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Our Safeguarding Team

Designated Safeguarding Officer (DSO)

Name: Alexia Quin

Job Title: Director

Phone: 020 7735 3231

Email: alexiaquin@musicastherapy.org

Deputy Designated Safeguarding Officer (DDSO)

Name: Henry O'Brien

Job Title: Operations Officer

Phone: 020 7735 3231

Email: henryobrien@musicastherapy.org

Lead Trustee for Safeguarding (LTS)

Name: Lucy Swanson

Job Title: Lead Trustee for Safeguarding

Email: lucyswanson@musicastherapy.org

Note: Project contributors working overseas will have a mobile phone number they can use at any time during their work with us. This phone may also be used for reporting concerns.

Quick reference- Safeguarding Thresholds

These thresholds should not be used in place of the full guidance in this policy but are provided here for ease of reference.

- **Immediate danger** [report to emergency services/ locally]
- **Suspected abuse** [report to DSO]
- **General unease/ concerns** [record and discuss with DDSO / DSO]

Please consult the safeguarding procedures in Sections 3.i. & 3.ii for full guidance.

SUMMARY

Music as Therapy International provides training and support to independent care practitioners worldwide, so that they may use techniques and activities informed by basic principles of music therapy in their work with children, young people and adults with care and support needs (hereafter referred to as “adults at risk”).

We believe strongly that the welfare of the children, young people and adults at risk we encounter through our work is the responsibility of everyone who works for *Music as Therapy International*, regardless of their role. Our understanding of this is detailed in Section 1.

The purpose of this policy is:

- To ensure the welfare and protection of children, young people and adults at risk with whom *Music as Therapy International* works directly.
- To ensure the charity’s Trustees, Employees (including Freelance Workers), Project Contributors and Volunteers understand the overarching principles that guide our approach to safeguarding and the processes we follow to ensure we all act appropriately in response to any concern around abuse.
- To commit to complying with our procedures in practice, monitoring and reporting on this, and reviewing our policy regularly.

It applies to the charity’s Trustees, employees (including freelance workers), Project Contributors and volunteers who have been engaged to work with *Music as Therapy International*. It has been drawn up on the basis of law and guidance detailed in Appendix 2. A glossary of terminology used is provided in Appendix 1.

It is of note that all our projects are delivered in partnership with established care settings and it is unusual for anyone working with *Music as Therapy International* to be in contact with any children, young people and adults at risk on their own. Despite this, we are committed to ensuring adequate training to protect the welfare of children, young people and adults at risk is undertaken by our employees (including Freelance Workers), Project Contributors and Volunteers. Our approach to recruitment, risk assessment and project preparation is detailed in Section 2.iii.

In practice, delivery of our projects means working closely with the local care setting in line with their safeguarding policy and guidance if ever we have concerns about the welfare of any child, young person or adult at risk we encounter. The procedure we follow when we are working in places with safeguarding policies in place is detailed in Section 3i).

However, some of our projects take us to countries where safeguarding policies are not always in place and local practice may not be congruent with UK standards and procedures. This does not absolve us of our responsibilities regarding the welfare of children, young people and adults at risk with whom we work directly but does mean we need to be sensitive to the local context. The procedure we follow in such places is detailed in Section 3ii).

This policy should be read alongside our policies and procedures on our Duty of Care to Project Contributors, Equal Opportunities, Consent, Privacy and Data Protection, and our Press & Media Guidelines.

SECTION 1: Overarching Principles of our Approach

The welfare of the children, young people and adults at risk we encounter through our work is the responsibility of everyone who works with *Music as Therapy International*, regardless of their role.

We recognise that:

- The welfare of children, young people and adults at risk is paramount.
- All people, regardless of age, disability, gender, racial and ethnic heritage, religious belief, sexual orientation or identity, have a right to equal protection from all types of harm or abuse.
- Some people experience heightened vulnerability because of the impact of previous experiences, their level of dependency, communication needs or other issues.
- Working in partnership with children, young people and adults at risk, together with their parents, carers and other agencies is essential to promoting people's welfare.
- Although our projects take us to countries where safeguarding policies are not always in place and local practice may not be congruent with UK standards and procedures, this does not absolve us of our responsibilities regarding the welfare of children, young people and adults at risk with whom we work directly.
- There is a real risk that abuse can escalate when it is challenged and so investigating concerns and sharing information relating to concerns must be approached with utmost sensitivity.

