

London Bubble Safeguarding Policy

Revised January 2025 To be reviewed November 2025 Designated Safeguarding Lead: Marie Vickers Nominated Trustee for Safeguarding: Anna Shields

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Part A - Context

1. Purpose: Protecting Children, Young People and Vulnerable Adults

Our charitable activities include working with vulnerable people. The purpose of this policy is to protect children, young people and vulnerable adults and provide our staff, trustees, freelance practitioners, volunteers, partners and funders with the overarching principles that guide our approach in doing so.

Children and Young People

In this policy, the terms *child*, *children* or *children and young people* refer to anyone under the age of 18.

Adults

The term *adult* or *vulnerable adult* refers to people over the age of 18 who are at risk of abuse or neglect. They may need additional care services because of mental or physical disability, age or illness. They may be unable to care of themselves or unable to protect themselves against significant harm or serious exploitation.

An adult may be considered to have safeguarding needs if they

- Are older (this generally refers to those over 65, however our Older Adults' Programme is open to anyone aged 55 and above)
- Are frail due to ill health, physical disability or cognitive impairment
- Are carers
- Have a learning disability, physical disability and/or sensory impairment
- Have mental health needs
- Have a long-term illness or health condition
- Misuse substances or alcohol
- Do not have capacity to make a decision and are in need of care and support

2. Safeguarding Principles

At London Bubble, we believe that:

- Nobody who is involved in our work should ever experience abuse, harm, neglect, or exploitation.
- We all have a responsibility to promote the welfare of all our beneficiaries, staff and volunteers, to keep them safe and to work in a way that protects them.
- We all have a collective responsibility for creating a culture in which our people not only feel safe, but also able to speak up, if they have any concerns.
- Children, young people and vulnerable adults have a right to be heard, listened to and taken seriously.

- Individuals and agencies must share information and work together in the best interest of children, young people and vulnerable adults.
- Parents and carers have a right to respect and should be consulted and involved in matters which affect their families.

3. Legislation and Guidance

This policy is derived from a number of legislative provisions and statuary guidance. In particular, it is based on good practice found in:

Working Together to Safeguard Children (2023)

https://assets.publishing.service.gov.uk/media/669e7501ab418ab055592a7 b/Working_together_to_safeguard_children_2023.pdf

Keeping Children Safe in Education (2024)

https://assets.publishing.service.gov.uk/media/66d7301b9084b18b95709f7 5/Keeping_children_safe_in_education_2024.pdf

The Children Act 1989 (and 2004 amendment)

https://www.gov.uk/government/publications/children-act-1989-careplanning-placement-and-case-review

Safeguarding Vulnerable Groups Act (2006)

https://www.gov.uk/government/publications/safeguarding-policyprotecting-vulnerable-adults

Statement of Government Policy on Safeguarding Adults (2011)

<u>https://www.gov.uk/government/publications/adult-safeguarding-statement-of-government-policy</u>

Six Principles for Safeguarding Adults (2011)

First introduced by the Department of Health in 2011, but now embedded in the Care Act, these six principles apply to all health and care settings.

1. Empowerment

People being supported and encouraged to make their own decisions and informed consent

2. Prevention

It is better to take action before harm occurs.

3. Proportionality

The least intrusive response appropriate to the risk presented

4. Protection

Support and representation for those in greatest need.

5. Partnership

Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.

6. Accountability

Accountability and transparency in safeguarding practice.

4. Safeguarding Policy Applicability & Responsibilities

This safeguarding policy applies to anyone working on our behalf, including our core staff, freelance practitioners, associate artists, trustees, students on work placement and other volunteers.

Partner organisations will be required to have their own safeguarding procedures that must, as a minimum, meet the standards outlined below, and include any additional legal or regulatory requirements specific to their work. Safeguarding should be appropriately reflected in other relevant policies and procedures.

5. Related Policies

This policy works alongside and makes reference to other London Bubble policies:

- Anti-Racism Policy
- Data Protection Policy
- Diversity, Equality and Inclusion Policy
- Health and Safety Policy
- Rehabilitation of Offenders Policy
- Safe Recruitment Policy
- Staff Wellbeing Policy
- Social Media Policy
- Whistleblowing Policy
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6. Diversity, Equality and Inclusion

At London Bubble we believe that everyone should be treated equitably so that each member can thrive.

Diversity, equality and inclusion are part of safeguarding as these issues often impact an individual's lived experience and therefore their mental and physical wellbeing.

Practitioners must consider diversity, equality and inclusion when planning to ensure the suitability of the activity for the people involved.

We commit to offering a safe space for everyone regardless of background.

We are inspired by John Burnham's Social GRACES model for attributes that we will not tolerate discrimination against:

G	Gender	Geography	
R	Race	Religion	
Α	Age	Ability	Appearance
С	Culture	Class	
Е	Ethnicity	Economics	Education
S	Sexuality	Spirituality	Sexual Orientation

It is recommended that staff diversity reflects that of the group where possible.

Some children, young people and vulnerable adults face an increased risk of abuse, and additional barriers may exist for them with respect to recognising or disclosing it. Part of our commitment to anti-discriminatory practice is recognising people's diverse circumstances. We ensure that all children, young people and vulnerable adults have the same protection, regardless of any barriers they may face.

We give special consideration to those who:

- Have special educational needs or disabilities
- Have mental health needs
- Are young carers
- Are in the care system or are care leavers
- May experience discrimination due to their race, ethnicity, religion, gender identification or sexuality
- Have English as an additional language
- Are known to be living in difficult situations for example, are homeless or in temporary accommodation or where there are issues such as substance abuse or domestic abuse at home
- Are at risk of FGM, sexual exploitation, forced marriage, or radicalisation
- Are asylum seekers

7. Types of Abuse and Maltreatment

Below are some of the types of abuse that the children, young people and vulnerable adults may have experienced or be experiencing. Staff should be mindful of these definitions in case indicators occur.

