MyBallet Academy Safeguarding Policy

At MyBallet Academy, we take the safety and well-being of all our students seriously. We believe it is in everyone's best interest, as caring human beings, to look out for one another. Creating a safe, respectful, and nurturing environment allows every child and adult to enjoy dance and thrive with confidence.

This policy outlines our approach to safeguarding and protecting children, young people, and vulnerable adults who attend MyBallet Academy (MBA).

Our Commitment

- We are committed to providing a safe and positive environment for all.
- We promote kindness, respect, and inclusion in every class.
- We believe that safeguarding is everyone's responsibility, not just the school's.
- We act promptly and appropriately on any concerns raised.

Code of Conduct

To ensure a safe and respectful community:

- No bullying is tolerated towards anyone, under any circumstances.
- No physical violence is tolerated, in or outside of class.
- No bad or offensive language is tolerated, in or outside of class.
- Teachers and assistants maintain professional boundaries with all students and parents.
- Students are encouraged to speak up if they ever feel uncomfortable or unsafe.

Reporting a Concern

If you, a teacher, a student, or a parent witness or suspect any form of child abuse, neglect, bullying, or inappropriate behaviour, please take the following steps:

- 1. Contact Miss Lydie, our Designated Safeguarding Lead (DSL), as soon as possible. She will listen carefully, take detailed factual notes, and take appropriate action; including contacting the relevant authorities if necessary.
- 2. Complete a Safeguarding Incident Form (available below or upon request).
- 3. If you believe a child is in immediate danger, you can also:
 - Call the Police (999)
 - Contact your Local Council's Children's Services via GOV.UK Report child abuse to your local council
 - o Call the NSPCC Helpline on 0808 800 5000 or email help@nspcc.org.uk

Confidentiality

All safeguarding concerns are handled sensitively and in confidence. Information will only be shared with relevant authorities and individuals when it is necessary to protect someone's safety.

Our Duty of Care

Every member of staff at MyBallet Academy has a responsibility to:

- Put the welfare of children first.
- Remain vigilant and aware of potential signs of harm or distress.
- Report any concern, no matter how small it may seem.
- Complete safeguarding training and refresh it regularly.

Together, we can create a safe and supportive environment where every dancer can flourish in body, mind, and spirit.



SAFEGUARDING INCIDENT FORM

YOUR DETAILS:	
Name	
Job role	
Knowledge of and relationship to the child/acrelevant)	lult at risk (where known /
Knowledge of and relationship to the (alleged known / relevant)	l or potential) abuser (where
Contact address (if not an employee of the RA	AD)
Telephone number(s)	
Email	
Date you first became aware of the incident	
If you did not witness the incident yourself, ex of it	plain how you became aware
CHILD/ADULT AT RISK DETAILS (AS KN Full name	OWN/RELEVANT):
Date of birth	Gender
Home address	1
Telephone numbers(s)	
Details of disability (if applicable)	
Parent / guardian's names and contact details	5

Social / care workers' names and contact details		
Details of any previous allegations / incidents involving this child / adult at risk (where known)		
INCIDENT DETAIL (COMPLETE BASED ON KNOWN/RELEVANT INFORMATION):		
Location	Date and time	
the same individuals	cisely It at risk where applicable lating to the same incident or involving ons e.g. description of visible bruising, k, emotional state) additional blank/lined paper as	

Were there any witnesses to the incident? If yes, please give details, including names and where applicable job titles			
Have the parents / carers of the child / adult at risk been informed? If yes, give details and if not, state the reason			
Other actions (including safeguarding measures) taken so far			
Please tick if this is considered a low-level concern that you feel is unlikely to require action other than continued monitoring			
ALLEGED/POTENTIAL ABUSER'S DETAILS (AS KNOWN/RELEVANT):			
Full name			
Date of birth/age	Gender		
Relationship with child / adult at risk			
Home address			
Telephone numbers(s)	Disability (if applicable)		
Occupation / role / job title			

Is the alleged / potential abuser an RAD employee, staff member or

Name and address of the place where the person works

volunteer? (If yes, state applicable category)

COMPLETE THE SECTION BELOW IF THE ALLEGED/POTENTIAL ABUSER IS RELATING TO AN RAD EMPLOYEE, MEMBER OR VOLUNTEER

Name
Job Title
Details of any previous allegations, complaints or concerns in relation to this person (not necessarily safeguarding related)
Does this person work with children / adults at risk in any other capacity? If yes, please give details
Is the person aware that an allegation, complaint or concern has been raised?

Referrals related to RAD employees, staff member or volunteers are followed up with a telephone call to the Duty LADO officer.

Please ensure that you have completed all sections of the form before submission.

I acknowledge that the information provided on this form is complete and accurate as far as I am aware, and the information provided will remain strictly confidential between myself and the appropriate reporting channels.

SIGNATURE OF PERSON COMPLETING THIS FORM: DATE: