone with the therapist, and the therapist has their contact details. An individual risk assessment is required in these cases.

This policy applies to all staff, contractors and volunteers, and the term “staff” in this document includes all these named groups. This policy has been written using the legal and social care framework detailed in the following:

- London Child Protection Procedures
- Working Together to Safeguard Children 2015
- Children Act 1989
- Children Act 2004
- Children and Families Act 2014
- The Care Act 2014

Definitions

- **Child** A child as defined by the Children’s Act 1989 and 2004 is anyone who has not yet reached their 18th birthday. Children therefore means children and young people throughout.

Principals

The Staff and Trustees believe that:

- All children and young people whatever their age, gender, culture, ability, language, religious, beliefs, racial origin and/or sexual identity should be able to enjoy the activities of OKMT in a fun environment, safe from abuse of any kind.
- The welfare of the child or young person is paramount
- All children and young people have the right to protection from abuse
- All suspicions and allegations of abuse must be properly reported to the appropriate authority. Staff not adhering to policy and procedure will be subject to formal disciplinary procedures.
- Staff, therapists/teachers and volunteers must be clear on appropriate behaviour and responses
- The primary responsibility for the care of children at the venue rests with the child’s carer. All staff working with young people should be aware that some young people may behave inappropriately. Any sanctions and approaches to discipline should in the first instance be managed by the responsible adult/carer.

The Trust seeks to ensure that:

- users of provided services have confidence in them,
- staff and personnel understand the policies and procedures of Safeguarding and know what to do, and
- whom to contact should they have any Safeguarding concerns.

Procedures:

Nominated Safeguarding Person: Clare Lawrence, Director

Mobile: 07435 062212 Email: info@okmtrust.org.uk

Nominated Trustee: Jill Clark,

Tel: 020 8892 3923 Mobile: 07926157530 Email: jill.clark@okmtrust.org.uk

In order to adequately protect children and young people OKMT will ensure:

- There is a Nominated Safeguarding Person (NSP) and a Nominated Trustee to represent the issue at board level who attend regular training (see above). The board receives basic awareness training in CP and Safeguarding, as legal responsibilities relating to this ultimately rest with the board.
- All staff and trustees are trained in basic Safeguarding every three years.
- The Music Therapists/teachers should have at least level 2 safeguarding training, or above, and refresh their training every 3 years
- The NSP and Nominated Trustee have level 3 training, which should be renewed every 2 years
- All staff and trustees have read and understood the OKMT policies and procedures and are familiar with their responsibility within it.
- OKMT policies and procedures are available to view for parents and carers on our website. The contact details for the NSP and Nominated Trustee are provided to all parents and carers.
- OKMT complaints procedure is accessible to all visitors
- All allegations and suspicions of abuse will be taken seriously and responded to swiftly and appropriately
- A risk assessment is completed for all venues used by OKMT and available to those delivering the sessions so that they incorporate it in their health and safety responsibility for their users.
- The child protection policy is reviewed on an annual basis by the NSP and recommendations and amendments approved by the board.

Therapist, Staff and Volunteer Recruitment are required to have the following:

- A DBS Disclosure will be obtained for all therapists, staff, trustees and volunteers
- Employment history checks will be made.
- All therapists/teachers, staff, trustees and volunteers on joining OKMT will receive an induction and training in Trust policy and procedures and how to address the possibility of abuse appropriate to the roles and responsibilities as defined in OKMT's safeguarding policy.
- Those working with any user who may be known to be at risk of abuse or neglect will receive role specific training and regular supervision.

The Role of the Nominated Safeguarding Person (NSP)

The NSP takes the lead responsibility for child protection including support for other staff and information sharing with other agencies, developing policies and staff training. The NSP should be a senior member of staff with the authority and knowledge to carry out the functions of the role. It is their responsibility under this policy to deal with any operational safeguarding issues that arise including lost and found children and young people. It is advisable in addition that a staff member in education takes lead responsibility for safeguarding within SHH education activities including outreach.

