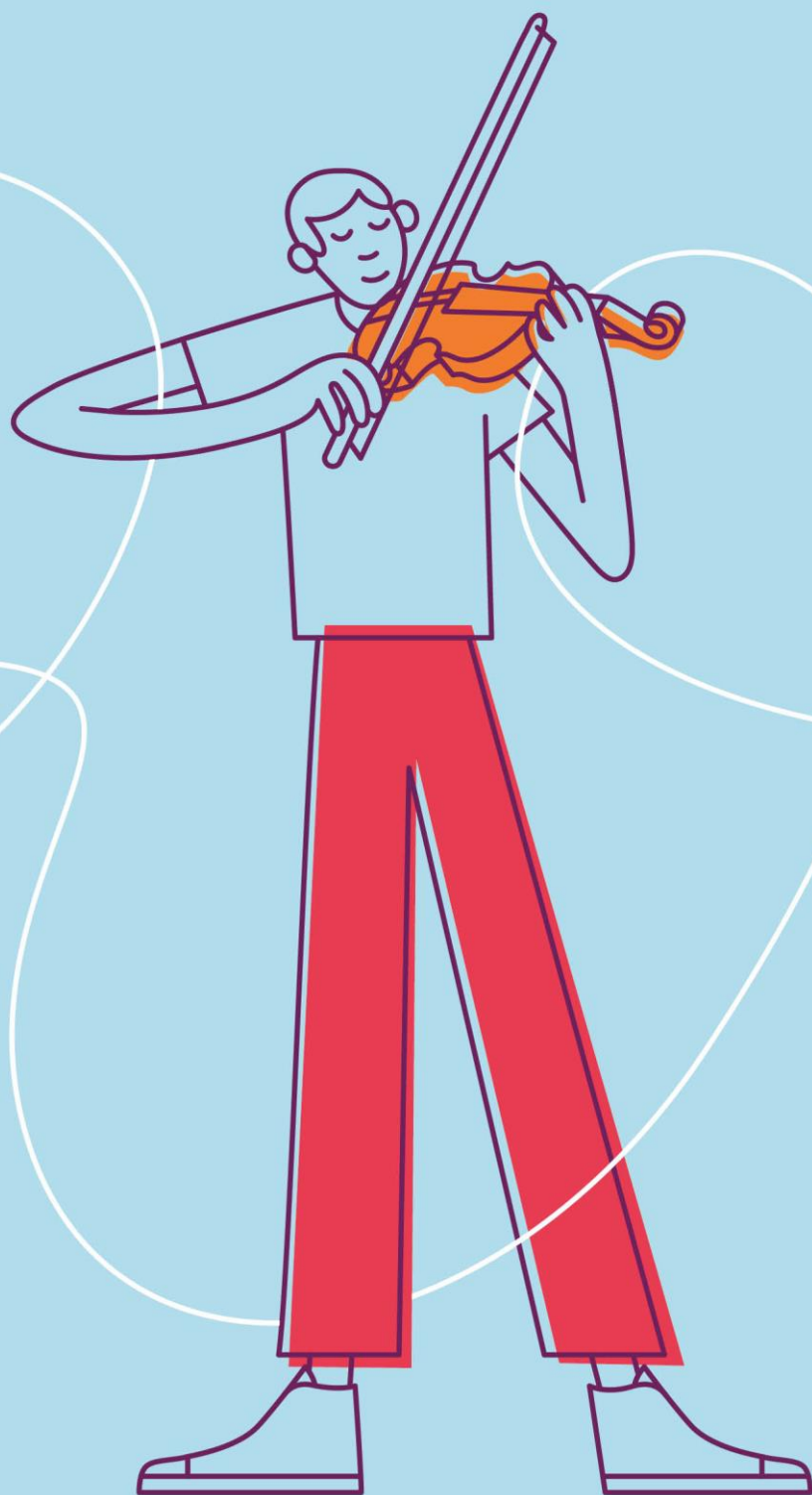


ABRSM

Safeguarding

Policy, Procedures and Code of Practice



September 2023

Contents

Policy statement: Part 1	2
1.1 Principles	2
1.2 Definitions	2
1.3 Context	2
1.4 Scope	2
1.5 Purpose	3
Defining Child Protection & Safeguarding: Part 2	5
2.1 Types of concern	5
2.2 Definition of abuse	6
Code of practice: Part 3	6
Concerns about a child: Part 4	7
4.1 What to do if you have safeguarding concerns about a child	7
4.2 Taking action	8
4.3 Process: concerns about a child	10
Concerns about a member of the workforce: Part 5	10
5.1 What to do if there are concerns or allegations about a member of the workforce	10
5.2 Process: concerns about a member of the workforce	13
Designated Safeguarding Lead: Part 6	14
Confidentiality and information sharing: Part 7	14
7.1 Disclosure	15
7.2 Consent	15
7.3 Confidentiality	16
7.4 Record of safeguarding / child protection concern	16
7.5 Storage and retention of records	16
7.6 Destruction of records	17
7.7 Policy of ownership	17
Appendix A: Definitions of abuse	18
APPENDIX B: Potential indicators of abuse or neglect	20
APPENDIX C: Recruitment and selection procedures	21
APPENDIX D: Responding appropriately to a child making an allegation of abuse	22
APPENDIX E: Safeguarding concerns report form	22
APPENDIX G: Referral contact points for children across the UK	24
APPENDIX H: Safeguarding Governance Structure	27
APPENDIX I: Glossary of terms used	28

The Safeguarding Children Policy, Procedures and Code of Practice will be annually reviewed and updated every two years unless there is a change of legislation or guidance or an incident that warrants it being reviewed sooner.

Policy statement: Part 1

The Associated Board of the Royal Schools of Music (ABRSM) is a charitable company established by four Royal Schools of Music for the benefit of music education. Its core activity is the operation of an authoritative and internationally recognised exam and assessment system to encourage and motivate players and singers at all levels through the provision of goals and the measurement of progress.

ABRSM acknowledges it has a responsibility for the safety of children and adults at risk undertaking its exams or otherwise under its temporary care. It also recognises that good safeguarding and child protection policies and procedures are of benefit to everyone involved with ABRSM's work, including staff, as they can help protect them from erroneous or malicious allegations.

ABRSM has a separate [Online Safeguarding Policy Statement](#) which covers all its digital assessments.

1.1 Principles

The following principles underpin ABRSM's approach to safeguarding and child protection:

- The welfare of the child is paramount
- Everyone has the responsibility to promote the welfare of all children to keep them safe and to practice in a way that protects them
- All children regardless of age, disability, sex, racial heritage, religious belief, sexual orientation or gender reassignment have the right to equal protection from all types of harm or abuse
- Working in partnership with children, their parents, carers and other agencies is essential in promoting children's welfare.
- These principles also inform ABRSM's work with adults at risk.

1.2 Definitions

ABRSM, wherever it operates, abides by the definition of a child according to UK and international law. This comes from the Children Act, 1989 and United Nations Convention on the Rights of the Child, 1989. The United Nations Convention for the Rights of the Child is the international framework which sets out the specific rights of children.

