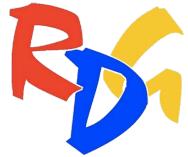


## **Child Protection Policy & Procedures: Safeguarding Children**

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## **Policy Statement**

RDG fully recognises its responsibilities to safeguard and promote the welfare of children within the legal framework of the Children Act 1989 and 2004. This policy applies to Youth Drama Leaders, RDG members, stage crew, photographers, chaperones and volunteers working with children in our productions.

According to the Children's Act 1989 a child is defined as anyone under 18 years of age, hereafter referred to as young people. RDG believes that a young person should never experience abuse of any kind. We have a responsibility to promote the welfare of all young people and to keep them safe. We are committed to practice in a way that protects them.

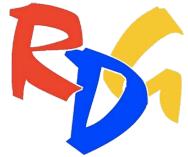
### **The purpose of this policy**

- To protect young people who take part in productions with RGD, RDG Youth and Sundowners. This also includes the children of the adults who take part in productions.
- To provide the people who have contact with these young people a set of overarching principles that guide our approach to child protection and safeguarding.
- All organisations need to identify one person to be responsible for dealing with allegations or suspicions of abuse. The Safeguarding Officer is the informed point of contact to advise and manage child protection issues. It is the role of the Safeguarding Officer to inform Children's Social Services (CSS) of any issues of safeguarding which they are alerted to within the group. It is then the responsibility of the CSS to decide if the child has been abused or not.

Designated Safeguarding Officer for RDG:

Nancy Lund  
Email: [nibrown66@yahoo.co.uk](mailto:nibrown66@yahoo.co.uk)  
Mobile: 07846 129672

Nancy Lund is also responsible for DBS checks and arranging chaperone training.



## Legal framework

This policy has been drawn up on the basis of law and guidance that seeks to protect children, namely:

- Children's Act (1989)
- United Convention of the Rights of the Child (1991)
- Data Protection Act (2018)
- Sexual Offences Act (2003)
- Children's Act (2004)
- Protection of Freedoms Act (2012)
- Working Together to Safeguard Children, Department of Health (2023)

We recognise that:

- RDG members should bear in mind that abuse or neglect includes not only inflicting harm, but also knowingly not preventing harm (Working Together to Safeguard Children, DoH 2018).
- The welfare of the child is paramount, as enshrined in the Children Act 1989.
- All young people, regardless of age, disability, gender, racial heritage, religious belief, sexual orientation or identity, have a right to equal protection from all types of harm or abuse.
- Some young people are additionally vulnerable because of the impact of previous experiences, their level of dependency, communication needs or other issues.
- Working in partnership with young people, their parents, carers and other agencies is essential in promoting young people's welfare.

We will seek to keep young people safe by:

- Valuing them, listening to and respecting them.
- Adopting child protection practices through procedures and a code of conduct for members of RDG who have contact with young people during rehearsals and productions.
- Recruiting volunteers safely, ensuring all necessary checks are made.
- Sharing information about child protection and good practice with young people, parents and volunteers.
- Sharing concerns with agencies who need to know, and involving parents and young people appropriately.
- RDG members will not establish or seek inappropriate written or electronic communication with the young people. This includes personal mobile phone texts, chat rooms, social media networking sites (Facebook, Tic Tac, X etc) email photographs etc.
- Members of RDG should not arrange to meet a young person outside of the rehearsal production times, without the prior knowledge and agreement of the young person's parents or carers.
- RDG will carry out regular checks on equipment used by the children and volunteers within the organisation.
- RDG youth leaders will gain consent to activities from parents and children and young people as appropriate.
- RDG youth leaders will ensure that all young people and their carers complete the registration form which asks for details about the child or young person's needs (such as medical, dietary, allergies, care and support needs).
- RDG youth leaders will keep details of information that might be needed in an emergency in an accessible but secure place.



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- RDG have an accident book to record any incidents or near misses.
  - RDG will put in place and clearly display adequate insurance arrangements.
  - RDG will explain to children, young people and families/carers that any records are kept securely and will be disposed of appropriately within certain time frames and that families can have access to their records.
  - RDG will store hard copies of personal records and portable electronic equipment securely.
  - RDG will protect their records by security measures like usernames, passwords and encryption.