Abuse can take many forms, such as physical, psychological, emotional, financial, sexual or institutional abuse, including neglect and exploitation.

Somebody may abuse or neglect a child, young person or vulnerable adult by inflicting harm, or by failing to act to prevent harm. Harm can include ill treatment that is not physical as well as the impact of witnessing ill treatment of others. This can be particularly relevant, for example, in relation to the impact on children of all forms of domestic abuse. Abuse can happen within 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.

Abuse or maltreatment of children

Type of abuse or	Examples	Indicators
maltreatment		
kic pu sc ph ina us	Hitting, slapping, punching, kicking, hair-pulling, biting, pushing, rough handling, scalding and burning, physical punishments, inappropriate or unlawful use of restraint, physical harm caused by a parent or carer fabricating the symptoms of, or inducing, illness	Abusive injuries tend to involve softer tissue and be in areas that are harder to damage through slips, trips, falls and other accidents. This may include:
		 forearm (defensive injuries) chest and abdomen thighs or genitals facial injuries (cheeks, black eyes, mouth) ears, side of face or neck and top of shoulders ('triangle of safety') back and side of trunk.
	Abusive injuries may be seen on both sides of the body and match other patterns of activity. They may not match the explanation given by the child or parent/carer and there	

Children may be abused by an adult or adults, or another child or children.

Emotional or psychological abuse	 Overprotection – preventing someone accessing educational and social opportunities and seeing friends Intimidation, coercion, harassment, use of threats, humiliation, bullying, swearing or verbal abuse Conveying feeling of worthlessness, inadequacy or that a child is unloved Threats of harm or abandonment Placing inappropriate expectations on children Witnessing or hearing the abuse or ill-treatment of others (including domestic violence) 	 may also be signs that injuries are being untreated, or at least a delay in seeking treatment. Concerning interactions between parents or carers and the child (e.g. overly critical or lack of affection) Lack of self-confidence or self-esteem Sudden speech disorders Self-harm or eating disorders Lack of empathy shown to others (including cruelty to animals) Drug, alcohol or other substance misuse Change of appetite, weight loss/gain Signs of distress: tearfulness, anger
Sexual abuse	 Forcing or enticing a child or young person to take part in sexual activities, which may or may not involve violence Penetrative acts Non-penetrative acts (kissing, masturbation, rubbing or inappropriate touching) Sexual photography or forced use of pornography or witnessing of sexual acts 	 Bruising, particularly to the thighs, buttocks and upper arms and marks on the neck Bleeding, pain or itching in the genital area Difficulty in walking or sitting Sudden change in behaviour or school performance Displays of affection that are sexual or not age-appropriate Use of sexually explicit language that is not age-appropriate

	 Non-contact (looking at or producing pornography or sexual images, watching sexual activities, grooming in preparation for abuse) 	 Alluding to having a secret that cannot be revealed Bedwetting or incontinence Reluctance to undress around others (e.g. for PE lessons) Infections, unexplained genital discharge, or sexually transmitted diseases Unexplained gifts or money Self-harming Poor concentration, withdrawal, sleep disturbance Reluctance to be alone with a particular person
Neglect	 Failing to provide adequate shelter, clothing or food Failing to protect a child from harm or danger Failing to ensure that a child is supervised appropriately Failing to access medical care or treatment for a child when it is needed. 	 Excessive hunger Inadequate or insufficient clothing Poor personal or dental hygiene Untreated medical issues Changes in weight or being excessively under or overweight Low self-esteem, attachment issues, depression or self- harm Poor relationships with peers Self-soothing behaviours that may not be age-appropriate (e.g. rocking, hair- twisting, thumb- sucking) Changes to school performance or attendance

Abuse or maltreatment of adults

Type of Abuse	Examples	Indicators
Physical abuse	 Assault, hitting, slapping, punching, kicking, hair-pulling, biting, pushing Rough handling Scalding and burning Physical punishments Inappropriate or unlawful use of restraint Making someone purposefully uncomfortable (e.g. opening a window and removing blankets) Involuntary isolation or confinement Misuse of medication (e.g. over-sedation) Forcible feeding or withholding food Unauthorised restraint, restricting movement (e.g. tying someone to a chair) 	 No explanation for injuries or inconsistency with the account of what happened Injuries are inconsistent with the person's lifestyle Bruising, cuts, welts, burns and/or marks on the body or loss of hair in clumps Frequent injuries Unexplained falls Subdued or changed behaviour in the presence of a particular person Signs of malnutrition Failure to seek medical treatment or frequent changes of GP
Domestic violence	 Psychological Physical Sexual Financial Emotional Controlling, coercive or threatening behaviour Violence or abuse between those aged 16 or over who are or have been, intimate partners or family members regardless of gender or sexuality. 	 Low self-esteem Feeling that the abuse is their fault when it is not Physical evidence of violence such as bruising, cuts, broken bones Verbal abuse and humiliation in front of others Fear of outside intervention Damage to home or property

Adults may be abused by another adult or adults, or a child or children.