The definition of adults at risk is included at Appendix I.

1.3 Context

ABRSM works in several countries across the world. We are committed to working with local safeguarding agencies to protect children. We recognise that cultural expectations and practices vary, however our primary concern remains the rights and needs of the child.

This policy should be used in conjunction with the local safeguarding partnership arrangements which apply to your local authority or country in which the exam or assessment is held.

1.4 Scope

For the purposes of this policy, ABRSM's workforce includes everybody who works in a paid or voluntary capacity for or on behalf of the organisation in the UK and abroad. This includes, but is not limited to, employees, examiners, Honorary Local Representatives (HLRs), International Representatives, stewards, invigilators and consultants.

1.5 Purpose

The purpose of this document is:

- To build a safeguarding culture where the workforce and children know how they are expected to behave and to feel comfortable about sharing concerns.
- To provide the policy and procedures that underpin ABRSM's commitment to providing a safe, secure environment for all children participating in ABRSM examinations and events.
- To ensure ABRSM's workforce is clear about how to identify and respond to safeguarding concerns, especially those that are of a child safeguarding nature.
- To ensure all ABRSM's workforce have a clear understanding of the principles and practice involved in the safeguarding and protection of children and adults at risk.
- To ensure all ABRSM's workforce understand the importance of prevention in responding proactively and efficiently to all concerns.
- To provide information for children and families participating in ABRSM events on the responsibilities of, and approach taken by, ABRSM in the safeguarding and protection of children.
- To ensure participating groups, children and staff understand that if abuse is disclosed this information cannot remain confidential and that ABRSM will report it to the appropriate authority.
- To ensure all current and potential members of the ABRSM workforce are clear, ABRSM will not engage workers who have allegations relating to abuse of either children or adults at risk.

It is ABRSM's policy that:

1. Everyone working on behalf of ABRSM accepts that the welfare of children who come into contact with ABRSM in connection with its tasks and functions is paramount, and that they will report any concerns about a child or somebody else's behaviour using the procedures laid down in this document.
2. Its governance of safeguarding is robust and transparent with accountability to its Governing Body and with its Chief Executive as Chair of its internal Safeguarding Review Committee. The Governance Structure is regularly reviewed and is outlined in Part 6 of this policy and Appendix H.

It is part of ABRSM's duty of care towards children that anybody who encounters child protection concerns in the context of their work on behalf of ABRSM will be supported when they report their concerns in good faith.

3. There are at least three members of the Designated Safeguarding Team within ABRSM who will take action following any expression of concern and the lines of responsibility in respect of child protection are clear. They can be contacted via safeguarding@abrs.ac.uk.

4. The DSL knows how to make appropriate referrals to statutory safeguarding agencies. Information relating to any allegation or disclosure will be clearly recorded as soon as possible and there is a procedure setting out who should record information and the timescales for passing it on.

The Children Act 1989 states that the 'welfare of the child is paramount'. This means that considerations of confidentiality which might apply to other situations should not be allowed to over-ride the right of children to be protected from harm. However, every effort should be made to ensure that confidentiality is maintained for all concerned when an allegation has been made and is being investigated.

5. All those who are involved with children or adults at risk on behalf of ABRSM must adhere to the Code of Practice (in Part 3 of this policy and procedure).

ABRSM has the following policies for its workforce which underpin our safeguarding policy:

- Online Safeguarding Policy Statement
 - Examiner Code of Conduct
 - Guidance for Stewards and Invigilators
 - Working with Children and Young People Policy and Procedure
 - Dignity at Work Policy and Procedure
 - Recruitment and Selection Policy and Procedure
 - Social Media Policy and Procedure
6. ABRSM's position on its duty of care to children will be referred to or included in recruitment, training, moderation and policy materials where appropriate, and the policies are openly and widely available and actively promoted within the organisation.
 7. A culture of mutual respect between children and those who represent ABRSM in all its activities will be encouraged, with adults modelling good practice in this context.
 8. Any role which involves access to children will be evaluated as to whether the role involves regular contact or not and people appointed to such a role will be vetted appropriately, including relevant checks (including, but not restricted to DBS checks) prior to engagement or employment.
 9. ABRSM will ensure its workforce has access to induction and training about safeguarding upon their initial appointment, and at regular intervals, usually annually, thereafter.
 10. ABRSM recognises the increased vulnerability of some children because of the impact of discrimination, previous experiences, levels of dependency or barriers to communication. ABRSM examines candidates with a variety of needs and always endeavours to make its exams accessible to all candidates. ABRSM publishes separate guidelines covering provisions for blind and partially sighted candidates, deaf and hearing-impaired candidates, candidates with dyslexia or other learning difficulties, candidates with autistic spectrum disorders (including Asperger's syndrome) and candidates with other specific needs. Where ABRSM's guidelines are not applicable, or a candidate has particular physical access needs, each case is considered on an individual basis. For more information and guidance, please refer to: www.abrsm.org/en/exam-booking/specific-needs/

11. ABRSM acknowledges that some of its candidates may be adults at risk with wide ranging needs, including requiring a third party to be present during the assessment. Each case is considered on an individual basis. For further information, please contact ABRSM's Designated Safeguarding Team.

Defining Child Protection & Safeguarding: Part 2

Everyone has a responsibility to ensure concerns about children, no matter how unclear, are passed on and assessed. ABRSM's workforce should not undertake any investigations. The responsibility of the ABRSM workforce is to be vigilant, record and report only.

Safeguarding children is defined in Working together to safeguard children¹ and Keeping Children Safe in Education² as:

- protecting children from maltreatment;
- preventing impairment of children's mental and physical health or development;
- ensuring that children are growing up in circumstances consistent with the provision of safe and effective care; and
- taking action to enable all children to have the best outcomes.

Child protection is a part of safeguarding and promoting welfare and refers to the activity that is undertaken to protect specific children who are suffering, or likely to suffer, significant harm.

In terms of protecting those children where concerns or risks have been identified we expect our workforce to adhere to ABRSM policies, procedures and practices that:

- Take all suspicions and/or allegations of abuse or risk to children seriously, and respond swiftly and appropriately through the provision of child protection procedures
- Support the timely sharing of information, with relevant authorities, when there are concerns about a child's welfare
- Contribute to effective partnership working between all those involved in providing services for children

In terms of safeguarding children ABRSM expects, without exception, adherence to the principles and practices as outlined above.

2.1 Types of concern

Any concerns you might have may not always be of the same nature and may not require the same course of action. In practical terms, concerns are likely to arise in a number of ways. You do not need to be certain that abuse has taken place before reporting a concern:

¹ <https://www.gov.uk/government/publications/working-together-to-safeguard-children--2> This legislation applies to England. For

Scotland, see: <https://learning.nspcc.org.uk/child-protection-system/scotland/>

Northern Ireland: <https://learning.nspcc.org.uk/child-protection-system/northern-ireland/>

Wales: <https://learning.nspcc.org.uk/child-protection-system/wales/>

² https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1181955/Keeping_children_safe_in_education_2023.pdf

- **Day to day concerns:** these are concerns that will arise as part of the child's day to day activities at an exam or assessment and are not concerns to do with safeguarding or child protection, e.g. anxiety about a performance. On the whole such concerns will be dealt with immediately as part of your relationship and engagement with that child.
- **Safeguarding concerns:** these concerns will go beyond those that are dealt with as above and will usually indicate a concern about a child's vulnerability, where it is felt that vulnerability needs further assessment and possible action, e.g. a child not eating or being withdrawn
- **Child protection concerns:** these will arise when a member of ABRSM's workforce is worried or has evidence that a child has been harmed or is likely to be harmed or where a child makes a disclosure.