## **Categories of Abuse**

Abuse and neglect are forms of maltreatment of a young person. Somebody may abuse or neglect a young person by inflicting harm, or by failing to act to prevent harm. Young people may be abused in a family or in an institutional or community setting, by those known to them or, more rarely, by a stranger. They may be abused by an adult or adults, or another young person. RDG members and volunteers should be aware that the main categories of abuse are:

- Physical abuse
- Emotional abuse
- Sexual abuse
- Child sexual exploitation
- Neglect

### **Physical abuse**

- May involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a young person.
- Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a young person.

### **Emotional abuse**

- Persistent emotional maltreatment of a young person, such as to cause severe effects on their emotional development.
- May involve conveying to the young person they are worthless, unloved, inadequate, or valued only in so far as they meet the needs of another person.
- It may include not giving the young person 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 imposed on the young persons' developmental capability.
- Over protection, limitation of expectation and learning or preventing the young person participating in normal social interaction.
- The exploitation or corruption of young people.
- Seeing or hearing the ill-treatment of another; domestic abuse.
- Serious bullying (including cyber-bullying).
- Causing young people to frequently feel frightened /in danger, or exploitation and corruption of young people.

### **Sexual abuse**

- Involves forcing or enticing a young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the young person is aware of what is happening.
- Activities may involve physical contact, including assault by penetration (e.g. rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing.
- Sexual abuse is not solely perpetrated by adult males; women can commit acts of sexual abuse, as can another young person.



## **Child Sexual Exploitation**

Child Sexual Exploitation (CSE) 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. CSE does not always involve physical contact; it can also occur through the use of technology.

It may involve physical contact, including assault by penetration (for example, rape or oral sex) or nonpenetrative acts such as masturbation, kissing, rubbing and touching outside clothing. Child sexual exploitation is never the victim's fault, even if there is some form of exchange.

Children aged 12–15 years of age are most at risk of child sexual exploitation although victims as young as 8 have been identified, particularly in relation to online concerns. Though child sexual exploitation may be most frequently observed amongst young females, boys are also at risk and all ethnic groups are affected.

### **Child Sexual Exploitation may include the following:**

- Involving children in the production of sexual images.
- Forcing children to look at sexual images or watch sexual activities.
- Encouraging children to behave in sexually inappropriate ways or grooming a child in preparation for abuse (including via the internet).
- Can still be abuse even if the sexual activity appears consensual.
- Can include both contact (penetrative and non-penetrative acts) and non-contact sexual activity.
- Can take place in person or via technology or a combination of both.
- Can involve force and/or enticement-based methods of compliance and may, or may not, be accompanied by violence or threats of violence.
- May occur without the child or young person's immediate knowledge (through others copying videos or images they have created and posting on social media, for example).
- Can be perpetrated by individuals or groups, males or females, and children or adults.
- The abuse can be a one-off occurrence or a series of incidents over time, and range from opportunistic to complex organised abuse.
- Is typified by some form of power imbalance in favour of those perpetrating the abuse.
- Can affect any child or young person (male or female) under the age of 18 years, including 16 and 17 year olds who can legally consent to have sex.

## **Neglect**

- A persistent failure to meet a young person's basic physical and/or psychological needs, likely to result in the serious impairment of the young person's health or development.
- Neglect can occur during pregnancy and as a result of maternal substance abuse.
- Once the child is born, failure to:
  - Provide adequate food, clothing, shelter (including exclusion from home or abandonment).
  - Protect a young person from physical and emotional harm or danger.
  - Ensure adequate supervision (incl. the use of inadequate care-givers).
  - Access to appropriate medical care or treatment.
  - It may also include neglect of, or unresponsiveness to, a young person's basic emotional needs.



## **How to Recognise the Signs of Abuse**

It can often be difficult to recognise abuse. However, it is important to know what could indicate that abuse is taking or has taken place, and to be alert to the need to consult further.

All RDG members should be concerned about a child if they present with indicators of possible significant harm.

Abuse can take place within a family, in an institution or community setting, by telephone or on the internet. Generally, in an abusive relationship the young person may:

- Appear frightened of the parent/s or other household members e.g. siblings or others outside the home.
- Act in a way that is inappropriate to their age and developmental stage. \*
- Display insufficient sense of 'boundaries', lack stranger awareness.
- Appear wary of adults and display 'frozen watchfulness'.

\*Full account needs to be taken of different patterns of development, various medical and neurodevelopmental disorders (such as ADHD, autism spectrum disorders) and other stressful situations that are not part of young person's maltreatment (e.g. bereavement or parental separation).