	 So called 'honour' - based violence, female genital mutilation and forced marriage. Coercive or controlling behaviour is a core part of domestic violence. Coercive behaviour can include: 	 Isolation – not seeing friends and family Limited access to money
	 acts of assault, threats, humiliation and intimidation harming, punishing, or frightening the person isolating the person from sources of support exploitation of resources or money preventing the person from escaping abuse regulating everyday behaviour. 	
Sexual abuse	 Rape, attempted rape or sexual assault Inappropriate touch anywhere Non- consensual masturbation of either or both persons Non- consensual sexual penetration or attempted penetration of the vagina, anus or mouth Any sexual activity that the person lacks the capacity to consent to Inappropriate looking, sexual teasing or innuendo 	 Bruising, particularly to the thighs, buttocks and upper arms and marks on the neck Torn, stained or bloody underclothing Bleeding, pain or itching in the genital area Unusual difficulty in walking or sitting Foreign bodies in genital or rectal openings Infections, unexplained genital discharge, or sexually transmitted diseases Pregnancy in a woman who is

	or sexual harassment • Sexual photography or forced use of pornography or witnessing of sexual acts • Indecent exposure	 unable to consent to sexual intercourse The uncharacteristic use of explicit sexual language or significant changes in sexual behaviour or attitude Incontinence not related to any medical diagnosis Self-harming Poor concentration, withdrawal, sleep disturbance Excessive fear/apprehension of, or withdrawal from, relationships Fear of receiving help with personal care Reluctance to be alone with a particular person
Psychological or emotional abuse	 Enforced social isolation – preventing someone accessing services, educational and social opportunities and seeing friends Removing mobility or communication aids or intentionally leaving someone unattended when they need assistance Preventing someone from meeting their religious and cultural needs Preventing the expression of choice and opinion Failure to respect privacy Preventing stimulation, meaningful 	 An air of silence when a particular person is present Withdrawal or change in the psychological state of the person Insomnia Low self-esteem Uncooperative and aggressive behaviour A change of appetite, weight loss/gain Signs of distress: tearfulness, anger Apparent false claims, by someone involved with the person, to attract unnecessary treatment

	 occupation or activities Intimidation, coercion, harassment, use of threats, humiliation, bullying, swearing or verbal abuse Addressing a person in a patronising or infantilising way Threats of harm or abandonment Cyber bullying 	
Financial or material abuse	 Theft of money or possessions Fraud, scamming Preventing a person from accessing their own money, benefits or assets Employees taking a loan from a person using the service Undue pressure, duress, threat or undue influence put on the person in connection with loans, wills, property, inheritance or financial transactions Arranging less care than is needed to save money to maximise inheritance Denying assistance to manage/monitor financial affairs Denying assistance to access benefits Misuse of personal allowance in a care home Misuse of benefits or direct payments in a family home 	 Missing personal possessions Unexplained lack of money or inability to maintain lifestyle Unexplained withdrawal of funds from accounts Power of attorney or lasting power of attorney (LPA) being obtained after the person has ceased to have mental capacity Failure to register an LPA after the person has ceased to have mental capacity to manage their finances, so that it appears that they are continuing to do so The person allocated to manage financial affairs is evasive or uncooperative The family or others show unusual interest in the assets of the person Signs of financial hardship in cases where the person's financial affairs are being managed by a

	 Compose maying 	oourt oppointed
	 Someone moving into a person's home and living rent free without agreement or under duress False representation, using another person's bank account, cards or documents Exploitation of a person's money or assets, e.g. unauthorised use of a car Misuse of a power of attorney, deputy, appointeeship or other legal authority Rogue trading – e.g. unnecessary or overpriced property repairs and failure to carry out agreed repairs or poor workmanship 	 court appointed deputy, attorney or LPA Recent changes in deeds or title to property Rent arrears and eviction notices A lack of clear financial accounts held by a care home or service Failure to provide receipts for shopping or other financial transactions carried out on behalf of the person Disparity between the person's living conditions and their financial resources, e.g. insufficient food in the house Unnecessary property repairs
Modern slavery	 Human trafficking Forced labour Domestic servitude Sexual exploitation, such as escort work, prostitution and pornography Debt bondage – being forced to work to pay off debts that realistically they never will be able to 	 Signs of physical or emotional abuse Appearing to be malnourished, unkempt or withdrawn Isolation from the community, seeming under the control or influence of others Living in dirty, cramped or overcrowded accommodation and or living and working at the same address Lack of personal effects or identification documents Always wearing the same clothes

		 Avoidance of eye contact, appearing frightened or hesitant to talk to strangers Fear of law enforcers
Discriminatory abuse	 Unequal treatment based on age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex or sexual orientation (known as 'protected characteristics' under the Equality Act 2010) Verbal abuse, derogatory remarks or inappropriate use of language related to a protected characteristic Denying access to communication aids, not allowing access to an interpreter, signer or lip-reader Harassment or deliberate exclusion on the grounds of a protected characteristic Denying basic rights to healthcare, education, employment and criminal justice relating to a protected characteristic Substandard service provision relating to a protected characteristic 	 The person appears withdrawn and isolated Expressions of anger, frustration, fear or anxiety The support on offer does not take account of the person's individual needs in terms of a protected characteristic

Organisational or	 Discouraging visits 	Lack of flexibility and
institutional abuse	or the involvement of	choice for people
Institutional abuse	relatives or friends	using the service
	Run-down or	 Inadequate staffing
	overcrowded	levels
	establishment	 People being hungry
	 Authoritarian 	or dehydrated
	management or rigid	 Poor standards of
	regimes	care
	 Lack of leadership 	 Lack of personal
	and supervision	clothing and
	 Insufficient staff or 	possessions and
	 Insufficient start of high turnover 	communal use of
	J	
	resulting in poor	personal items
	quality care	Lack of adequate
	Abusive and diaroopportful	procedures
	disrespectful attitudes towards	 Poor record-keeping and missing
		documents
	people using the service	Absence of visitors
		 Absence of visitors Few social,
	 Inappropriate use of restraints 	 recreational and
	 Lack of respect for 	educational
	 Lack of respect for dignity and privacy 	activities
	 Failure to manage 	 Public discussion of
	residents with	personal matters
	abusive behaviour	 Unnecessary
	 Not providing 	exposure during
	adequate food and	bathing or using the
	drink, or assistance	toilet
	with eating	 Absence of
	 Not offering choice 	individual care plans
	or promoting	 Lack of
	independence	management
	Misuse of	overview and
	medication	support
	 Failure to provide 	
	care with dentures,	
	spectacles or	
	hearing aids	
	 Not taking account 	
	of individuals'	
	cultural, religious or	
	ethnic needs	
	Failure to respond to	
	abuse appropriately	
	Interference with	
	personal	
	correspondence or	
	communication	
	 Failure to respond to 	
	complaints	