2.2 Definition of abuse

Abuse³: a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. 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. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse⁴. Children may be abused by an adult or adults or by another child or children.

See Appendix A for detailed definitions of abuse and Appendix B for potential indicators of abuse or neglect.

Code of practice: Part 3

ABRSM expects its entire workforce to be aware of this Code of Practice and to adhere to its principles of good practice in their approach to all children. Your attention is drawn to the position of trust you hold in working with children and the power and influence you hold. ABRSM recognises that the importance of being in a position of trust and how having a code of practice (a) protects children and (b) protects staff from false or malicious allegations and helps ABRSM to be a safer organisation. ABRSM expects this responsibility to be at the forefront of the minds of all its workforce to ensure that these positions of trust are never abused. The following principles should be taken to apply to children and to adults at risk.

ABRSM expects all its workforce to:

- value and respect children as individuals.
- remember that those who abuse children can be of any age (including other children), gender, ethnic background or class and it is important not to allow personal preconceptions about people to prevent appropriate action taking place.

³https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1181955/Keeping_children_safe_in_education_2023.pdf

⁴<https://www.ceop.police.uk/safety-centre/>

- adhere to good practice by valuing and respecting children as individuals and the adult modelling of appropriate conduct - which will always exclude bullying, shouting, racism, sectarianism or sexism.

In their dealings with children who they encounter in the course of ABRSM exams or other activities, ABRSM's workforce must not:

1. have, or be perceived to have, favourites.
2. spend any time alone with children other than that which is required in the context of an exam.
3. take children to your home unless this is for an exam arranged by ABRSM where all appropriate steps to safeguard the child have been taken and are observed at all times.
4. avoid physical contact with children. use physical punishments or any action that involves locking up or restraining a child.
5. not take children alone in a car on journeys, however short.
6. not make suggestive or inappropriate remarks to or about a child, even in fun, as this could be misinterpreted.
7. not deter children from making a 'disclosure' of abuse through fear of not being believed and to listen to what they have to say. Guidance on handling a disclosure is set out in Appendix D. If this gives rise to a child protection concern it is important to follow ABRSM's procedure for reporting such concerns, and not to attempt to investigate the concern yourself.
8. arrange meetings with children outside your work with ABRSM.
9. develop social relationships with children that participate in ABRSM events. If you come into contact with a participant in a social setting, maintain a professional distance at all times. Pay attention to your own behaviour in such a setting.
10. have contact with children through social media, e.g. Facebook or Twitter.
11. partake in any form of sexual activity with a child including grooming (i.e. befriending a child for the purpose of a future sexual relationship and this includes children aged 16 years and over). This is not permitted and represents a breach of ABRSM's Code of Practice. If such behaviour is suspected or alleged it will be dealt with under Part 5 of this document.

Concerns about a child: Part 4

4.1 What to do if you have safeguarding concerns about a child

There are essentially four key steps to remember and this procedure explains them. They are referred to as the 4 Rs:

1. Recognising abuse or neglect
2. Responding to the concerns
3. Referring concerns on
4. Recording any actions taken and outcomes.

Members of ABRSM's workforce could have their suspicion or concern raised in a number of ways, the most likely of which are:

- The conduct of a member of ABRSM's workforce
- A child disclosing abuse
- Bruising or evidence of physical hurt which may or may not be accompanied by
- Unusual behaviour by a child

If anyone has such concerns, they should be reported to the Designated Safeguarding Team using the process flowchart at Part 8 and the report form as set out in Appendix E.

If anyone identifies safeguarding concerns in a venue such as a school, then these concerns should be reported to the designated safeguarding lead in the school.

Concerns about a specific child should be reported immediately by telephone to the ABRSM DSL and confirmed in writing within 24 hours using the form at Appendix E. Delay could prejudice the welfare of a child.

In an emergency call 999 or the local equivalent.

4.2 Taking action

Staff must take action within the same working day when a concern arises:

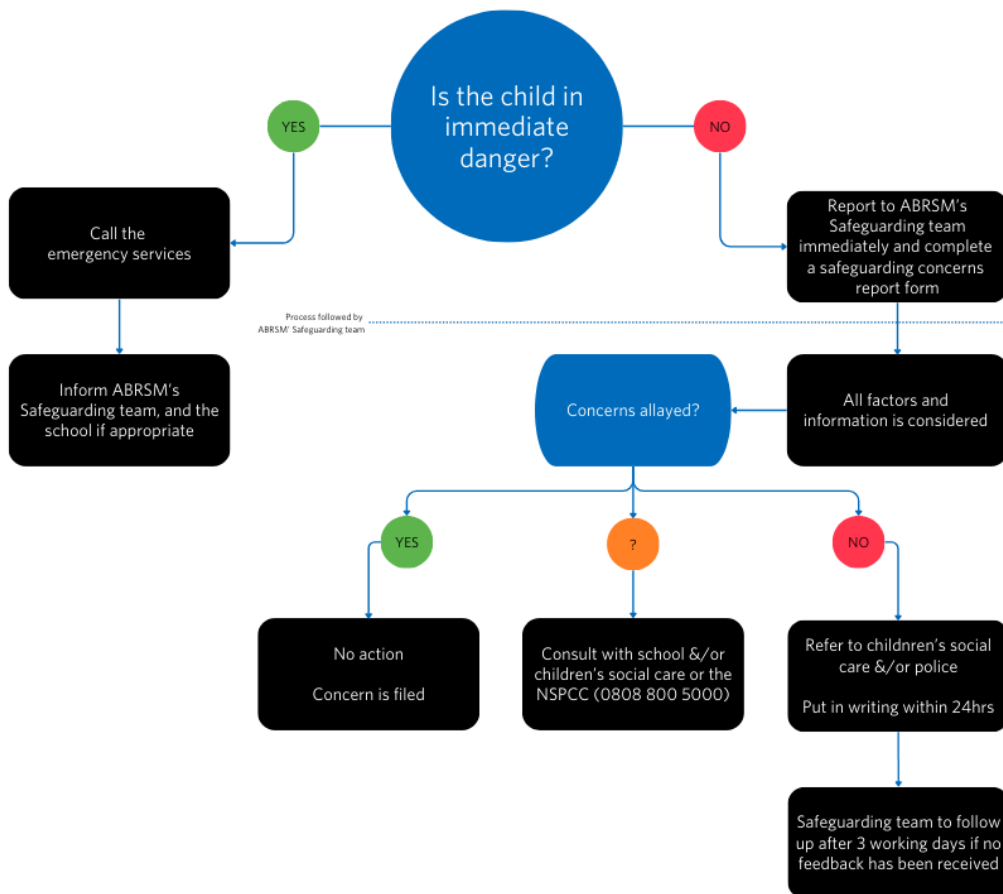
1. Report the concern immediately to the DSL. They will then determine the next steps to take, including consultation with other professional agencies e.g. the NSPCC helpline, in order to determine the best course of action. Consideration will need to be given as to whether the concern involves an immediate risk of significant harm, a clear allegation of abuse by the child, or does not involve an immediate risk of significant harm.
2. It is not the responsibility of ABRSM's workforce to determine if abuse has taken place, rather, they are responsible for reporting on their concerns to the appropriate authorities. Do not delay reporting the matter by trying to obtain more information. Under no circumstances should you examine the child where s/he is alleging injuries - this is a role for medical personnel only.
3. Concerns that are anonymous or that relate to historical concerns (e.g. relating to previous staff, or an incident that happened some time ago) should not be ignored and must be reported to the DSL.
4. A record must be kept of the concern. Use the safeguarding concerns report form for this purpose (see Appendix E). The form can be completed by the person reporting the concern or the DSL.