The NSP will

- Refer suspected abuse/neglect of children and young people to Richmond SPA (single point of access).
- Report all allegations made against members of staff to the Local Area Designated

Officer (LADO)

- Develop and update child protection and other safeguarding policies ensuring staff are made aware of their responsibilities and families are familiar with how to raise a concern.
- Ensure that confidential records are kept of any concerns about a child or young person and of any conversation or referrals to statutory agencies.
- Provide support and advice to all members of staff within the setting regarding safeguarding concerns.
- Ensure all staff have appropriate child protection and safeguarding training and maintain training records.
- Develop an e-safety policy and clear rules regarding the use of the internet, social media, mobile phones and any other modern technology tools within the workplace. This will include a section regarding photography and the use of images of children.

Responding to a Safeguarding Concern

Concerns about children and young people may arise in different situations:

Responding to a Safeguarding Concern

REPORT

- Staff will report concerns to the Nominated Safeguarding Person or their deputy.
- OKMT will ensure every member of staff is aware of who the NSP/Nominated Trustee is, and how to contact them.

RECORD

- The responsible member of staff will always make a record of any incident or safeguarding issue immediately. The Safeguarding Concern sheet is at the end of this document and also downloadable online by all staff, freelance workers and volunteers.
- OKMT will record information as soon as possible.

REFER

- The NSP will refer all cases where there is a concern about significant harm or risk of harm to the Richmond Single Point of Access (SPA) Urgent concerns must be reported immediately even if the NSP is not available.

For children and young people

Richmond Single Point of Access (SPA) Tel: **020 8547 5008**

(8.00 a.m. to 5.15 p.m. Monday to Thursday and 8.00 a.m. to 5.00 p.m. on Friday)

Out of hours Tel: **020 8770 5000**

Email: spa@richmond.gov.uk

Web: [Richmond Single Point of Access](#)

Hounslow: Contact Children's Services on **020 8583 6600 option 2**

Out of hours (after 5.00 p.m. weekdays or weekends) call **020 8583 2222** and ask to speak to the duty social worker

***ALWAYS PHONE 999 IF THE CHILD or YOUNG PERSON IS IN IMMEDIATE DANGER**

The duty to refer and the role of the local area designated officer (LADO)

- The NSP will report all allegations made against members of staff to the Local Area Designated Officer (LADO)
- Tel: **020 8891 7370 or 07774332675**
- Or email: LADO@achievingforchildren.org.uk
- The online LADO referral form is [Allegations against staff and volunteers \(ASV\) referral form](#)

The Role of the Local Area Designated Officer (LADO)

The LADO is employed by the local authority and should be alerted to all cases in which it is alleged that a person who works with children has:

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

The LADO role applies to paid, unpaid, volunteer, casual and self-employed workers. The LADO is involved from the initial phase of the allegation through to the conclusion of the case. They will provide advice, guidance and help to determine whether the allegation sits within the scope of the procedures.

The LADO helps co-ordinate information-sharing with the right people and will also monitor and track any investigation, with the aim to resolve it as quickly as possible. The LADO will attend local strategy meetings and chair managing allegation strategy meetings. If there are concerns about a staff member or volunteer relating to child protection OKMT is obliged to refer the case to the LADO

What is abuse or neglect?

For the purposes of this policy, and in line with the guidelines produced by the Borough of Richmond-upon-Thames, the organisation considers that abuse and or neglect may occur when someone responsible for a child inflicts harm, or fails to act to prevent harm. This may take place within a family, institution or community setting. It is important to remember that the person who abuses is usually known to the child, but can also be a stranger.

In considering whether to report a concern of abuse or neglect, one should consider the following categories of ill treatment:

- **Physical Abuse**

Any physical harm inflicted upon a child or young person, and can involve hitting, shaking and burning. Note that Munchhausen syndrome by proxy is also considered to be a form of physical abuse. This occurs when the parent or carer fabricates the symptoms of a disease in order to gain medical attention and treatment for a child.