We will seek to keep children, young people and adults at risk safe by:

- Valuing them, listening to and respecting them.
- Appointing a Designated Safeguarding Officer (DSO) for children, young people and adults at risk, a deputy (DDSO) and a Lead Trustee for Safeguarding (LTS). Contact details for these individuals are given on p.2 (Key Contacts).
- Following the procedures for safe recruitment, risk assessment and project preparation (See Section 2iii).
- Adopting safeguarding practices and reporting concerns by following our procedures (See Sections 3i or 3ii).
- Providing effective management for Trustees, Employees (including Freelance Workers), Project Contributors and Volunteers through supervision, support and training, detailed in Section 2.
- Recording and storing personal information relating to the children, young adults and adults at risk with whom we work, professionally and securely (See Section 3iv).
- Following our procedures when identifying and sharing concerns and relevant information with agencies that need to know, and involving children, young people, parents, families and carers appropriately (See Section 3v).
- Following our procedures to keep the children, young people and adults at risk with whom we work physically and emotionally safe when we are working with them directly, as detailed in Section 3.
- Using our procedures to manage any allegations against Trustees, employees (including freelance workers), Project Contributors and volunteers relating to our work with children, young people and adults at risk appropriately, as detailed in Section 4.
- Providing guidance on making complaints, bully, harassment and whistleblowing as detailed in Section 4.
- Monitoring our compliance to our Safeguarding Policy with the measures detailed in Section 5.

SECTION 2: Keeping children, young people and adults at risk from harm safe

Music as Therapy International is committed to keeping children, young people and adults at risk from harm safe by ensuring:

There are identified people within the organisation with lead responsibility for safeguarding

AND

Procedures for safe recruitment and training are followed when appointing trustees, and employees (including freelance workers), Project Contributors and volunteers who have been engaged to undertake work for Music as Therapy International which involves direct contact with – or responsibility for - children, young people or adults at risk.

i) Who in Music as Therapy International has lead responsibility for safeguarding?

Designated Safeguarding Officer (DSO): Alexia Quin

Our Designated Safeguarding Officer is the first point of contact for any safeguarding concerns.

Deputy Designated Safeguarding Officer (DDSO): Henry O'Brien

In the absence of our Designated Safeguarding Officer, safeguarding concerns should be brought to our Deputy Designated Safeguarding Officer.

If the Designated Safeguarding Officer is known to be unavailable during any period when the charity has employees (including freelance workers), Project Contributors and volunteers engaged in undertaking work which involves direct contact with – or responsibility for - children, young people or adults at risk, arrangements will be made to ensure the DDSO is “on duty” and the involved employees will know of these arrangements.

Lead Trustee for Safeguarding (LTS): Lucy Swanson

Our Lead Trustee for Safeguarding represents our Board of Trustees who have primary responsibility for safeguarding within the charity and managing risk.

Director: Alexia Quin

As well as being our Designated Safeguarding Officer, our Director actively contributes to Action Planning when we are working in places without safeguarding policies in place, leads on investigation into allegations against employees and has responsibility for safeguarding compliance.

ii) Safeguarding Team Responsibilities

Our safeguarding team is there to:

- Ensure that all Trustees, employees (including freelance workers), Project Contributors and volunteers are aware of what they should do and who they should go to if they have concerns that a child, young person or adult at risk may be experiencing, or has experienced abuse or neglect.
- Ensure that concerns are acted upon appropriately and clearly recorded.
- Provide supervision and support to the person who is raising a safeguarding concern.
- Ensure actions identified in response to safeguarding concerns or allegations against employees are followed up.
- Act promptly to ensure any allegations made against any Trustees, employees (including freelance workers), Project Contributors and volunteers are fully investigated, and to protect any affected children, young people or adults from risk or harm.
- Consider recommendations to improve our Safeguarding Processes which may arise from any instance of raising a safeguarding concern.
- Reinforce the utmost need for confidentiality and to ensure that Trustees, employees (including freelance workers), Project Contributors and volunteers are adhering to good practice with regard to confidentiality and security.