### **Possible signs of physical abuse:**

- Unexplained injuries or burns, particularly if they are recurrent, untypical of accidental injury (e.g. finger mark bruises, bites, small round burns).
- Bruising in and around the mouth, back, buttock or rectal area.
- Fractures to arms, legs or ribs of a small child.
- Large number of bruises or scars in various stages of healing.
- Frequent injuries even with apparently reasonable explanations.
- Parent/ young person gives improbable/conflicting explanations for injuries / refusal to discuss.
- Admission of punishment which appears excessive.
- Fear of parents being contacted.
- Puncture marks, swollen areas, bald patches/missing hair.
- Withdrawal from physical contact.
- Arms and legs kept covered in hot weather.
- Fear of returning home; chronic running away.
- Fear of medical help / parents not seeking medical help/ inappropriate treatment.
- Self-destructive tendencies.
- Young person withdrawn, shy, passive, compliant, nervous or aggressive, disruptive, destructive.
- Frequently absent from school.

### **Possible signs of emotional abuse:**

- Admission of punishment which appears excessive.
- Excessively clingy or attention-needing behaviour, too eager to please.
- Lack of boundaries with strangers.



- Over-reaction to mistakes, low self-esteem, excessive/continual self-criticism, depression, withdrawn behaviour, fearfulness.
- Sudden speech disorders.
- Fear of new situations.
- Inappropriate emotional responses to painful situations.
- Neurotic behaviour (e.g. rocking, hair twisting, thumb sucking).
- Self-mutilation.
- Fear of parents being contacted.
- Extremes of passivity or aggression or distress (e.g. inconsolable crying, rages, temper tantrums).
- Drug/solvent abuse.
- Chronic running away.
- Compulsive stealing.
- Scavenging for food or clothes.
- Air of detachment – ‘don’t care’ attitude – high criticism, low warmth.
- Social isolation – does not join in and has few friends.
- Eating problems, including over-eating or lack of appetite.

**Possible signs of sexual abuse:**

- Disclosure.
- Demonstrating sexual knowledge or behaviour inappropriate to age/stage of development, or that is unusually explicit.
- Wetting, or other regressive behaviours e.g. thumb sucking.
- Inexplicable changes in behaviour, such as becoming aggressive or withdrawn.
- Stopped enjoying previously liked activities.
- Being reluctant to undress for PE.
- Becoming fearful of, or refuse to see certain adults for no apparent reason; show dislike of a particular baby-sitter, relative or other adult.
- Drawing sexually explicit pictures.
- Sexualised behaviour/ play/ language.
- Urinary infections, bleeding or soreness in the genital or anal areas.
- Soreness or bleeding in the throat.
- Chronic ailments, such as stomach pains or headaches.
- Taking over the parental role at home; seeming old beyond their years.
- Developing eating disorders, such as anorexia or bulimia; obsessive behaviours.
- Depression, suicidal thoughts.
- Poor self-image, self-harm, self-hatred.
- Physical discomfort.
- Use of drugs or drink to excess.
- Unexplained pregnancy.
- Memory loss.
- Frequently running away.
- Restricted social activities.
- Finding excuses not to go home or to a particular place.
- Having recurring nightmares/be afraid of the dark.
- Being unable to concentrate; seem to be in a world of their own.
- Having a ‘friend who has a problem’ and then tell about the abuse of the friend.
- Sudden changes in school work habits, become truant.



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- Withdrawal, isolation or excessive worrying.
  - Outbursts of anger or irritability.
  - Unexplained sums of money.

**Possible signs of CSE:**

- Acquisition of money, clothes, mobile phones etc without plausible explanation.
- Gang-association and/or isolation from peers/social networks.
- Exclusion or unexplained absences from school, college or work.
- Leaving home/care without explanation and persistently going missing or returning late.
- Excessive receipt of texts/phone calls.
- Returning home under the influence of drugs/alcohol.
- Inappropriate sexualised behaviour for age/sexually transmitted infections
- Evidence of/suspicions of physical or sexual assault.
- Relationships with controlling or significantly older individuals or groups.
- Multiple callers (unknown adults or peers).
- Frequenting areas known for sex work.
- Concerning use of internet or other social media.
- Increasing secretiveness around behaviours.
- Self-harm or significant changes in emotional well-being.