Neglect or acts of ommission	 Failure to provide or allow access to food, shelter, clothing, heating, stimulation and activity, personal or medical care Providing care in a way that the person dislikes Failure to administer medication as prescribed Refusal of access to visitors Not taking account of individuals' cultural, religious or ethnic needs Not taking account of educational, social and recreational needs Ignoring or isolating the person Preventing the person from making their own decisions Preventing access to glasses, hearing aids, dentures, etc. Failure to ensure privacy and dignity 	 Poor environment – dirty or unhygienic Poor physical condition and/or personal hygiene Pressure sores or ulcers Malnutrition or unexplained weight loss Untreated injuries and medical problems Inconsistent or reluctant contact with medical and social care organisations Accumulation of untaken medication Uncharacteristic failure to engage in social interaction Inappropriate or inadequate clothing
Self-neglect	 Lack of self-care to an extent that it threatens personal health and safety Neglecting to care for one's personal hygiene, health or surroundings Inability to avoid self-harm Failure to seek help or access services to meet health and social care needs Inability or unwillingness to 	 Very poor personal hygiene Unkempt appearance Lack of essential food, clothing or shelter Malnutrition and/or dehydration Living in squalid or unsanitary conditions Neglecting household maintenance Hoarding

manage one's personal affairs	 Collecting a large number of animals in inappropriate conditions Non-compliance with health or care services Inability or unwillingness to take medication or treat illness or injury
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8. Specific Areas of Concern

The following factors can increase the risk of abuse and/or neglect to a child, young person or vulnerable adult. We ask staff to remain vigilant to identifying the additional vulnerabilities that some members may face as people experiencing these issues may require additional consideration, action or support.

Alcohol and Substance Abuse

London Bubble does not permit people under the influence of drugs or alcohol to participate in activity and will ensure that someone has the means to get home safely if they are inebriated. We will provide age-appropriate information on drugs and alcohol and address problem behaviour, working with local partners to prevent drug or alcohol misuse.

In the case of parental substance misuse (drugs or alcohol), we recognise that this may impact on parental capacity and can significantly exacerbate other concerns such as domestic abusee or mental health issues. We will remain vigilant in identifying and supporting children and their families facing such issues, and work in collaboration with other agencies where necessary to prevent significant harm.

Children Missing from Education

A child going missing from education is a potential indicator of abuse or neglect, and such children are at risk of being victims of harm, exploitation or radicalisation. If you become aware that a child is no longer attending school and you think this is not a formal arrangement (i.e. they are being home schooled), please contact the DSL. There are many circumstances where a child may become missing from education, but some children are particularly at risk. These include children who:

- Are at risk of harm or neglect
- Come from Gypsy, Roma, or Traveller families
- Come from the families of service personnel
- Go missing or run away from home or care
- Are supervised by the youth justice system
- Cease to attend a school
- Come from new migrant families

Homelessness

The current definition of homelessness includes people who are:

- staying with friends or family
- staying in a hostel, night shelter or B&B
- squatting (because you have no legal right to stay)
- at risk of domestic abuse
- experiencing violence in their home
- living in poor conditions that could affect health
- separated from family because they do not have a place to live together

People attending Bubble may be more vulnerable to homelessness because they are:

- leaving care or leaving home for the first time
- pregnant with nowhere to stay now or when the baby comes
- struggling to live on benefits or a low income
- from abroad without the right to claim benefits
- leaving prison

If we are aware that a member is experiencing homelessness, we will refer to necessary services.

Mental III Health

London Bubble seeks to promote and support positive mental health and improve social and emotional wellbeing through theatre projects. We welcome people with needs ranging from mild to severe. Although we recognise the indirect therapeutic outputs of our work, we are clear that we do not offer therapy.

We are committed to supporting people with more severe needs and to help make appropriate referrals to specialist agencies and local services such as Child and Adolescent Mental Health Services (CAMHS) and/or Community Mental Health Teams where necessary. We recognise that some parents with mental health issues may experience difficulties at times with their parenting responsibilities and that this can impact child welfare and be connected to safeguarding concerns.

There are currently two people trained in Mental Health First Aid on the team; **Marie** Vickers and Natalie Clarke.

Marie Vickers is also part of the Wellbeing Faculty at the Institute for Arts in Therapy and Education and has undertaken training in Therapeutic Wellbeing Practice.

Practitioners engaging with children, young people and vulnerable adults are invited to participate in Reflective Practice with a qualified therapist so that they can reflect on and process the impact of working with vulnerable people on their own wellbeing.

Special Educational Needs and Disabilities

As an inclusive organisation, we recognise that people with disabilities or special educational needs have exactly the same human rights to be safe from abuse and neglect, to be protected from harm and achieve the same outcomes as non-disabled people. They can experience greater vulnerability as a result of negative attitudes and because they may have additional needs relating to physical, sensory, cognitive and/or communication impairments. We are committed to adapting our practice and providing Access Support Workers where appropriate so that members can participate.

Part B - Procedures at London Bubble

9. Reporting Safeguarding Concerns

If a crime is in progress, or an individual is at immediate risk of harm, call the police on 999.

If you are a member, participant, partner or member of the public, make your concerns known to a member of our team, who will alert a senior member of the charity. **Marie Vickers** is the Designated Safeguarding Lead.