- Give support and afforded protection to Trustees, employees (including freelance workers), Project Contributors and volunteers if necessary under the Public Interest Disclosure Act 1998 ensuring they are dealt with in a fair and equitable manner and kept informed of any action that has been taken and its outcome.
- Manage risk.
- Ensure compliance with our Safeguarding Policy in practice.

All contact details are given in the Summary section of this policy (p.2).

iii) Procedures for safe recruitment and training

What do the Levels referred to in this section mean?

Level 2 safeguarding training is the minimum level encouraged for nonclinical and clinical staff who have contact (however small) with children, young people, adults at risk of harm, and/or parents/carers and/or adults who may pose a risk to children or adults at risk of harm.

Level 3 safeguarding is relevant to clinical staff working with children, young people, adults at risk of harm, and/or their parents/carers and/or any adult who could pose a risk to children or adults at risk of harm and who could potentially contribute to assessing, planning, intervening and/or evaluating the needs of the person at risk of harm and parenting capacity (regardless of whether there have been previously identified safeguarding concerns or not)¹.

a) Recruitment requirements

Our approach to recruitment includes careful consideration of different levels of screening, training and support required by individuals depending on the extent to which their engagement in the work of *Music as Therapy International* involves direct contact with – or responsibility for - children, young people or adults at risk, as detailed in the table below.

NB Unless stated otherwise, “All employees” includes Trustees, core team members, freelance workers, Project Contributors and volunteers.

	All employees	Trustees	All employees who work in direct contact with - or have responsibility for - children, young people or adults at risk	Anyone engaged to work as a professional Music Therapist
Personal Identification documents, one of which must be photographic	✓	✓	✓	✓
Evidence of their right to work/volunteer in the UK ²	✓	✓	✓	✓
Two professional references	✓	✓	✓	✓
Evidence of a clear enhanced DBS Check within 3 years ³		✓	✓	✓
Evidence of at least Level 2 safeguarding training undertaken within the past 3 years ³			✓	✓
Evidence of registration with the Health and Care Professionals Council ³				✓
Evidence of registration with the British Association for Music Therapists				Desirable

Where an employee's role requires evidence of prior safeguarding training but this is not available to them (for reasons of financial hardship, language spoken or geographical location), comparable

¹ Safeguarding Children and Young People: Roles and Competencies for Healthcare Staff. Royal College of Paediatrics and Child Health 2019

² Where work will be taking place in the UK or payment will be made to someone resident in the UK

³ Appropriate alternatives may be sought for International Music Therapists for whom these requirements are not locally available

training may be provided by *Music as Therapy International*, supported with written resources, to include:

- Full briefing on our Safeguarding Policy and procedures (and any known existent local safeguarding procedures) prior to project delivery
- Recognising the signs and symptoms and abuse
- How to respond to people who have experienced or are experiencing abuse
- Information sharing, confidentiality and data protection

b) *Following appointment*

Once appointed, all employees are provided with access to all our policies and specific induction is given to ensure their understanding of those which are of greatest relevance to their role.

Anyone whose work with us involves potential direct contact with – or responsibility for - children, young people or adults at risk, is given focused induction to ensure their understanding of our Safeguarding Policy.

Where projects are delivered in care settings with their own safeguarding policy and guidance in place, this information is shared with those employees (including Freelance Workers), Project Contributors and/or Volunteers, involved in project delivery (including local safeguarding lead contact information). A Project Handbook is also shared containing all information relating to safe Project Delivery and our Duty of Care to Project Contributors and Project Partners.