**Possible signs of neglect:**

- Inadequate supervision.
- Exposure to poisonous substances, drugs.
- Constant hunger, stealing food.
- Poor personal hygiene; inappropriate clothing, clothing in a poor state of repair.
- Frequent lateness or non-attendance at school.
- Untreated medical problems, failure to seek medical advice.
- Inadequate nutrition, leading to ill-health; emaciation.
- Low self-esteem.
- Poor social relationships.
- Compulsive stealing.
- Constant tiredness.
- Destructive tendencies.
- Neurotic behaviour (e.g. rocking, hair twisting, thumb sucking).
- Chronic running away.
- Scavenging for food or clothes.



## **How to Respond to Signs and Suspicions**

Any RDG members with safeguarding concerns should share these as soon as possible with the Safeguarding Officer.

Records should be made of these concerns and any decisions to share these, stating who they were shared with, when and why.

### **How to respond to allegations of abuse against a member or volunteer of RDG**

All allegations against RDG members or volunteers should be dealt with quickly and consistently, in a way that provides effective protection for the young person and at the same time supports the person who is the subject of the allegation.

Whenever it is alleged that a member of RDG or volunteer has:

- Behaved in a way that has harmed, or may have harmed a young person.
- Possibly committed a criminal offence against, or related to, a young person.
- Behaved towards a young person/s in a way which indicates s/he is unsuitable to work with young people.
- The RDG member receiving the allegation must take it seriously and immediately inform the Safeguarding Officer.

### **How to respond to allegations against another child**

- Listen to what children and young people have to say and respond calmly and non-judgementally.
- Talk to your nominated child protection lead if you're unsure or have any concerns.
- Talk to parents and carers about developmentally typical sexualised behaviours and explain how they can have discussions about appropriate sexual behaviour with their children.
- Let children and young people know they can always talk to you if they are ever worried about anything.
- Remind children and young people they can contact Childline if they need confidential help and advice. Calls to 0800 1111 are free and children can also contact Childline online or get information and advice on the Childline website.

### **Local Authority Designated Officer (LADO)**

The LADO works within Children Social Care and is the person responsible for conducting investigations against RDG members and its volunteers. The LADO can provide advice and guidance and determines if the allegation will be investigated. The LADO will coordinate information-sharing.

- Local Authority Designated Officer (concerns about colleagues/staff)
- Tel: 01372 833321
- Contact Centre Children's Team (concerns about children)
- Tel: 0300 200 1006
- Secure e-mail address: [masm.dutydesk@surreycc.gcsx.gov.uk](mailto:masm.dutydesk@surreycc.gcsx.gov.uk)



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- Early Years and Childcare Service's named person for allegations against adults working with children and young people: 01372 833895

### **Recording an incident**

- In all situations, including those in which the cause of concern arises from a disclosure made in confidence, the details of an allegation or reported incident must be recorded in writing, regardless of whether or not the concerns have been shared with a statutory child protection agency. (Please refer to Appendix 2 for Disclosure form).
- An accurate note should be made on the Disclosure form (Appendix 2) of the date and time of the incident and disclosure, the parties involved, what was said or done and by whom, any action taken to investigate the matter, any further action taken e.g. suspension of an individual, where relevant the reasons why the matter was not referred to a statutory agency, and the name of the person reporting and to whom it was reported.
- The record should be stored securely by the RDG Secretary and shared only with those who need to know about the incident or allegation.

### **How to respond to a young person telling you about abuse**

If a young person discloses that they have been abused in some way, the member of RDG/volunteer should:

- React calmly so as not to frighten the young person.
- Be aware of your non-verbal messages.
- Keep responses short, simple, slow and gentle.
- Don't stop a young person or parent who is talking freely about what happened.
- Observe and listen but don't ask for more information.
- If you have difficulty in understanding the young person or parent's communication method, reassure them that you will find someone who can help.
- Tell them they are not to blame.
- Tell the young person or parent that they have done the right thing by telling you.
- Never promise a young person that what they told you can be kept a secret.
- Explain that you have a responsibility for their safety and therefore have to tell someone in authority.
- Let them know there are others who can help them and they are not alone.
- Avoid making comments or judgements about what is shared.
- Tell the young person or parent about what will happen next.
- Make brief notes as soon as possible after the conversation/incident.
- Record statements and observations rather than interpretations or assumptions using the Disclosure Form (Appendix 2).
- Use clear, straightforward language, be concise, be accurate not only in fact, but in differentiating between opinion and judgement.
- Do not destroy the original notes in case they are needed by a court.
- For incidents: record a factual account of what happened, what was seen and heard.
- For disclosures: record any noticeable non-verbal behaviour and the words used by the young person.