- **Emotional Abuse**

The emotional ill treatment of a child, which may have a negative impact on their emotional development. It can involve conveying to children that they are worthless or unloved.

- **Sexual Abuse**

This involves forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative or non-penetrative acts. It may also involve encouraging children to behave in sexually inappropriate ways.

- **Neglect**

This is the failure to meet a child's basic physical and/or psychological needs and is likely to have a serious negative effect on the child's health and development. This may include, failure to provide food, failure to ensure access to appropriate medical care or treatment or neglect of the child's basic emotional needs

Responding to allegations or suspicions

It is not the responsibility of anyone working for OKMT in a paid or unpaid capacity, to decide whether or not child abuse has taken place. However, there is a responsibility to act on any concerns through contact and referral to the Richmond SPA.

Action

Any concerns should be clearly recorded. It is not the Nominated Safeguarding Officers job to investigate any concern or issue raised with them. It is their role to record the information as they have been told and to refer this to the Richmond SPA. The officer's decision and the process that was taken to reach the decision should be recorded and kept in a securely locked filing cabinet. The board member responsible for child protection and safeguarding should be informed of any referral made.

Confidentiality

Every effort should be made to ensure that confidentiality is maintained for all concerned. Information should be handled and disseminated on a need to know basis only. Information should be stored in a secure place with limited access to designated people, in line with data protection laws. (E.g. that information is accurate, regularly updated, relevant and secure.)

Recording a Disclosure

To ensure that this information is as helpful as possible, a detailed record should always be made at the time of the disclosure/concern, which should include the following:

1. The child's name, age and date of birth.
2. The child's home address and telephone number.
3. Whether or not the person making the report is expressing their own concerns or those of someone else.
4. The nature of the allegation. Include dates, time and special factors and other relevant information.
5. A description of any visible bruising or other injuries. Any indirect signs such as behavioural changes.
6. Details of witnesses to the incidents.
7. The child's account, if it can be given, of what has happened and how any bruising or other injuries occurred.
8. Have the parents been contacted?
9. If so, what has been said?
10. Has anyone else been consulted? If so, record details.

COMPLAINTS AGAINST THE THERAPISTS/TEACHERS

In the event of a complaint against a therapist/teacher, the complainant will be asked to provide a written statement and an investigation into the complaint will be carried out by two independent Trustees. The outcome of the investigation will be undertaken in accordance with the Otakar Kraus Music Trust's complaints procedures guidelines as outlined by the BAMT and HCPC

RECORD KEEPING

Client records are maintained by the General Manager and Administrator in a secure environment.

In addition, the Therapists/Teachers maintain their own records with regard to the progress of their clients. These reports are solely for the parent/guardian/school etc.

Safer Recruitment

Recruitment and Selection

These Safeguarding Policies and Procedures apply to all office holders, therapists/teachers and volunteers working with children/young persons at risk in the activities of the Charity, and include recruitment and selection policies and procedures, including the Disclosure and Barring Service ('DBS') Disclosures Policy and Procedures Document.

Practical steps when appointing Office Holders and Volunteers

It is not easy to identify those who are likely to abuse adults at risk. Any procedure that helps to clarify details of a person's background and experience can help with identification and can raise awareness levels in the Charity generally. The same should be applied regardless of the level of responsibility or the duration of appointment of a role involving contact with

children/young persons at risk. Careful checks should be made on all persons being recruited or otherwise engaged in the Charity's activities, including verifying identity and taking up independent references – even in relation to applicants who are well known to the Charity for many years. This approach ensures fairness and consistency and avoids potential breaches of the *Disclosure and Barring Service Code of Practice*.

All persons working with children/young persons at risk will be selected in accordance with the *Disclosure and Barring Service's Policies and Procedures*.