For staff and volunteers, make your concerns known to your line manager. If you feel unable to speak to a member of the team, speak to a trustee. **Anna Shields** is the nominated trustee for Safeguarding.

London Bubble staff should never let suspicion, disclosure or allegation of abuse go unrecorded or unreported.

Staff should use the Cause for Concern form to write an objective, factual account. We do not show bias to any individual, exaggerate or trivialise abuse.

Staff should not jump to conclusions.

Staff are advised to refer rather than investigate.

In the event of witnessing a concern or hearing a disclosure, staff can offer reassurance and commitment to helping a participant.

Best practice includes:

- Allowing the individual to speak without interruptions or judgement
- Avoiding leading questions
- Staying calm and not rushing into actions which may be inappropriate
- Confirming you understand how difficult it must have been to confide in you
- Showing you take what is being said seriously
- Alleviating feelings of guilt or isolation
- Not making promises you cannot keep
- Explaining that you will have to tell someone else or order to help stop what is happening
- Assuring the individual that their safety and wellbeing is at the centre of our work
- Ensuring that no situation arises at London Bubble which could cause further concern

A blank concern form is included at the back of this policy or can be collected from the office or can be emailed by any member of the Bubble team.

10. London Bubble Safeguarding Team

Designated Safeguarding Lead (DSL):

Marie Vickers	marie@londonbubble.org.uk	0207 237 4434
Artistic Director & Co-CEO		07845 308 359

The DSL is responsible for coordinating safeguarding issues, producing the policy, implementing its' practice, ensuring staff are appropriately trained and taking necessary action when required.

Marie is point of contact for staff who have a concern about members' welfare, safeguarding and/or child protection issues, including where the concern involves a mental health issue.

The DSL can offer advice and support to staff, volunteers, members, parents and partners regarding safeguarding and welfare.

Other staff on the Safeguarding Team include:

Lucy Bradshaw	lucy@londonbubble.org.uk	0207 237 4434
Natalie Clarke	natalie@londonbubble.org.uk	0207 237 4434

Nominated Trustee for Safeguarding:

Anna Shields	anna@starlingarts.com	07921 221 692
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Any of the people named above can deputise for the DSL.

11. Southwark Safeguarding Contact Details (to be used by the DSL)

Once a concern has been raised with the DSL, it is their job to check whether it meets Southwark's thresholds for safeguarding and inform the relevant services.

The numbers below are to be used by the DSL.

Are you worried about a child?

If you have concerns about a specific child, contact the Multi-Agency Safeguarding Hub (MASH)

0207 525 1921 (Mon-Fri 9-5)

0207 525 5000 (out of hours)

MASH@southwark.gov.uk

https://safeguarding.southwark.gov.uk/asking-for-hekp/

Concerns about Child Sexual Exploitation can be reported to

cse@southwark.gov.uk

Are you worried about an adult with physical/sensory disabilities, or an adult over 65?

OPPDContactteam@southwark.goc.uk

0207 525 3324

Are you worried about an adult with a mental illness?

MHContact@southwark.gov.uk

0207 525 0088

Are you worried about an adult with a learning disability?

LearningDisabilitiesDuty@southwark.gov.uk

0207 525 2333

Deprivation of Liberty Safeguards (DoLS)

DOLS@southwark.gov.uk

Allegations against people who work with children and young people

The Local Authority Designated Officer (LADO) provides advice and guidance to employers and other individuals/organisations who have concerns relating to an adult who works with children and young people (including volunteers, agency staff and foster carers) or who is in a position of authority and having regular contact with children (for example religious leaders or school governors).

In Southwark the LADO roles in based within the Quality Assurance Unit.

QAU duty number	0207 525 3297
QAU service manager (LADU)	0207 525 0689

12. Safer Recruitment & DBS Checks

All staff and volunteers who will as part of this job have contact with children, young people or vulnerable adults will undergo an Enhanced DBS Check for either the Child or Adult workforce (as relevant) or both. If the disclosure reveals that a person is not suitable to work with children, young people or vulnerable adults, they will not be appointed.

The company will cover the cost of checks for salaried staff but freelance artists must provide their own.

If appropriate, London Bubble may inform the DBS, police and/or other agencies of a person's attempt to secure employment with children or vulnerable adults if their check shows that they are barred.

If a DBS Enhance Check cannot be issued in time for the start of a contract, a DBS disclosure issued by another body within the previous three years may be deemed adequate in the interim.

All potential employees must provide the details of two referees. London Bubble will contact referees for verification that this person is suitable to work with children, young people and vulnerable adults. London Bubble will reject any applicant who is deemed unsuitable to work with children, young people or adults at risk.

New staff and volunteers receive a Safeguarding induction from the DSL and are made aware of London Bubble's policies and procedures.

13. Safeguarding Training

Training is considered part of our organisation-wide approach to safeguarding.

A safeguarding induction is given by the DSL to all new staff and volunteers.

Every two years, we offer whole company Safeguarding training. This is carried out by an appropriately qualified external person. Training will include recognising indicators of abuse and/or neglect.

Salaried project staff are required to undergo Level 2 training every two years.

The Designated Safeguarding Lead (DSL) and nominated Trustee for Safeguarding will undertake Level 3 Safeguarding Lead training every two years.

Regular facilitators are encouraged to attend Safeguarding, Trauma Awareness and First Aid training sessions organised by London Bubble. They will be made aware of other more specific training opportunities from time to time.

14. General Safeguarding Procedures and Practices at London Bubble

Ensuring delivery spaces are safe

Risk assessments are carried out ahead of group activity. This helps us ensure that spaces are safe and suitable. A minimum temperature of 18 degrees should be maintained in rooms used by children and vulnerable adults. Heating must be safe and properly guarded. Rooms should be well lit and well ventilated. Window locks should be fitted where recommended. All fire exits must be unobstructed.