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- Record who else is present when the disclosure/incident occurs (e.g. witnesses).
  - Show actions taken (by who, when and why) and any future plans e.g. monitor and review.
  - Indicate on the diagrams (Appendix 3) indicating the position of any bruising or other injury.
  - Sign and print your name on the written record.
  - All records need to be given to the Safeguarding Officer promptly. No copies should be retained by the RDG member or volunteer.

## Rights & Confidentiality

- If a complaint is made against any individual he or she should be made aware of his/her rights.
- No matter how you may feel about the accusation, both the alleged abuser and the child 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.

## Whistle Blowing

If you are worried that RDG is not responding to or sharing child protection information appropriately, it's vital that you share your concerns to keep children safe. Legislation across the UK ensures that you shouldn't be treated unfairly because you 'blow the whistle' (Gov.uk, 2021). In England, Scotland and Wales, whistleblowers are protected by law under the Public Interest Disclosure Act (1998).

If you're worried about a child, even if you're unsure, contact the whistle blowing helpline to speak to one of our counsellors. Call them on 0808 800 5000, email [help@nspcc.org.uk](mailto:help@nspcc.org.uk) or fill in the online form.

## Making a Referral

- RDG's Designated Safeguarding Officer (DSO) is responsible for making referrals to the local child protection services for the local authority in which the child lives. The DSO may then contact the police who will assess the situation and take appropriate action to protect the child.
- If the allegations involve the Safeguarding Officer, the RDG secretary will make a referral. In the absence of the Safeguarding Officer and the RDG secretary the RDG member involved in the case should make a direct referral.
- A progress file will be kept, with copies of all emails, telephone calls, verbal/written interactions regarding the referral (to be kept securely by the RDG Secretary).
- The referral will be made and followed up in writing within 48 hours.

Children's Social Care will advise the Safeguarding Officer who will inform the parents if this is a case where this has not already been discussed with the parents.

The Safeguarding Officer will work closely with all professionals involved in the case following information sharing protocols. At all times the Safeguarding Officer will seek advice from the Children's Social Care and follow their instructions.



## **Roles and Responsibilities of RDG Members**

At the outset of a production involving young people the relevant personnel will:

- Undertake a risk assessment i.e. imagine all possible situations (abuse, injury etc) that could occur during the time that young people are in the rehearsal and theatre environment and monitor the risk.
- Inform the relevant people of RDG's Safeguarding and Child Protection Policy and Procedures.
- Identify who the Safeguarding and Child Protection Officer is.
- Ensure the effective recruitment of chaperones and other individuals with responsibility for young people, including appropriate vetting, to ensure that young people are supervised adequately and appropriately at all times (see notes on chaperones below).
- Obtain a DBS for any adult who it is predicted is likely to require unsupervised contact with any young person involved with the production.

## **Health & Safety**

- Chaperones and children should be advised of "house rules" regarding health and safety and must be notified of areas that are out of bounds.
- If a young person is injured while at rehearsals or performances a designated first-aider should administer first aid (supervised if possible) and the injury should be recorded in RDG's accident book which is kept in the kitchen during rehearsals. This record should be counter-signed by the person with responsibility for Safeguarding and Child Protection and should be stored in line with data protection guidelines.
- No one other than stage crew and chaperones will be allowed in the backstage areas during performances.

## **Unsupervised contact during rehearsals and performances**

- RDG and RDG Youth and Sundowners Leaders/Directors will ensure that no adult has unsupervised contact with young people unless previously DBS cleared or Chaperone trained.
- There should be a minimum of two adults in the room when working with young people. If this is not possible and the RDG, RDG Youth or Sundowners Leader/Director is the only adult present, then they should ideally be DBS cleared.
- If unsupervised contact is unavoidable, steps should be taken to minimise risk.
- Attendance at rehearsals is only at the request of the Director.

## **Physical contact during rehearsals and performances**

- Adults should only have physical contact with young people when it is absolutely necessary in relation to the particular activity within the production and the purpose of the contact must be made explicitly clear by the director.

## **Managing sensitive information and photographic material**

- Written permission from parents will be obtained for use of any photographic material featuring young people for promotional use or any other purposes.