Appointments will be made on the basis of a person's experience and ability to perform the role rather than on the urgency of the need or the availability of the applicant.

It is essential to treat all documentation relating to these application processes in strictest confidence.

Responsibilities for Volunteers and Employees

The Charity will ensure that those working with vulnerable people in its activities will be made aware of their duty to become familiar with these Safeguarding Policies and Procedures, and in particular:

- a. The duty to promote safe practice, minimise all risks of abuse and maximise the response to reports of concern;
- b. Include clear and detailed content that reflects the specific nature of the role or the specific aspect of the role that justifies the requirement for a DBS Disclosure (where appropriate at basic or enhanced levels – see the DBS website).

Relevant employees/volunteers should sign a document to indicate that they agree to adhere to these policies and procedures. This should be retained by the Trust. Any contact that an individual has with a vulnerable person in a particular role must be within the confines of that role and responsibility.

Anti-Bullying

We are committed to providing a caring, friendly and safe environment for all children and young people with whom we deal so they can develop in a relaxed and secure atmosphere. Bullying of any kind is unacceptable in our activities. If bullying does occur, all children and young people should be able to tell and be confident that incidents will be dealt with promptly and effectively. This means that anyone who knows that bullying is happening is expected to tell the therapist/teacher.

What is Bullying?

Bullying is the use of aggression with the intention of hurting another person. Bullying results in pain and distress to the victim.

Why is it Important to Respond to Bullying?

Bullying hurts. No one deserves to be a victim of bullying. Everybody has the right to be treated with respect. Children and young people need to learn different ways of behaving.

We have a responsibility to respond promptly and effectively to issues of bullying.

Signs and Symptoms

A child may indicate by signs or behaviour that he or she is being bullied. Adults should be aware of these possible signs and that they should consider the possibility that the child or young person may be bullied. Further information can be obtained from Kidscape.

Procedures

1. Report bullying to staff or organisers as appropriate;
2. In cases of serious or persistent bullying, the incidents will be recorded by staff or organisers;
3. If it is thought that an offence has been committed, contact the police;
4. The bullying behaviour or threats of bullying must be investigated and all bullying stopped quickly;

Good Relationships – Code of Conduct

Principle

Children and young persons should always be treated with respect and consideration. Those working with the young and the vulnerable should portray at all times a positive role model by maintaining an attitude of respect, loyalty, courtesy, tact and maturity

All OKMT Staff, Trustees and Volunteers

Must:

- Treat children and young persons with respect, valuing each individual and avoiding negative discrimination
- Be aware of possible risks and question situations that appear to be suspicious
- Be aware of appearances and avoid any situations which might appear compromising
- Encourage open communication
- Report any allegation (even if this is just a suspicion) of abuse or inappropriate conduct immediately to the nominated safeguarding person.

Must Not:

- Engage in any rough or tumble or other horseplay
- Physically restrain a child or young person except in exceptional circumstances where either the client or a member of staff is at risk of harm.
- Allow or engage in any inappropriate touching
- Give out personal information, or share e-mail, social network site details (e.g. Facebook) and mobile numbers with any child or young person

- Take photographs of children or young people on your mobile phone without the written permission of the parent or responsible person

Physical Contact - Respectful Touching

Appropriate affection between adults and children is important for development, in the case of children, as well as being a positive part of the Charity's therapies.

Touching is an essential part of life and necessary for:

- Basic care
- Showing love and reassurance
- Praise and communication

It should be safe, appropriate and not overdone. It should be remembered that touch can be perceived as a sign of warmth and friendliness or as a sign of dominance.

Touch should always be related to the recipient in terms of:

- Their needs at the time
- Limited duration
- Appropriateness given age, stage of development, gender, disability and culture

All people have the right to decide how much or how little physical contact they have with others. Except in exceptional circumstances, such as when they are in need of immediate medical attention, their wishes should always be ascertained and respected.