5. Remember, do not delay reporting the matter by trying to obtain more information. Under no circumstances should you examine the child where s/he is alleging injuries. This is a role for medical personnel only.
6. If you are worried about sharing your concerns about possible abuse within the organisation you should contact the NSPCC on 0808 800 5000 which operates a 24-hour helpline service.
7. If you are reporting concerns about a child outside of the UK, you should report your concerns to the local authority in the country that you are based in, and also inform the DSL and follow the ABRSM policy and procedure. The DSL should contact the NSPCC Helpline, who will also be able to take the information and pass this on to the appropriate authorities.
8. Be mindful of confidentiality and ensure that any information relating to safeguarding is only shared with ABRSM's Safeguarding team and other appropriate authorities.

Responding appropriately to a child sharing his/her concerns (see Appendix D).

4.3 Process: concerns about a child

What to do if you have safeguarding concerns about a child



Concerns about a member of the workforce: Part 5

5.1 What to do if there are concerns or allegations about a member of the workforce

Welfare of the child must remain as the central concern: child abuse can and does occur outside the family setting. Although it is a sensitive and difficult issue, child abuse also occurs within organisations as well as in other settings. This could involve anyone who has the opportunity to have contact with children through their work. It is crucial that those involved in ABRSM are aware of this possibility and that all allegations (current or historical) are taken seriously and appropriate action taken. When dealing with any allegation against a member of the workforce it is vital to keep the welfare of the child as the central concern.

Circumstances for consideration: these procedures for managing cases of allegations or concerns about a member of ABRSM's workforce should be used in respect of all cases in which it is alleged that a staff member has:

- Behaved in a way that has harmed a child, or may have harmed a child
- Possibly committed a criminal offence against or related to a child
- Behaved or may have behaved towards a child in a way that indicates s/he may not be suitable to work with children
- Behaved towards a child or children in a way which indicated s/he may pose a risk of harm to children

Recognising behaviours that cause a concern:

- Spending more time than necessary with a child
- Perceived as having favourites
- Contact outside of ABRSM activities
- Social media used to contact children/share content outside of ABRSM
- Repeated breaches of code of practice

Procedure to follow if an allegation or concern is made about a member of the workforce: there may be instances where there are concerns about the behaviour of any member of the workforce towards a child/ren. The concerns may relate to behaviour that is clearly abusive, e.g. hitting a child or subtler, e.g. isolating a child or sharing personal contact details. It may involve a breach of the ABRSM Code of Practice, or it could be an allegation made by a child, another member of the workforce, or another adult. The Designated Safeguarding Team must inform the Local Authority Designated Officer (LADO⁵) of all cases that meet the criteria within one working day. In any of these circumstances the following procedure should be followed:

1. The workforce is responsible for sharing concerns with the Designated Safeguarding Team who will investigate the seriousness of the allegation/concern.
2. The DSL and deputies, in consultation with the Human Resources Director and/or other senior staff, will determine if the police need to be contacted and/or the LADO based in the local authority of the home address of the member of staff. There may need to be one or more type of inquiry depending on the nature of the concern: a child protection inquiry, police investigation and/or a disciplinary process.
3. In dealing with any allegation the DSL needs to balance: the seriousness of the allegation; the risk of harm to children; possible contamination of the evidence and the welfare of the person concerned.
4. The DSL will require a written account from the member of the workforce/manager hearing the allegation/concern and a summary of any available additional information including the names and addresses of any potential witnesses. Both documents should be signed and dated.
5. Investigations will be dealt with quickly, fairly and impartially and will take into account the relevant policies and code of conduct. The individual should be informed about the

⁵ The LADO exists in England only. The equivalent children's social care body should be contacted if the person lives in any other UK country

allegation or concern as soon as possible but not before consultation with the DSL and children's social care/police where necessary, in respect of timing and content. The police and children's social care investigation will usually need to take place prior to any disciplinary enquiry conducted by ABRSM, and the results may inform ABRSM's subsequent disciplinary enquiry. The outcome of any investigation must be recorded and a copy kept on the member of the workforce's personnel file.

6. Under no circumstances should the accused or their colleagues make contact with or try to retaliate against those that have raised the concern or those involved in the investigation.
7. Those involved in managing the concern are not permitted to discuss the situation with others except for co-operating fully with those performing the enquiry. Failure to comply will likely result in disciplinary action.
8. If an allegation has been made and the accused individual requires advice/support, they should speak with the identified support person. The DSL will keep the member of staff informed of the progress of the case.
9. If the concerns are about the DSL or deputy, they should be raised with the Chief Executive.

Support for the member of the workforce raising a concern: ABRSM will support and protect any member of the workforce who, in good faith, reports his or her concern that a colleague is, or may be abusing a child. If an allegation is made that is found to be malicious or fraudulent ABRSM retains the right to take appropriate action against the individual responsible for making the claim.