Where projects are delivered in countries outside the UK, a detailed Risk Assessment is undertaken and reviewed with Project Contributors, within a thorough Briefing Meeting prior to project delivery.

c) *Safeguarding team*

The DSO, DDSO, LTS, the Director and the Training & Innovation Co-ordinator will have access to a minimum of Level 2 Safeguarding Training every 3 years.

Please turn over for SECTION 3: Safeguarding Procedures

SECTION 3: Safeguarding Procedures

We recognise our responsibility to promote the welfare of all children and adults at risk and to keep them safe. We are committed to practising in a way that protects them and have clear procedures to support this.

i) Safeguarding Procedure when we are working in places with safeguarding policies in place

Safeguarding Procedure

When working in places **WITH** safeguarding policies

1 IDENTIFY & OBTAIN

Identify local safeguarding lead and obtain copy of local safeguarding policy. Store in Safeguarding folder in charity's secure cloud storage.

When: During project planning or at start of delivery **Who:** Team Lead or DSO



2 SHARE

Share local safeguarding contacts and policy with all project team members in the Project Handbook and Resources folder.

When: During project planning or at start of delivery **Who:** DSO



3 DOCUMENT & REPORT

Document and report any safeguarding concerns to local safeguarding lead and DSO (or DDSO) **simultaneously**.

When: Immediately concern is raised **Who:** Any employee



4 REPORT TO LTS

Report to Lead Trustee for Safeguarding.

When: Immediately concern is raised **Who:** DSO or DDSO



5 FOLLOW LOCAL PROCEDURE

Follow local safeguarding policy and guidance as required (while maintaining Mast's Safeguarding Standards). Document and report actions and outcomes to DSO.

When: As directed locally **Who:** Any employee



6 UPDATE LTS

Report actions and outcomes to LTS.

When: As soon as known, and update as required **Who:** DSO or DDSO



7 REPORT TO TRUSTEES

Report to Board of Trustees.

When: At next Trustees meeting (unless earlier advised by LTS) **Who:** DSO or DDSO



CHARITY COMMISSION (IF SERIOUS INCIDENT)

Report to Charity Commission if Director and Trustees consider concern to be a "Serious Incident" (as per Charity Commission guidance, 2019).

When: Immediately this is indicated **Who:** DSO

EMERGENCY: In the rare situation where there are no local practitioners available to work with to follow local emergency procedures and you judge a child, young person or adult to be at life-threatening risk, contact the emergency services IMMEDIATELY.

*** In the rare situation where there are no local practitioners available to work with to follow local emergency procedures and you judge a child, young person or adult to be at life-threatening risk, the employee should contact the emergency services IMMEDIATELY.**

ii) Safeguarding Procedure when we are working in places without safeguarding policies in place

Safeguarding Procedure

When working in places **WITHOUT** safeguarding policies

1 ASCERTAIN NO POLICY EXISTS

Confirm there are NO local safeguarding policies in place.

When: During project planning or at start of delivery **Who:** Team Lead or DSO



2 IDENTIFY KEY CONTACT

Identify who should be contacted about safeguarding concerns (Key Contacts). Share this information with all project team members in Project Handbook and Resources folder.

When: During project planning or at start of delivery **Who:** Team Lead or DSO



3 DISCUSS, CONSIDER & DOCUMENT

Discuss safeguarding concern with all directly involved in project delivery.

Consider the issue carefully given local context.

Document your concern, risk assessment, and potential actions in best interests of the person involved.

When: Immediately concern is raised **Who:** Any employee and DSO (or DDSO)



4 REPORT & ACTION PLANNING

Report to DSO (or DDSO) and LTS. Jointly decide best action through Action Planning.

Action Planning may include:

- Be aware of differences between local and UK practices
- Continue to monitor situation
- Seek opportunities for safeguarding conversations with Key Contact
- Raise concern with local Key Contact(s)
- Identify external agency to report to
- Share information with international bodies
- Report to Police (UK and/or overseas)

Agree timeframe and who is responsible for each action.

When: Immediately concern is raised **Who:** Any employee, DSO (or DDSO), and LTS



5 FOLLOW UP & DOCUMENT

Follow up on actions decided in Action Planning. Document and report outcomes to all involved in Action Planning.