Good practice guidance:

- It may be appropriate to hold and comfort a distressed child but be aware how this contact may be interpreted by the child;
- Everything should be in public. A hug or a touch in a group or openly, visible to others is very different from that done behind closed doors or in an unobservable place;
- Physical contact is an essential element of some therapies (sports, music, dance etc.). All those involved in such therapies should practice safe touch, asking permission, explaining and defining the reason for the physical contact.
- When ground rules for activities or events are being discussed, those supervising activities should introduce the idea of safe touch;
- Providing care for those with additional needs or disabilities may require levels of physical contact. In some circumstances consultation with the individual, their parents, carers etc. is essential to fully understand the requirements and abilities of the person being cared for;
- Children and young persons with additional needs, may require higher levels of personal support in such areas as washing, dressing, toileting, feeding and mobility. A

parent/carer will always be on the premises and therapists/teachers will never provide personal care.

As far as possible support the person in their own care. Always avoid doing things for them if they are able to do it alone or for themselves. If they are able to help, this should be encouraged. Where the person is dependent upon your help, try and offer choices;

- In a group, team members, as part of good practice, should monitor one another in relation to physical contact. They should be able to help each other by pointing out anything that could be misunderstood or uncomfortable for a child or young person at risk
- If an adult engages in inappropriate touch with a child or young person at risk, this must be challenged. If there are any concerns about an adult's contact then this must be reported to the Safeguarding Representative for advice.

NB: Any activity that is, or may be thought to be, sexually inappropriate must be avoided at all times. Care should also be taken to only touch on "safe" parts of the body.

Dos & Don'ts

You must:

- Treat all children and young people at risk equally and with respect;
- Engage and interact appropriately with children and young people at risk;
- Respect a child or young person at risk's right to personal privacy;
- Challenge unacceptable behaviour and provide an example of good conduct you wish others to follow - an environment which allows bullying, inappropriate shouting or any form of discrimination is unacceptable;
- Recognise that particular care is required in moments when you are discussing sensitive issues with children and young people at risk e.g. maintain appropriate boundaries;
- Avoid situations that compromise your relationship with children and young persons at risk, and are unacceptable within a relationship of trust. This rule should apply to all such behaviours including those which would not constitute an illegal act.

You must not:

- Discuss topics or use vocabulary with children and young persons at risk which could not be used comfortably in the presence of parents or another adult;
- Take a chance when common sense suggests another more prudent approach;
- Physically, emotionally or sexually abuse, maltreat or exploit any child or young person at risk.

Safe Places

Brief Scope

The Charity has a responsibility to ensure that its activities take place in as safe and secure an environment as is possible. All risks cannot be removed, and users should be expected to behave responsibly, according to age and ability.

Risk Assessments are an integral part of creating 'Safe Places.' A written risk assessment should be carried out on every environment that is to be used for any purpose. For guidance on carrying out a successful risk assessment please see the [Health and Safety Regulation.....a short guide \(Health and Safety Executive\)](#).

Good Practice

Creating a 'Safe Place' is always unique to a particular environment; however the following procedures are examples of good practice.

- Any meeting with children/young persons at risk should take place in an area which is either visually accessible or is frequented by other people.
- Activities should only take place in premises which are suitable for those activities;
- Firefighting equipment should be in plain sight, readily accessible and clearly labelled;
- Areas must be kept tidy.
- A first aid kit fully stocked for use in public places must be available, and its whereabouts must be clearly labelled;
- Emergency exits should be clearly marked

Health and Safety

The named person responsible for the activity/event must ensure that:

1. The premises are appropriate for the event;
2. A written risk assessment is undertaken;
3. Fire evacuation procedures are explained at the start of the event. Appropriate signage should be in place. Consider having a walk through the escape route with those present;
4. Ensure all children/young persons at risk or their carer are aware of who to contact in an emergency
5. In the event of an accident or incident, ensure that an incident report form is completed within 24 hours by the relevant person(s).