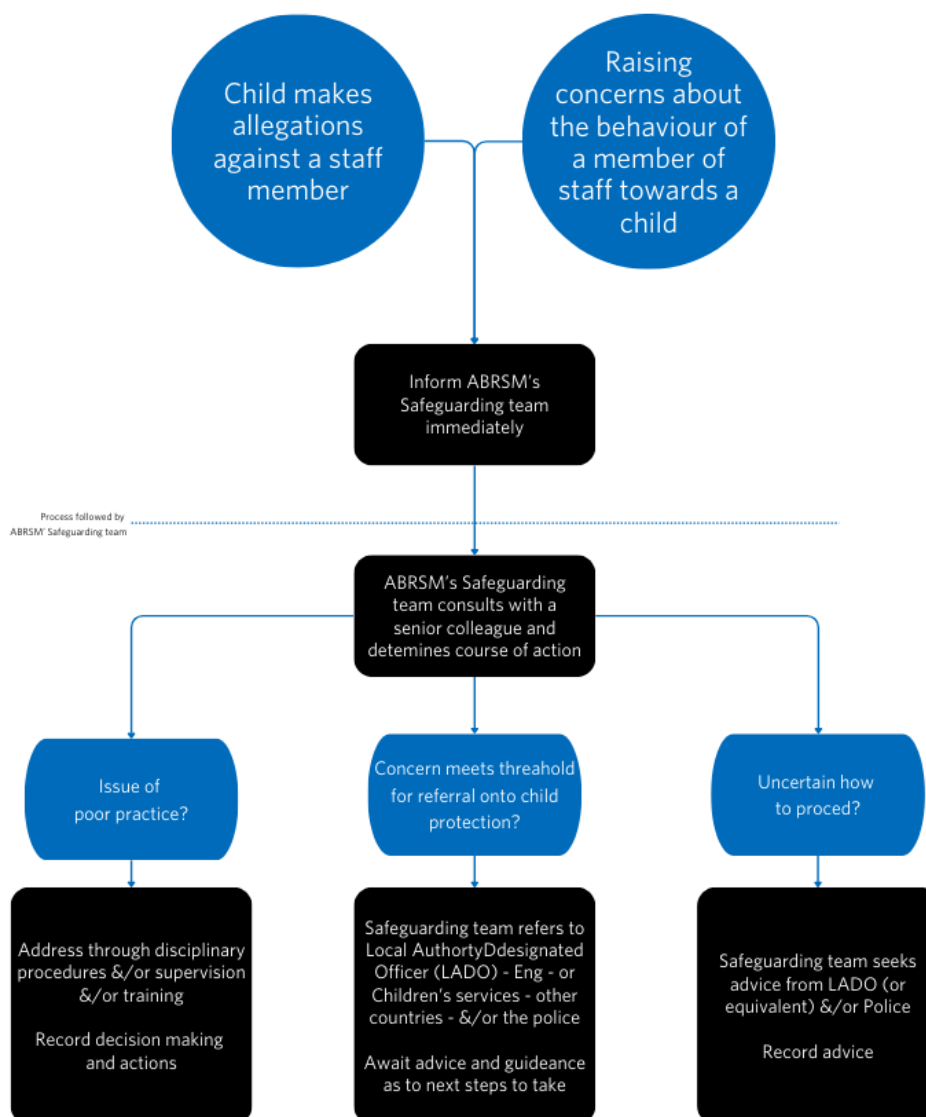
No compromise agreements: the fact that a member of the workforce might tender his/her resignation or cease to provide their services will not prevent an allegation/concern from being followed up in accordance with these procedures and a conclusion reached. A so-called 'compromise agreement' by which an individual agrees to resign and an employer agrees not to pursue disciplinary action and both agree to a form of words to be used in future references, will never be used by ABRSM in situations where there are concerns about their behaviour towards children.

Referral for consideration of barring: if an allegation/concern is substantiated and the person is dismissed, resigns or ABRSM decides to cease to use their services then the DSL in conjunction with the LADO will decide whether a referral should be made to the Disclosure and Barring Service. A referral must always be made if ABRSM has concluded that the individual has harmed a child or poses a risk of harm to children.

Poor practice: There may be circumstances where allegations are about poor practice rather than child abuse but, where there is any doubt, the line manager should consult with the DSL. If the investigation shows that the allegation is clearly about poor practice then ABRSM will determine how best to remedy this, e.g., as part of its performance management, or disciplinary procedure dependent on the nature and seriousness of the practice.

5.2 Process: concerns about a member of the workforce

What to do if there is concern or an allegation is made about a member of the workforce



Designated Safeguarding Lead: Part 6

ABRSM has appointed a Designated Safeguarding Lead (DSL) and three Deputies who are responsible for dealing with any concerns about the safeguarding and protection of children and adults at risk. Please refer to www.abrsm.org for contact details.

The role of the DSL is to:

1. Know which external safeguarding agencies to contact in the event of a child protection concern coming to the notice of ABRSM.
2. Provide information and advice on safeguarding children and adults at risk within ABRSM.
3. Ensure appropriate information is available when making a safeguarding referral and that the referral is made within one working day and confirmed in writing within two working days.
4. Liaise with local safeguarding partnerships and agencies, as appropriate.
5. Keep relevant people within ABRSM informed about any action taken and any further action required; for example, disciplinary action against a member of the workforce.
6. Ensure that a proper record is kept of any referral and action taken, and that this is kept safely and in confidence.
7. Advise ABRSM of safeguarding and child protection training needs.
8. Liaise with specialist safeguarding experts and the National Society for the Prevention of Cruelty to Children (NSPCC) in the development of its policies and practice to ensure the procedures are working and that it complies with current best practice.
9. Report to the Governing Body via the Chief Executive about safeguarding activity on a quarterly basis.
10. Give regular briefings and training to the workforce.
11. Advise the Chief Executive on the governance of safeguarding. See appendix H for a statement on Governance.

Confidentiality and information sharing: Part 7

Sharing information about a child's welfare helps professionals build a clearer picture of the child's life and gain a better understanding of any risks the child is facing. For more information on information sharing and Data Protection, see Appendix F.

Timely information sharing is key to safeguarding and promoting the welfare of children. There should always be a clear and legitimate purpose for sharing a child's personal information. The DSL

will keep a record of the reasons why information is being shared with others. The DSL will also seek advice if there is a possibility that sharing information may put a child at greater risk of harm.

7.1 Disclosure

Data protection legislation allows for the disclosure of personal information without consent of the subject in certain conditions, including for the purposes of the prevention and detection of a crime, for example where there is a child protection concern. Legislation and guidance in the case of sharing of information in safeguarding cases, states: "The Data Protection Act 2018 and GDPR do not prevent, or limit, the sharing of information for the purposes of keeping children safe. Fears about sharing information must not be allowed to stand in the way of the need to promote the welfare and protect the safety of children."⁶

Any report/records regarding abuse shall be kept confidential and any disclosure should be restricted to only those who have proven authority for dealing with the incident (e.g. DSL, police). Staff who need to share 'special category personal data' must be aware that the Data Protection Act 2018 contains 'safeguarding of children and individuals at risk' as a processing condition that allows practitioners to share information without consent, if it is not possible to gain consent, it cannot be reasonably expected that a practitioner gains consent, or if to gain consent, would place a child at risk⁷.

If you are in doubt, please consult the ABRSM's Data Protection Lead.

In all cases where information is shared the following action should be recorded:

- Date and time when the information was shared
- Summary of information shared
- Who the information was shared with
- Whether you are sharing with or without consent
- If sharing without consent, whether the child or family were informed
- How the information was shared and any receipt of it having been received

7.2 Consent

Always seek consent to share information about a child and their family. However, if consent is not given, information can still be shared with relevant professionals under certain circumstances, for example if you are protecting a child from significant harm. The Data Protection Act 2018 and General Data Protection Regulation (GDPR) do not affect this principle.

Children should be given the opportunity to decide whether they agree to their personal information being shared. If a child does not have the capacity to make their own decisions, ask their parent or carer (unless doing so would put the child at risk of harm).

If consent is refused or if it is not possible to seek consent, relevant information can still be shared with relevant professionals if this protects children from significant harm or promotes their welfare.