## Runnymede Drama Group

## RDG Youth & Sundowners

[www.rdg.org](http://www.rdg.org)

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- RDG's web-based materials and activities should be carefully monitored for inappropriate use, i.e. use of appropriate images and the anonymity of children must be maintained unless prior written approval of a parent or guardian is obtained.
  - Photographs or videos will only be taken at the dress rehearsal or performances of the show. Promotional shots will be taken at a specific time agreed by prior arrangement with the cast and director.
  - RDG will ensure confidentiality in order to protect the rights of its members, including the safe handling, storage and disposal of any sensitive information such as criminal record disclosures.
  - Witness records should be made. If a serious allegation is made against any member of RDG, or theatre staff, RDG committee has the right to suspend that individual immediately until the investigation is concluded. The individual may be excluded from the theatre, rehearsal rooms etc. and not have any unsupervised contact with any other young people in the production.

## Chaperones

- Chaperones should be appointed by RDG and RDG Youth and Sundowners Leaders for the care of young people during productions. By law the chaperone is acting in loco parentis and should exercise the care, which a good parent might be reasonably expected to give to a child. The maximum number of children in the chaperone's care shall not exceed 12 (as suggested by Arts Council of England).
- Chaperones must be made aware of RDG's Safeguarding & Child Protection Policy and Procedures.
- Chaperones will be asked to complete the self disclosure form (see appendix) before being accepted to complete the Chaperone training.
- Chaperones will be offered supervision as a reflective practice after a period of activity requiring their assistance e.g. after the run of a performance.
- Chaperones will be DBS checked as a requirement of their training as a Chaperone.
- Where chaperones are not satisfied with the conditions for the children, they should bring this to the attention of the RDG Committee or theatre staff. If changes cannot be made satisfactorily the chaperone should consider not allowing the child to continue.
- During performances, chaperones should be responsible for seeing children have signed into the building.
- Children should be kept together at all times except when using separate dressing rooms.
- Chaperones should be aware of where the children are at all times.
- Children are not to leave the theatre unless in the company of their parents or chaperones.
- Children should be adequately and appropriately supervised while going to and from the toilets.
- Children will not be allowed to enter the adult dressing rooms unchaperoned.
- Chaperones should be aware of the safety arrangements and first aid procedures in the venue and should ensure that children in their care do not place themselves and others in danger.
- Chaperones should ensure that any accidents are reported to and recorded by RDG, RDG Youth and Sundowners Leaders or theatre personnel.

## Bullying

Bullying will not be tolerated at RDG. When bullying is suspected it will be investigated immediately. All complaints and incidents of bullying will be recorded and monitored. Bullying will be dealt with in a positive manner and in a way that is appropriate to each situation, recognising that there are a variety of reasons for bullying. It will never be dealt with by aggression, humiliation or revenge.



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## **Bullying advice and guidance for RDG members working with young people**

### **Evidence of Bullying can be:**

- Physical involving pushing, punching, hitting and kicking.
- Verbal involving name-calling, teasing, taunting, threatening, insulting families, telephoned abuse, silent calls and rubbishing other peoples' work. It may include comments on colour, ethnicity, gender, culture, beliefs and national origin.
- Silent involving isolating the victim, following, menacing stares, excluding the victim from group activities and rude gestures.
- Written involving notes, letters, graffiti, e-mail and other computerised messages.
- Images sometimes referred to as 'cyber-bullying'.
- Stealing the victim's property or taking property without permission.
- Damaging pens/pencils, phones or money for example. It may go as far as extortion.
- Manipulative, manipulating social networks with the intention of excluding, ostracising or marginalising individuals from their friends and normal relationships.

### **Strategies and advice for RDG members dealing with bullying**

- Provide a good role model.
- Pick up and deal with small incidents in workshops or rehearsals eg refusing to work with people, name-calling, and comments relating to appearance or beliefs.
- Assume that all bullying cases are different.
- Watch for early signs of distress, eg deteriorating work, spurious illness, isolation, clinging to adults, erratic attendance.
- All incidents and disclosures should be taken seriously and should be acted on.
- Listen carefully, record accurately and do not act as a judge.
- Seek assistance and discuss all stages of action. Do not rush into action, but do not leave the victim at risk or feeling that nothing has been done.
- Be careful that you do not encourage a young person to disclose a problem and then have no time to deal with it. Give time for a disclosure and seek support to do this. Do not look for reasons to blame the victim. The victim is not responsible for the bullying.
- Work at the victim's pace, be supportive and do not force the pace. Allow the victim to explore possible responses to incidents.
- Do not accept the bully's excuse, e.g. "I was only joking/playing". Point out that it was not funny/not a game for the victim.
- Make it clear that such behaviour is unacceptable and must not be repeated. Do not deal with bullying by bullying.
- Encourage all involved to accept responsibility for their own behaviour and the consequences of that behaviour.
- Encourage all witnesses to accept that they have the responsibility to act against bullying by reporting incidents, by making it clear they do not approve of bullying by making sure no one is isolated.
- Get other members (adults and young people) to provide support for the victim so they are not alone, and feel supported and safe.
- If you come across a serious incident remove the victim ASAP.