Capacity and Consent

This section is intended to outline some important principles and frameworks which will guide leaders of Charity activities.

1. Capacity & Consent - Children

The definition of a child, for legal purposes is anyone who has yet to reach their 18th birthday. This is embodied within the Children Act 1989 and Children Act 2004.

For every child using OKMT services, where a parent or carer may not be present, the person with parental responsibility for the child should complete and sign a parental consent letter to enable their child to take part.

2. Capacity & Consent - Young People

Whilst legally anyone not having yet reached their 18th birthday is technically a child, young people develop levels of autonomy and capacity to make a wider range of decisions about their own actions as they progress through their teenage years.

Principles about consent and capacity remain (see Children). Those supervising should also recognise young people's rights and capacity to make their own decisions. E.g.:

- It would always be good practice to check that the young person themselves consented to take part in a planned activity, whether or not parents had completed a consent form;
- For more routine activities (e.g. attendance at a youth group) a signed parental consent form might be waived if the young person wishes to attend and verbal consent is given by a parent or carer;
- For some young people e.g. those with a significant learning disability the Mental Capacity Act may apply from 16-18 years.

Those responsible for supervising activities must be mindful of other aspects of a young person's ability and capacity to participate which might include, depending on the event or activity, any drug or substance issues, sexual behaviour, risk taking behaviour and so on.

The purpose of the considerations is to enable the young person to play as full and active a part as possible in any activity or event in a way that affords them the highest level of care, love, encouragement and respect.

IT/Communication Technology/Photography

Principle

The internet, mobile phones, social networking and other interactive services have transformed the way in which we live. The new technologies offer tremendous opportunities to reach, communicate, and engage with those involved in the Charity's activities or may benefit from, or be interested in them.

Photography

It is often common practice to take and display photographs of children and young people on noticeboards, websites and in Charity newsletters and newspapers.

We know that the overwhelming majority of images taken are entirely appropriate and are taken in good faith. There are also opportunities however to distort the original intention behind taking such photographs. It is important for this reason to consider potential risks such as:

- The inappropriate use, adaptation or copying of images for use on child abuse website on the internet;
- The identification of children when a photograph is accompanied by significant personal information that will assist a third party in identifying the child. This can lead, and has led, to children being 'groomed.'

In addition under the Data Protection Act 1998 photographs constitute 'personal data' and where it is possible to infer a person's religious beliefs, ethnicity or medical conditions from that photograph, constitute 'sensitive personal data.'

In view of that the following guidelines should be followed.

DON'T

- Publish or display photographs with the full name of a person or person's featured unless written consent to do so has been given and parents have been informed as to how the image will be used
- Use an image for something other than which permission was given

Using Texts and Emails with Children & Young People

Texting should not be used as a method of communication between adults involved in Charity activities and children or young people.

DON'T IN ANY CIRCUMSTANCES

- Use texts or emails for personal conversation, sending pictures or jokes or other items of a personal nature;
- Respond to emails from young people other than those directly related to Charity-related activity. Advise the Trustees if any inappropriate texts or emails has been received

Reporting and Monitoring

- Children and young people should be advised to always tell an adult they trust about communications that make them feel uncomfortable or where they have been asked to keep communication secret;
- Any discovery of inappropriate use (of a safeguarding nature) of social networking sites, computers, email or texting should be reported to the NSP and Trustees;
- Charity personnel must report unofficial sites that carry the Charity logo to the Trustees. It is important that the Charity is able to protect its identity and prevent unwanted publications. Any misinformation found on a site, such as Wikipedia, should also be reported to the Trustees.

Accidents and Emergencies

Missing Children or Young People

When there is a concern that a child or young person may be missing, the therapist/teacher must arrange an initial search to establish if the child is in the vicinity - this should only be conducted if it is safe to do so and be dependent upon the circumstances.