Members leaving the space and getting home

At the end of sessions, staff should ensure that all members have left safely before leaving themselves. We ask parents/carers to inform us should a different adult be collecting their child.

If a participant hasn't been collected as expected, staff should reassure the participant and attempt to contact their parents/carers to arrange a safe journey home. If necessary, the staff member may escort them in a licensed or registered taxi. If two staff are available, participants can be taken very short distances by foot.

Staff and freelance members should not take members in their cars.

When working in Sheltered Housing Units, staff should not enter the private dwellings (individual flats) of participants.

Members' Personal Details

Personal details are kept on Salesforce, a password protected CRM. Paper copies are kept in a locked unit until they can be shredded.

A record of certain personal information is maintained as part of our registration process. This is stored so that members do not have access to it. Sessions leaders delivering off site or out of office hours will be given a password protected copy of emergency contact details, information regarding health concerns including allergies, medical needs, and/or additional support needs.

Communication with participants

All Bubble activity and communication with participants that is not 'in person' should be carried out through official Bubble channels. This may include Zoom, Microsoft Teams, Bubble registered mobile numbers etc. All postal returns should be directed to the Bubble registered office. This is unless we are working in partnership with another organisation and the project risk assessment concludes that it is more appropriate to use the partner's channels. Example: Speech Bubbles online sessions carried out with individual schools' Microsoft Teams accounts.

Code of Conduct

All participants are made aware of the Code of Conduct at the start of a project. This highlights our expectations regarding safety and what is expected in terms of conduct whilst in a Bubble session. There is also a version for online delivery.

Participants are advised to wear suitable clothing and footwear for physical activity. Socks on hard surfaces are considered dangerous and advised against.

A copy of the latest Code of Conduct is included at the back of this policy.

Minimising peer-on peer abuse

We will minimise the risk of peer-on-peer abuse by:

- Challenging any form of derogatory or sexualised language or behaviour
- Being vigilant to issues such as sexualised or aggressive touching or grabbing, and initiation or hazing type violence
- Ensuring our activities help to educate children about appropriate behaviour and consent
- Ensuring that children know they can talk to staff
- Understand that a child/ young person harming a peer could be a sign that the child is being abused themselves, and that this would fall under the scope of this policy

Staff: Participant Ratio

The number of participants who can participate in sessions will depend on the size of the premises, the number of staff and the needs/purposes of the group.

Local authorities recommend that the minimum staff to participant ratio should be:

1:8 for ages 5-8 years 1:16 for ages 8 and over

London Bubble commits to at least two members of staff working on any group.

Session leaders must be over the age of 18.

If a member of staff is working with a participant on a one to one basis, this should happen in a public area, or, if this is not possible, with the door open.

15. Touch and Physical Contact

Physical contact within activities

In recognition that physical contact is often an integral part of drama activity, it is important to highlight good practice.

Practitioners should seek permission before touching participants, check participants are comfortable with physical touch before starting an exercise and give alternative options for those who are not.

Practitioners should consider the context of the group, age, gender, religion and culture when planning activities involving physical contact.

Staff must not use any physical punishment (including slapping, smacking, or shaking) not practices that humiliate or frighten participants or threaten these kinds of punishments.

If a participant makes any inappropriate physical advances towards a member of staff, they should inform the DSL immediately.

Comforting someone in distress

If a member of staff thinks it is appropriate to comfort a participant who is distressed, they must offer this support in a public area.

If a member instigates a hug, a side-to-side hug is advised.

16. Photographs and Videos

Photographs and videos featuring children or vulnerable adults may only be used within the following parameters:

Consent

Written consent is given by the individual (if over 18) or carer of the subject (if under 18) prior to the photographs or video being taken. In addition, we should gain consent from the subject on the day of photos or video being taken.

Future use

The consent form will specify whether the photograph or video may be re-used in the future without the need for future consent, how it may be published e.g. online/printed materials.

Purpose

The image is only used for the purposes(s) for which consent has been given.

Content

Due consideration is given to the appropriateness of content of an image e.g clothing, position etc.

Context

Photographers / film makers engaged by London Bubble may not work alone with children, young people or vulnerable adults.

DBS

Photographers / film makers engaged by London Bubble agree to abide by the terms of this policy including providing a DBS check.

Use of Personal Devices, Platforms and Accounts

Session leaders should not take or save photos on personal devices or post pictures of members from their personal accounts.

GDPR

London Bubble will follow the GDPR and the Data Protection Act 2018 when taking and storing photos and recordings for use within the organisation.

17. Online Safety

We will identify and manage online risks by ensuring that:

- Volunteers, staff and trustees understand how to keep themselves safe online e.g. not having personal items in view. We may use high privacy settings, blurred backgrounds and password access to meetings to support this.
- The online services we provide are suitable for our users. For example, using age restrictions and offering password protection to help keep people safe.
- The services we use and/or provide are safe and in line with our Code of Conduct.
- A specific Code of Conduct for online sessions is sent to members ahead of and/or during sessions.
- We follow GDPR legislation to protect personal details.
- We have permission to display any images on our website or social media accounts, including consent from an individual, parent, etc.
- We clearly explain how users can report online concerns. Concerns may be reported using this policy, or direct to a social media provider using their reporting process.

18. Confidentiality and Record Keeping

Concerns are recorded and saved on the highway, encrypted with a password so that only the DSL can access them, unless requested by the Board of Trustees.

Records are kept of all meetings, decisions made and information received. The DSL should keep records of all Strategy Meetings held and their conclusion.

Live cases are reviewed ahead of every board meeting.

Reviewing records will enable us to identify any patterns in systemic issues within London Bubble.