⁶https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1181955/Keeping_children_safe_in_education_2023.pdf

⁷https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1181955/Keeping_children_safe_in_education_2023.pdf

The DSL will record the steps taken to obtain consent, the reasons that consent was refused (if known) and the reasons for deciding to share the information. The DSL will take advice from local safeguarding bodies and/or the NSPCC.

7.3 Confidentiality

A child should not be promised that anything they disclose will be kept confidential, but that information will need to be shared in order to get the right help for them.

If a child is in need of confidential help and advice direct them to Childline. Calls to Childline are free on 0800 1111 or online at www.childline.org.uk

7.4 Record of safeguarding / child protection concern

Information should be shared with the Designated Safeguarding team as soon as possible.

It is very important that an accurate record is kept of any safeguarding concern and that this is updated each time any actions are taken in relation to that concern. A safeguarding concern report form is provided for this purpose and must be completed by the relevant member of staff. This should be securely sent to the Designated Safeguarding Team e.g. by registered post or by a password-protected email. The DSL will review and note her/his actions, and then store the form securely so that limited staff have access to the information only as necessary.

The form is attached as Appendix E.

7.5 Storage and retention of records

Written reports about safeguarding concerns must be compiled and clearly labelled. Reports must be either stored away in a locked filing cabinet (with restricted access to that filing cabinet) or where reports are stored electronically they should be password-protected and only limited staff should have access.

Information about concerns, allegations and referrals should not be kept in one 'concern log', rather information or items relating to individuals need to be kept in separate files.

Retention of these records is as follows:

Record type	Retention period
Concerns about a child	<p>The records should be kept for six years unless one of the following exceptions* apply. Records:</p> <ul style="list-style-type: none">• Need to be retained because information in them is relevant to legal action that has started• Are required to be kept longer by law• Are archived for historical purposes (where the organisation is party to legal proceedings)• Consist of a sample of records maintained for the purpose of research

	<ul style="list-style-type: none"> • Relate to individuals and providers of services who have, or whose staff have been judged unsatisfactory • Are held in order to provide, for the subject, aspects of their personal history (where records would not be available elsewhere) <p>*where records are kept for more than six years files need to be clearly marked and the reason for the extension clearly identified</p>
Allegation or concerns about adult behaviour (e.g. staff member)	The record should be kept until the person reaches normal retirement age, or for ten years if that is longer.

7.6 Destruction of records

Paper records should be destroyed through shredding and disposed of as confidential waste. Electronic records should be deleted. The destruction of records should be authorised by the DSL and a record should be made of what has been destroyed.

For information about the storage of DBS certificates please see the relevant guidance here: <https://www.gov.uk/government/publications/handling-of-dbs-certificate-information>

See Appendix F Principles for information sharing

7.7 Policy of ownership

The responsibility for the management of the Policy, Procedure and Code of Practice rests with ABRSM's Chief Executive

This document is periodically reviewed and updated to ensure compliance with relevant legislation.

Policy author: ABRSM's Designated Safeguarding Lead (safeguarding@abrsms.ac.uk)

Appendix A: Definitions of abuse

ABRSM is a global music education body based in the UK. We recognise that other countries have differing definitions of abuse. Our primary concern always remains the rights and needs of the child.

UK Statutory guidance⁸ provides the following definitions of abuse. You should be aware that abuse, neglect and safeguarding issues are rarely standalone events that can be covered by one definition or label. In most cases, multiple issues will overlap.

Abuse: a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. 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. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults or by another child or children.

Physical abuse: a form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

Emotional abuse: the persistent emotional, maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless, or unloved, inadequate or valued only insofar as they meet the needs of another person. It may include not giving the child the opportunities to express their views, deliberately silencing them, or 'making fun' of what they say or how they communicated. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability as well as overprotection and limitation of exploration and learning or preventing the child from participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

Sexual abuse: involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

⁸https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1181955/Keeping_children_safe_in_education_2023.pdf

Neglect: the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy, for example, as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide adequate food, clothing and shelter including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate care-givers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Child-on-child abuse: children can abuse other children at any age. Child-on-child abuse is most likely to include, but may not be limited to:

- bullying (including cyberbullying, prejudice-based and discriminatory bullying)
- abuse in intimate personal relationships between children (sometimes known as 'teenage relationship abuse')
- physical abuse which can include hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm
- sexual violence, such as rape, assault by penetration and sexual assault
- sexual harassment, such as sexual comments, remarks, jokes and online sexual harassment⁹

Child Sexual Exploitation (CSE) and Child Criminal Exploitation (CCE): both CSE and CCE are forms of abuse that occur where an individual or group takes advantage of an imbalance in power to coerce, manipulate or deceive a child into taking part in sexual or criminal activity, in exchange for something the victim needs or wants, and/or for the financial advantage or increased status of the perpetrator or facilitator and/or through violence or the threat of violence. CSE and CCE can affect children, both male and female and can include children who have been moved (commonly referred to as trafficking) for the purpose of exploitation¹⁰.

Bullying (in some circumstances bullying can be considered as emotional, physical or sexual abuse) Bullying may be defined as deliberately hurtful behaviour, usually repeated over a period of time, where it is difficult for those bullied to defend themselves. It can take many forms, but the three main types are physical (e.g. hitting, kicking, theft), verbal (e.g. racist or homophobic remarks, threats, name calling) and emotional (e.g. isolating an individual from the activities and social acceptance of their peer group). The damage inflicted by bullying (including bullying via the internet) can frequently be underestimated. It can cause considerable distress to children, to the extent that it affects their health and development or, at the extreme, causes them significant harm (including self-harm).

⁹https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1181955/Keeping_children_safe_in_education_2023.pdf

¹⁰https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1181955/Keeping_children_safe_in_education_2023.pdf

APPENDIX B: Potential indicators of abuse or neglect

The signs listed below may be indicators or signs that abuse has taken place, although some of these indicators can also be caused by other factors, e.g. a bereavement, family breakdown or illness. It is not the role of ABRSM's workforce to decide if abuse or neglect has taken place rather this is a complex task undertaken by skilled professionals working together across agencies. However, if any of these signs are present then these concerns should be shared as outlined in the procedure. In deciding if something may be a concern it is always helpful to think about the child's age, abilities and stage of development too.

[Working Together to Safeguard Children](#) (2018, item 13, p.9) includes a list of what children have said they need from adults and organisations.

The following list of signs below is comprehensive and detailed. It is important to understand that the child's welfare, their mental and physical wellbeing is paramount when evaluating any situation.

Physical abuse:

- Bruising to the face, hands, arms
- Changes in behaviour – fear of parents being approached
- Flinching when approached or touched

Emotional abuse:

- Changes in behaviour – fear of making mistakes, fear of parent being approached

Sexual abuse:

- Acting in a sexually explicit way with adults
- Sexual language
- Saying they have secrets they can't tell anyone about
- Sexual knowledge beyond age/developmental level

Neglect:

- Physical appearance – hunger, inappropriate dress for the conditions
- Lack of adequate or suitable supervision, being left alone

Additional vulnerabilities

It is also important to be mindful that some children are particularly vulnerable to abuse because of their age or their living circumstances or characteristics.