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**Members of RDG who are currently DBS and Chaperone trained are as follows:**

- Emma Thompson
- Katie Edwards
- Jackie Austin
- Shelby Myers
- Sarah Mc Loughlin

**Members of RDG who are named First Aiders:**

- Shelby Myers
- Emma Thompson
- Amy Horn

This policy should also be read in conjunction with RDG's Health & Safety Policy.

RDG are committed to reviewing our policy and good practice annually.



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## Appendix 1: Useful Resources

- "Working together to safeguard children 2023 – available to download from:  
[https://assets.publishing.service.gov.uk/media/6849a7b67cba25f610c7db3f/Working\\_together\\_to\\_safeguard\\_children\\_2023\\_-\\_statutory\\_guidance.pdf](https://assets.publishing.service.gov.uk/media/6849a7b67cba25f610c7db3f/Working_together_to_safeguard_children_2023_-_statutory_guidance.pdf)
- Child performance and activities licensing legislation in England:  
[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/401345/Child\\_performance\\_and\\_activities\\_licensing\\_legislation\\_in\\_England\\_-\\_departmental\\_advice\\_-\\_final.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/401345/Child_performance_and_activities_licensing_legislation_in_England_-_departmental_advice_-_final.pdf).
- Childline: [www.childline.org.uk](http://www.childline.org.uk) – Freephone – 08001111
- NSPCC: [www.nspcc.org.uk](http://www.nspcc.org.uk)
- Contact the Whistleblowing Advice Line on: 0800 028 0285



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## **Appendix 2: Disclosure/Child Protection Incident Reporting Forms**

Date of Incident		
Time of Incident		
Location Incident		
<b>PEOPLE INVOLVED / WITNESSES</b>		
Name	Contact Details	Involved / Witness

**Description of Incident:**

[This is an OBJECTIVE document so please refrain from using opinions and record only what happened].

**Follow Up actions:**

Referred To	
Contact Name	
Contact Number	



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**Lead worker involved in follow up work**

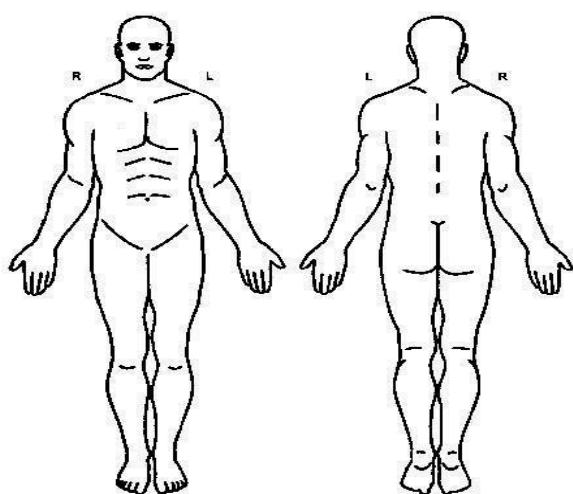
**Other workers involved**

**Signed** .....

**Print Name** .....

**Date** .....

### **Appendix 3: Physical Injury Form**

Participants Record Number (if applicable)	Record Number:
<p>Please mark any injuries or marks you have seen/shown and describe symptoms. Subject does NOT require to undress and no assumptions should be made about injuries all VISIBLE injuries should be recorded.</p> <p>MALE / FEMALE:</p> <p>AGE:</p>  Two line drawings of human figures are provided for marking injuries. On the left, a male figure is shown from the front, with "R" (right) and "L" (left) labels at the top of the head. On the right, a female figure is shown from the back, with "L" (left) and "R" (right) labels at the top of the head. Both figures have a dashed vertical line down the center of the body and horizontal dashed lines indicating the torso, abdomen, and legs.	