If an initial search is not the appropriate action or the concern remains, the therapist/teacher must:

- Ensure the wellbeing of any remaining children; make sure that all are accounted for and properly/adequately supervised;
- Be mindful of the circumstances - the time of year; location; weather conditions; time of day (dusk etc.); age and vulnerability of the child. It is important to take prompt action and avoid panic;
- Contact the Police without delay;
- The responsibility for conducting enquiries and a proper search, rests with the Police - they have the experience, knowledge and resources. Their involvement should be considered at the earliest opportunity as the first hour can be vitally important and a rapid response essential.
- When the Police are contacted ensure that the parent/carers contact details are readily available as it is their responsibility to make contact with the parent/carer. Be prepared to assist with information that will help with the enquiries:
 - Name, age, description of the child/children;
 - When and where last seen and by whom?
 - Any known reason for their absence? Is the absence out of character?
 - Any known places to be searched, people to be contacted?
 - Any known medical conditions or medication required?
- Further assistance should only be offered to the Police after any remaining children's welfare has been secured.

Accident and Illness

In order to respond to accident or illness the therapist/teacher must ensure:

- Prompt assessment of the illness/injury and appropriate action is taken. First Aid should be given, by qualified personnel if available;
- Relevant staff at the venue should be informed as soon as possible;
- Parents/carers must be contacted as soon as possible following the incident unless the circumstances require the intervention of the Police.

Major Incidents

Procedures for Major Incidents:

- The designated leader's responsibilities are primarily to supervise and manage the children and young people. If safe to do so move the children and young persons from the scene to a place of safety
- As soon as it is safe to do so, contact the appropriate emergency service i.e. Police, Fire or Ambulance by calling 999. Follow the directions of any emergency service personnel
- Be prepared to give as much detail as possible of the location; nature of the incident; an estimate of the number of casualties (if known); any potential hazards. Be prepared to remain on the phone – it will be a useful link until the emergency service crews arrive
- Ensure emergency first aid treatment is given by qualified personnel present
- Take a roll call of all children/young people and those present at the time of the incident. Try to locate them only if it is safe to do so. If not, inform the emergency services, when they arrive, of how many people are missing, their descriptions and likely location
- Depending on the nature and scale of the incident the Police may set up a Casualty Bureau to handle information on casualties and to filter/manage calls from concerned relatives and friends. Be ready to provide any necessary details to the Casualty Bureau
- It is the responsibility of the Police to inform the parents/carers of any victims. Initially, they will not contact parents /carers of those uninjured or safe. If it is safe to do so and there is access to a telephone, contact parents via the system of liaison between the event and the parents established in the planning of the event. It will be important to take the advice of the emergency services regarding arrangements for collection. Parents may not be able to get to the scene
- If it is safe and practicable to do so the therapist/teacher or another leader should make efforts to monitor the location of children and young people if they are moved from the scene
- Notify the NSP and Trustees.

Fire Safety

Procedures for fire safety:

- All staff must be familiar with the fire regulations and fire-fighting equipment for the venue;
- Staff will ensure that all children/young people know where the appropriate fire exits, alarms and assembly points are and are given instructions on what to do if the alarm sounds;
- All staff must know the whereabouts of the nearest telephone;
- Children/young people must not use fire-fighting equipment;

- In the event of a fire alarm being raised, evacuate the building(s), move to the appropriate assembly points and take a roll call of those present;
- Contact the Fire Brigade or activate any automatic fire alarms if available. Be prepared to give details of the location; the nature of the incident; number of buildings/people involved and any potential hazards;
- Consider undertaking regular fire drills to ensure that staff and children become familiar with the procedures, the location of the assembly points and any action to be taken.