[Children with special educational needs and disabilities \(SEND\) | NSPCC Learning](#)
[Protecting children from domestic abuse | NSPCC Learning](#)

Children who are lesbian, gay, bi, or trans (LGBT)
For more information see:

[Safeguarding LGBTQ+ children and young people | NSPCC Learning](#)

APPENDIX C: Recruitment and selection procedures

ABRSM has adopted appropriate recruitment and selection procedures¹¹ for staff, Local Representatives and examiners in the context of safeguarding and child protection and these include the following:

1. Ensuring that the recruitment and selection policy is up to date.
2. Ensuring that ABRSM's commitment to safeguarding is included in all recruitment and selection materials.
3. Ensuring that we have an up-to-date job/role description and person specification for the role we wish to recruit to.
4. Ensuring that our methods for attracting candidates e.g. advertising contain all necessary information about the role, timetable for recruitment and our commitment to safeguarding.
5. Ensuring that we have compiled a suitable candidate information pack containing all the required information about ABRSM, the role, recruitment timetable, safeguarding policy/statement and application form.
6. Ensuring that each application received is scrutinised in a systematic way by the shortlisting panel in order to agree the shortlist before sending invitations to interview.
7. Ensuring that all shortlisted candidates receive the same invitation to interview, supplying them with all the necessary information.
8. Ensuring that an interview is conducted for all shortlisted candidates based on an objective assessment of the candidate's ability to meet the person specification and job description. For ABRSM employees and examiners this will be a face-to-face interview.
9. Ensuring that all specific questions designed to gain required information about each candidate's suitability have been asked, including those needed to address any gaps in information supplied in the application form.
10. Ensuring that we are able to make a confident selection of a preferred candidate based upon their demonstration of suitability for the role.
11. Ensuring that all appropriate checks have been undertaken on the preferred candidate, including references and DBS checks or local equivalent.
12. Ensuring that the preferred candidate is informed that the offer of employment (including volunteer positions) or examining is conditional on receiving satisfactory information from all necessary checks.

¹¹ Based on *The Protection of Freedoms Act 2012*

APPENDIX D: Responding appropriately to a child making an allegation of abuse

If a child tells you they are experiencing abuse, it is important to reassure them that they've done the right thing in telling you. Make sure they know that abuse is never their fault.

When a child makes a disclosure, make sure that you:

1. Stay calm.
2. Listen carefully to what is said.
3. Tell the child that information will need to be shared in order to keep them safe and to make sure the right people can help.
4. Never talk to the alleged perpetrator about the child's disclosure. This could make things a lot worse for the child.
5. Allow the child to continue at her/his own pace.
6. Ask questions for clarification only and at all times avoid asking questions that suggest a particular answer.
7. Reassure the child that they have done the right thing in telling you.
8. Tell them what you will do next, and with whom the information will be shared.
9. Record in writing what was said, only recording the facts as the child presents them, using the child's own words as soon as possible - note the date, time, any names mentioned, to whom the information was given and ensure that the record is signed and dated.
10. It is important to remember that the person who first encounters a case of alleged abuse is not responsible for deciding whether abuse has occurred. That is a task for the professional child protection agencies, following a referral from the Designated Safeguarding Team in the organisation.
11. Submit your report to the Designated Safeguarding Team at ABRSM.

Hearing about abuse can be upsetting. You can get support from the Designated Safeguarding Team or the NSPCC.

APPENDIX E: Safeguarding concerns report form

When completing this form please consider the following:

- Records should be as factual as possible
- If stating an opinion, make sure it is clearly differentiated from fact
- Use the child's own words if possible

Remember, you do not have to be certain that a child has been abused nor should you investigate yourself. Sending your concern to the safeguarding team means that they can liaise with others to determine the next steps.

The DSL will liaise with other agencies as appropriate to establish the next course of action.

1. Child's name	
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2.	Child's age / DOB	
3.	Date of exam	
4.	Venue	

1.	What has happened so far? If a child has approached you, use their own words as much as possible to describe what has happened.
2.	How has this come to your attention? Have you witnessed something directly or are you reporting someone else's information? Has a child approached you directly?
3.	Were any other adults or children involved? Did anyone else observe what happened?
4.	Are there any other factors you would like to note here (e.g. was English the child's first language)?
5.	Are you making this report with the consent of the child/informant?

10.	Name of parent/ guardian	
11.	Address/ telephone number	
12.	Your name	
13.	Your job title	
14.	Your signature	
15.	Date	

APPENDIX F: Principles for information sharing

The government ('Information Sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers,' July 2018) has produced 'seven golden rules' to support organisations and their workers when making decisions about when it is appropriate to share information with others, these are:

1. Remember that the General Data Protection Regulation (GDPR), Data Protection Act 2018 and human rights law are not barriers to justified information sharing but provide a framework to ensure that personal information about living individuals is shared appropriately.

2. Be open and honest with the individual (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.
3. Seek advice from other practitioners, or your information governance lead, if you are in any doubt about sharing the information concerned, without disclosing the identity of the individual where possible.
4. Where possible, share information with consent, and where possible, respect the wishes of those who do not consent to having their information shared. Under the GDPR and Data Protection Act 2018 you may share information without consent if, in your judgement, there is a lawful basis to do so, such as where safety may be at risk. You will need to base your judgement on the facts of the case. When you are sharing or requesting personal information from someone, be clear of the basis upon which you are doing so. Where you do not have consent, be mindful that an individual might not expect information to be shared.
5. Consider safety and well-being: base your information sharing decisions on considerations of the safety and well-being of the individual and others who may be affected by their actions.
6. Necessary, proportionate, relevant, adequate, accurate, timely and secure: ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those individuals who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely
7. Keep a record of your decision and the reasons for it – whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose.

APPENDIX G: Referral contact points for children across the UK

The majority of ABRSM's workforce lives in England and hence this safeguarding document has been framed around the English law and terminology. However, ABRSM recognises that there are differences within each devolved nation both in terms of legislation and the terminology used to describe children services, so this additional guidance is provided for clarification. If anyone is in any doubt about who best to refer to, they should ring the 24-hour NSPCC Helpline for advice on 0808 800 5000. If a situation arises at an event where a child is at immediate risk of harm (e.g. child injured, child refusing to go home, parent unfit to care etc.) then the local children's social care team/police should be contacted rather than those in the area where the child lives. Equally this applies to urgent medical attention which should be sought from the nearest hospital to the event.