19. Safeguarding and Supervision

We understand that safeguarding related incidents can have a personal impact on staff. Supervision takes a number of forms at London Bubble, all of which offer an opportunity to reflect on the role of safeguarding within our projects and our practice.

Salaried staff will receive annual appraisals as well as informal and ad-hoc meetings with their line manager throughout the year.

Freelance staff will be invited to pre and post project meetings with the project team, Programme Producer and either the Artistic or Executive Director. These sessions will include opportunities to discuss the practice, the process, the performance/sharing, the people in the group and safeguarding risks and/or incidents.

With groups that are more vulnerable, we may have team debriefs at the end of each session to ensure that staff feel supported and that no one person is dealing with safeguarding incidents alone.

We often work together as team to discuss best practice and make action plans to safeguard individuals.

Clinical supervision (also described as Reflective Practice) with a qualified therapist is offered termly to all delivery staff. Staff are also able to access free counselling through our Employee Assistance Programme. You can call the 24-hour confidential helpline on 0800 032 7697.

Any member of staff is welcome to ask for a supervision session with their line manager, the DSL, the Artistic or Executive Director at any time.

20. Allegations Against a Member of Staff

If an allegation of abuse is made against a member of staff or volunteer, it must be brought to the attention of the DSL immediately. Where the allegation meets the 'threshold', the DSL will conduct basic enquiries to decipher whether there is any foundation to the allegation and liaise with the LADO and other authorities as appropriate. If the DSL is the subject of the investigation, the Board will manage the case.

The threshold for an allegation may have been met in the following circumstances:

- They have behaved in a way that has harmed a child or may have harmed a child, young person or vulnerable adult
- They possibly committed a criminal offence against a child, young person or vulnerable adult
- They have behaved towards a child, young person or vulnerable adult in a way that indicates they may pose risk of harm to children
- They have behaved towards a child, young person or vulnerable adult that indicates they are unsuitable to work with children, young people or vulnerable adults

This includes behaviour from outside of London Bubble which might make the person unsuitable to work with our members (known as transferable risk). Some cases may require immediate intervention by the police.

Any member of staff under allegation will not have contact with any child, young person, or vulnerable adult whilst an investigation is underway.

Following an investigation, London Bubble will keep a summary of the case on the person's confidential personnel file. The record should include details of how the allegation was followed up and resolved, the decisions reached and the action taken. A copy of this summary should be given to the individual concerned. It should be kept for at least 10 years or until the person reaches normal retirement age.

Low Level Concerns

As part of an open culture to safeguarding concerns which do not meet the threshold for a referral to LADO or the police should still be talked about. Everyone is encouraged to report or self-refer low level concerns so that professional boundaries are maintained. This may include a member of staff

- Being over friendly with children, young people or vulnerable adults
- Using inappropriate language
- Favouring one member
- Picking on one member
- Making fun of a member
- Accompanying a member home (even with consent)
- Independently contacting a member outside of an organised session

Part C - Governance

21. Management of this policy

The Designated Safeguarding Lead, **Marie Vickers**, is responsible for monitoring this policy.

This policy is endorsed and ultimately the responsibility of the London Bubble Board of Directors who review the policy every year. **Anna Shields** is the trustee with responsibility for safeguarding.

Within each review, London Bubble

- monitors the effectiveness of the policy
- identifies any gaps between policy and practice
- identifies new legislation and models of best practice which may be incorporated

A record is kept of any events or incidents in the scope of this policy. This record is reported at the policy review. With due regard for confidentiality, it simply reports the nature of an incident, the action taken and the outcome.

A copy of this policy document is issued to all artists, consultants and volunteers engaged by London Bubble who may have direct contact with children, young people or vulnerable adults.

All partners (e.g. schools, youth organisations, sheltered housing units) and participants (including their parents and carers) will be informed that the policy exists and that they are welcome to request a copy of it.

Delivery staff should familiarise themselves with the Safeguarding Policy of the setting they are working in when delivering London Bubble projects remotely.

22. Trustee Safeguarding Responsibilities

The trustees are mindful of their reporting obligations to the Charity Commission in respect of <u>Serious Incident Reporting</u> and, if applicable, other regulators. They are aware of the Government <u>guidance on handling safeguarding allegations</u>.

Responsibilities should be made clear and individuals provided with any necessary training and resources to enable them to carry out their role. It should be reflected in job descriptions, annual plan and appraisal objectives, reporting to the trustee Board and other procedures, as necessary.

This safeguarding policy will be reviewed and approved by the Board annually.

Trustees are aware of and will comply with the Charity Commission guidance on <u>safeguarding and protecting people</u> (see hyperlink) and also the <u>10 actions</u>

trustee boards need to take (see hyperlink) to ensure good safeguarding governance.

The lead trustee for safeguarding has responsibility for the oversight of all aspects of safety, including Whistleblowing and Health & Safety.

As of October 2022, this is Anna Shields.

This includes (alongside the DSL):

- Creating a culture of respect, in which everyone feels safe and able to speak up.
- An annual review of safety, with recommendations to the Board.
- Receiving regular reports, to ensure this and related policies are being applied consistently.
- Providing oversight of any lapses in safeguarding.
- Ensuring that any issues are properly investigated and dealt with quickly, fairly and sensitively, and any reporting to the Police/statutory authorities is carried out.
- Governing the organisation in way that makes everyone feels safe and able to speak up.
- Ensuring safeguarding risk assessments are carried out and appropriate action taken to minimise these risks, as part of our risk management processes.
- Ensuring that all relevant checks are carried out in recruiting staff and volunteers.
- Ensuring that all appointments that require DBS clearance and safeguarding training are identified, including the level of DBS and any training required.
- Ensuring that a central register is maintained and subject to regular monitoring to ensure that DBS clearances and training are kept up-to-date.
- Ensuring that safeguarding requirements (e.g. DBS) and responsibilities are reflected in job descriptions, appraisal objectives and personal development plans, as appropriate.
- Listening and engaging, beneficiaries, staff, volunteers and others and involving them as appropriate.
- Responding to any concerns sensitively and acting quickly to address these.
- Ensuring that personal data is stored and managed in a safe way that is compliant with data protection regulations, including valid consent to use any imagery or video.
- Making staff, volunteers and others aware of:
 - Our safeguarding procedures and their specific safeguarding responsibilities on induction, with regular updates/reminders, as necessary.
 - $_{\circ}$ $\,$ The signs of potential abuse and how to report these.