Appendix

Safeguarding Policy during online Music Therapy or Lessons

- **Therapists should ideally set up a separate account for online sessions.** Keep it separate from any personal online profiles. Make sure to only use an appropriate image for a profile picture, and do not share any personal information e.g. personal telephone number, email accounts, Facebook and other social media links.
- **Agreement in writing** is required from client, parents or carers for music therapy or lessons online.
- **Parents/Carers must receive of copy of the online music session guidance** and confirm in writing they have read it.
- **It is essential that a parent or carer is present if therapist/teacher is working remotely with a child.** When staff are communicating with parents/carers about setting up Zoom or other platforms, please request that it is important that a parent is present during the Online Music sessions. This is a safeguarding requirement and with the support of the parent present, this will also help aid the session.
- **Client safety must be maintained** as part of online and phone sessions. Therapists running online or phone sessions must take steps to ensure a professional background is presented: a quiet, neutral space with no disturbances while sessions are taking place. No people or pets should be in the background. In addition, for online sessions, there should be no personal pictures or other objects in the background that would give a “home-like” feel.
- **Be business-like when giving lessons:** always present one-self as professionally as when giving a face-to-face lesson, in dress and in manner: remember that while social media applications can encourage informality, one needs to observe the usual high professional standards at all times.
- **Set standards for the pupils and their parents or carers:** pupils, parents or carers and any household members who may come into view on screen are expected to dress and behave appropriately. If there is inappropriate attire, it should be explained that the session is going to be terminated and give the reason for doing so. The lesson can resume when the pupil is suitably attired. Also explain that a session will be suspended if any of the provisions of the policy is not complied with.
- **Also state that pupils should not send any material** during the sessions. Only parents of the children being taught are permitted to send anything, and it must strictly be related or connected to the provision of music sessions.

- **Test the set-up before going live:** are the camera and microphone working properly? Is the camera in the correct position for optimum teaching? Make sure there is a neutral background.
- **Always be mindful of GDPR compliance.** The Link to our policy is here:

<https://www.okmtrust.org.uk/privacy-policy/>

If during an online Music therapy session, there is a safeguarding concern observed by the therapist/teacher, then the Nominated Safeguarding Person will be notified and normal safeguarding procedures will apply. See pages 1-5 of this policy.

Further advice on using Zoom

In response to recent reports, both anecdotally and in the media, of users experiencing compromised settings when using Zoom, we would recommend ensuring the Advanced Settings are set to the following options for all remote sessions:

1. Make sure the meeting is password protected.
2. Avoid sharing the meeting ID where possible.
3. Set the screen sharing option to “host only” before the meeting begins.
4. Always enable a waiting room in case the client arrives early for their session.

Recording lessons

What are the safeguarding implications of using Skype, Zoom and other software to record sessions?

This is a sensitive area and we advise caution. Always discuss this with the pupils or parents. If in any doubt as to the intentions of the pupils or the parents/ guardians of the pupils, do not record sessions.

Never record a session without the knowledge and written consent of the pupil, or the pupil’s parents/guardians. If the sessions are to be recorded:

- Ask for consent in writing before making any recording.

Have a written policy available to the clients which says:

- What will happen with the recordings
- how long they will be kept and why
- guarantee it will only be shared with the pupil (if an adult) or the parents/guardians unless permission is given to use them in any other way
- how the disposal of the recordings will be handled at the end of the retention period
- that deletion and disposal of the recordings will be securely and quickly handled if the pupils or their parents withdraw consent.
- parents should not make recordings of the sessions, without the therapist’s agreement

POLICY UPDATED MARCH 2024 to be reviewed annually

SAFEGUARDING CONCERN SHEET

Name of Child/Vulnerable Adult: DOB: Address: Tel No:	Date:
Name of person reporting the concern:	
Please explain the reason you are concerned. Include dates, time, special factors, a description of any injuries or indirect signs such as behavioural changes. Details of any witnesses. Has parent/carer been contacted?	

Signed by person reporting concern _____

Action taken

Signed by Nominated Safeguarding Person/Nominated Trustee _____