Country	Agencies to contact	Telephone numbers
ENGLAND		
Concerns about a child	Children's social care in the local authority of the child's home address	A telephone number including the out of hours service should be publicly available on each local authority's website.
	Police (in an emergency) - Local child protection investigation unit	Should be publicly available or 999 for emergency
	NSPCC Helpline	0808 800 5000
Concerns about a member of staff/volunteer	The Local Authority Designated Officer (LADO) for the child's home address	Based within local authority children's social care service
	Police - Local child protection investigation unit (CPIU)	
Reporting concerns online: https://learning.nspcc.org.uk/child-protection-system/england/		

Country	Agencies to contact	Telephone numbers
WALES		
Concerns about a child or Concerns about a member of staff/volunteer	Local authority child protection team in the area where the child lives	See a list of all local councils in Wales from DirectGov
	NSPCC Helpline	0808 800 5000
	Police (in an emergency) - Local child protection investigation unit	Should be publicly available or 999 for emergency
Reporting concerns online: https://learning.nspcc.org.uk/child-protection-system/wales/		

Country	Agencies to contact	Telephone numbers
SCOTLAND		
Concerns about a child or Concerns about a member of staff/volunteer	Local authority child protection social work team in the area where the child lives	See a list of all local councils in Scotland from the Scottish Government's website

	The National Child Protection Line in Scotland	0800 022 3222
	Police (in an emergency) - Local child protection investigation unit	Should be publicly available or 999 for emergency
	NSPCC Helpline	0808 800 5000
Reporting concerns online: https://learning.nspcc.org.uk/child-protection-system/scotland/		

Country	Agencies to contact	Telephone numbers
NORTHERN IRELAND		
Concerns about a child or Concerns about a member of staff/volunteer	Gateway Teams for Children's Social Work at the Health and Social Care Trust in the area the child lives	A list of these is available on the 'Health and Social Care in Northern Ireland' website
	Police Services of Northern Ireland	In an emergency dial 999 (an emergency is where serious injury has been caused or a crime is in progress and the suspects are at or near the scene.) Non-emergency and general enquiries telephone number 0845 600 8000
	NSPCC Helpline	0808 800 5000
Reporting concerns online: https://learning.nspcc.org.uk/child-protection-system/northern-ireland/		

Abuse online:

Information, advice and reporting of abuse happening in an online environment can be found here: <https://www.ceop.police.uk/safety-centre/>

For referral contact points for children outside the UK please use the following links:

<https://www.keepingchildrensafe.org.uk/>
<http://www.safechilduk.info/Charity/charity-safeguarding-home.html>

<https://www.gov.uk/government/publications/safeguarding-children-and-young-people/safeguarding-children-and-young-people>
<https://www.nspcc.org.uk/preventing-abuse/child-protection-system/northern-ireland/reporting-your-concerns/>

APPENDIX H: Safeguarding Governance Structure

Governing Body

- Receives risk review reports and internal audit reports from the Audit and Risk Committee, and the Chief Executive (CEO) immediately informs the Chair of the Governing Body of any serious safeguarding matter
- Appoints the Audit and Risk committee

Audit and Risk committee

- Appoints a Trustee to liaise with the CEO

Chief Executive

- Chairs the Safeguarding Review Committee
- Appoints and manages a Designated Safeguarding Lead (DSL) and Deputy DSL
- Ensures all Directors are aware of their safeguarding responsibilities

Safeguarding Review Committee (SRC)

- Chaired by CEO
- Membership: HR Director; Global Operations Director; Head of the Office of the Chief Executive; Head of Chief Examiner Resources; Designated Safeguarding Lead; Deputy Designated Safeguarding Lead
- Meets quarterly to ensure workforce is well briefed and policy is applied consistently throughout ABRSM
- Manages incident referrals in accordance with policy and procedures
- Receives reports on disciplinary action taken against those who breach ABRSM policies or procedures
- Develops a safeguarding training plan

Designated Safeguarding Lead or Deputy Designated Safeguarding Lead

- Acts as first point of contact for safeguarding concerns
- Ensures all safeguarding incidents or issues are promptly reported to the SRC and its Chair
- Co-ordinates the management of DBS disclosures
- Publishes ABRSM's safeguarding policy and procedures
- Submits quarterly report to CEO
- Ensures workforce are aware of their safeguarding responsibilities

ABRSM workforce

- Understand and comply with ABRSM's safeguarding policy and code of practice
- Complete any appropriate training
- Where appropriate, have DBS disclosure processed in accordance with ABRSM policy

APPENDIX I: Glossary of terms used

Adults at risk: An adult at risk of abuse or neglect is defined as someone who has needs for care and support, who is experiencing, or at risk of, abuse or neglect and as a result of their care needs - is unable to protect themselves' - The Care Act (2014). More information concerning adults at risk can be found here: A Guide to Safeguarding Adults - Ann Craft Trust

Assessment of risk outside the home (contextual safeguarding): as well as threats to the welfare of children from within their families, children may be vulnerable to abuse or exploitation from outside their families particularly as they get older. These extra-familial threats might arise at school and other educational establishments, from within peer groups, or more widely from within the wider community and/or online. These threats can take a variety of different forms and children can be vulnerable to multiple threats, including exploitation by criminal gangs and organised crime groups such as county lines; trafficking, online abuse; teenage relationship abuse; sexual exploitation and the influences of extremism leading to radicalisation.

Child or adult protection: this is part of safeguarding and promoting welfare. It refers to the activity that is undertaken to protect specific children or adults who are suffering, or at risk of suffering, significant harm. Various types of abuse (e.g. physical, emotional, sexual or neglect) may constitute significant harm.

Children's Social Care: every local authority in the UK has a statutory duty to protect and promote the welfare of children in need in its area. This may be achieved through the provision of a range of services but includes working closely with children and their parents, relatives or other carers and also with other organisations. The name of the department may vary from one authority/country to another - children's social care, children's services etc. - however there will always be a dedicated department within each local authority responsible for assessing child welfare concerns.

Local Authority Designated Officer (LADO): the LADO works within Children's Social Services Departments in the UK and should be alerted to all cases in which it is alleged that a person who works with children has:

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

The LADO captures concerns, allegations or offences and will provide advice and guidance to the employer. They help co-ordinate information-sharing with the right people and will also monitor and track any investigation, with the aim to resolve it as quickly as possible.

Local Safeguarding Adults Board: this refers to the local statutory body responsible for leading on adult safeguarding arrangements, coordination and effectiveness. Each Board comprises members from the local authority, the National Health Service and the Police and others. It ensures appropriate arrangements are in place for the safeguarding of adults at risk who are users of local health services, social housing, are in prison or are at risk of abuse or self-harm.

Local Safeguarding Partnership: in the UK this comprises an equal partnership of the local authority, the clinical commissioning group, and the chief officer of police, based on local authority

boundaries, one partnership per local authority. It is responsible for co-ordinating their safeguarding services; acting as a strategic leadership group in supporting and engaging others; and implementing local and national learning including from serious child safeguarding incidents.

Position of trust: Sexual offences legislation provides that any sexual activity involving children under 16 is unlawful. The primary motivation for legislation which addresses the abuse of positions of trust is the need to protect young people aged 16 and 17 who, despite reaching the age of consent for sexual activity, are considered to be vulnerable to sexual abuse and exploitation, in defined circumstances. This includes sexual activity and relationships with adults who hold a position of trust, responsibility or authority in relation to them and, as a result, have a considerable amount of power and influence in their lives. The law defines specific roles and settings where sexual activity between 16 and 17-year-olds and those in positions of trust, responsibility or authority constitutes a criminal offence.

Safeguarding adults: means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure the adult's welfare is promoted including where appropriate, having regard to their views, feelings and beliefs in deciding on any action.