23. Safeguarding and Fundraising

London Bubble will ensure that:

- We comply with the <u>Code of Fundraising Practice</u>, including <u>fundraising that</u> <u>involves children</u>.
- Staff and volunteers are made aware of the Institute of Fundraising guidance on <u>keeping fundraising safe</u> and the NCVO Guidance on <u>vulnerable people and fundraising</u>.
- Our fundraising material is accessible, clear and ethical, including not placing any undue pressure on individuals to donate.
- We do not either solicit nor accept donations from anyone whom we know or think may not be competent to make their own decisions.
- We are sensitive to any particular need that a donor may have.

24. Approval and Review

Approval By	Date	Next Review Date
Trustee Board	25 th November 2024	November 2025

Part D - Resources for Delivery Staff Use

25. Safeguarding at a Glance: Key Principles

Things to think about when you are working with children, young people and vulnerable adults on behalf of London Bubble Theatre.

Safeguarding is everyone's responsibility

If someone is in danger or at risk of immediate harm, call 999

Refer don't investigate We are not detectives! Someone else will be better placed to find out what has happened.

Tell the DSL It is never your responsibility to deal with a safeguarding concern alone, always involve the DSL

Marie Vickers - 07845 308 359 / 07776 124 589 / 0207 237 4434

If something doesn't feel right, mention it There is no harm in raising a concern, even if it turns out to be nothing.

Maintain professional boundaries to protect yourself and participants

- Don't give your personal contact details to members
- Don't make contact with members outside of sessions
- Think about whether you can be found easily on social media and what you are sharing
- Avoid 1:1 situations with members

Don't use personal devices to take photos of members Ask for a Bubble device. If you do take pictures on a personal device, please email to the Programme Producer and delete immediately.

Take good care of yourself As a Bubble employee, you are welcome to contact Croner Wellbeing Services on their 24-hour confidential line: 0800 032 7697.

They have a number of resources available including free counselling.

These key principles are explored in more detail throughout this policy and are covered in training.

On the following pages you will find our Code of Conduct and a blank Cause for Concern form for reporting any safeguarding concerns you may have.

Code of Conduct

London Bubble activities take place at our base and in community settings including housing units, schools and theatres. In everything we do we want people to feel respected, welcome, safe and a valued member of our community. The welfare of everyone is protected by the high standards we expect in conduct from our employees, participants, volunteers, hirers and other centre users.

We celebrate and recognise the strength of working with different experiences and value the individual contributions that people make to our community. We strive to provide an environment where everyone is treated with dignity and respect regardless of age, sex or gender assignment, marital status, caring responsibilities, race, sexuality, sexual orientation, spirituality or ability.

We aim to involve everyone at a level that they feel comfortable with. We ask everyone to encourage each other, to accept the variety of abilities and experiences within each group and to listen and respect each other's opinions and contributions.

We will value and respect people's feelings. All employees and users will refrain from using language, humour, behaviour or display images that people might find offensive. Everyone will avoid damage to the building or the property of others.

We hope that Bubble is a place where you can take creative risks and try things out. In doing this we ask you to take responsibility for looking after yourself and share with your group leader ways in which we can support you.

Harassment, abuse, bullying or intimidation will not be tolerated on any grounds; this will create an environment that safeguards and protects the emotional and physical well-being of everyone.

If a matter cannot be resolved by way of an acceptable apology and an agreement that the offence will not be repeated, other ways of resolving the problem will be taken which will include reference to our complaints and disciplinary procedure. You may be asked to leave the group if the matter cannot be resolved.

For full copies of all policies and procedures, please phone the office on 0207 237 4434 or e-mail admin@londonbubble.org.uk. Policies can be found at www.londonbubble.org.uk

Registered charity no. 264359

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CAUSE FOR CONCERN REPORTING FORM TO BE COMPLETED WHEN A CHILD, YOUNG PERSON OR VULNERABLE ADULT COULD BE AT RISK OF HARM OR ABUSE

Name of person reporting concern
Role
Organisation (if not London Bubble)
Reporting date
Reporting time
Contact number
Email address
Group / Session / Project Name
Group Leader
Session Venue
Session Date
Session Time
Name of person at risk of harm or abuse
Age

DETAILS OF INCIDENT / BEHAVIOUR / CAUSE FOR CONCERN

- Record what happened or what was said in as full detail as you can remember. Note any repeated words or phrases.
- Record what you said
- Note the environmental context where were you, what was happening.
- Record the emotional context

Action taken including date(s) and times(s)

FOLLOW UP ACTION – TO BE COMPLETED BY THE DESIGNATED SAFEGUARDING LEAD (DSL)

Name of DSL

Date concern was received

Action taken including date(s) and times(s)

Further action required? YES / NO Have any other agencies been notified? YES / NO Name of person this concern has been shared with Role Organisation Email address Relationship to person the concern is regarding

FURTHER ACTIONS, UPDATES AND REVIEWS

Date Action Response

Date Action Response

Date Action Response

Has this concern been shared with the board? Date of board meeting Comments