When: Within agreed timeframe **Who:** Any employee and/or DSO (or DDSO)



6 REPORT OUTCOMES TO LTS

Report actions and outcomes to LTS and DSO.

When: As soon as known, and update as required **Who:** DSO or DDSO



7 REPORT TO TRUSTEES

Report to Board of Trustees.

When: At next Trustees meeting (unless earlier advised by LTS) **Who:** DSO or DDSO



CHARITY COMMISSION (IF SERIOUS INCIDENT)

Report to Charity Commission if Director and Trustees consider concern to be a "Serious Incident" (as per Charity Commission guidance, 2019).

When: Immediately this is indicated **Who:** DSO

EMERGENCY: In the rare situation where there are no local practitioners available to work with to follow local emergency procedures and you judge a child, young person or adult to be at life-threatening risk, contact the emergency services IMMEDIATELY.

*** In the rare situation where there are no local practitioners available to work with to follow local emergency procedures and you judge a child, young person or adult to be at life-threatening risk, the employee should contact the emergency services IMMEDIATELY.**

iii) Supervision and Support

The DSO and DDSO are available to provide *ad hoc* supervision for anyone directly involved in the work of the charity (i.e. a Trustee, Employee, Freelance Worker, Project Contributor and/or Volunteer) should they encounter a specific safeguarding concern, or think they might have encountered something which could indicate safeguarding risk. This mechanism is discussed during employment induction and/or in a Briefing Meeting prior to project delivery.

It is never too early to start a discussion with our safeguarding team.

The charity maintains weekly contact with all those who have been engaged to undertake work for *Music as Therapy International* which involves direct contact with – or responsibility for - children, young people or adults at risk. Contact happens through whichever channel is most appropriate (e.g. telephone, email, text or WhatsApp) and they are also offered a confidential weekly support call during project delivery.

Anyone directly involved in project delivery is directed to follow the organisation's safeguarding procedures where appropriate. Additionally, they are asked every week whether they have encountered any safeguarding concerns. If safeguarding concerns are identified, the DSO (Designated Safeguarding Officer) or DDSO (Deputy Designated Safeguarding Officer) will be informed and consulted on necessary action, if indicated.

Given the need for detailed understanding of the local context and potential subjectivity of our response to safeguarding concerns raised in settings where there is no safeguarding policy in place, people involved in project delivery and working in direct contact with children, young people or adults at risk in such settings may only do so in pairs. Not only does this enhance the collection of information and reduce risk of subjectivity, but it provides additional scope for peer support.

Our Duty of Care to Project Contributors Policy, provided to project contributors prior to project delivery, contains detailed guidance on our commitment to taking reasonable steps to protect them from harm wherever their work with us may take them. Ensuring the effective implementation of this policy is the shared responsibility of all Music as Therapy International employees and the charity's Trustees.

Music as Therapy International recognises its Duty of Care to caregivers employed by the organisations we partner with to deliver our activities (Project Partners). However the charity does not hold responsibility for the recruitment and day-to-day management of such individuals. Consequently our Duty of Care to Project Partners is limited to protecting individual caregivers from harm and minimising risks to their physical safety during their direct involvement with project delivery, and protecting them from harm and minimising risks to their mental health and emotional wellbeing resulting from their direct involvement with project delivery.

iv) Storing Information

Music as Therapy International is committed to protecting personal information relating to all those who contribute to our work or participate in our projects. Full details about our approach can be found in our separate Consent Policy, and Privacy and Data Protection Policy.

We are aware of the risk that abuse can escalate when it is challenged and so investigating concerns must be approached with great sensitivity. This extends to the information we store relating to safeguarding concerns involving children, young people and adults at risk. We ensure it is treated confidentially and stored securely in a Safeguarding folder in the charity's secure cloud storage that is only accessible by the DSO, DDSO and LTS. Any files that hold sensitive information are stored securely for as long as they are needed, as determined by the safeguarding team and informed by any stipulation from a local safeguarding lead (if the issue was encountered during project delivery in a place where a safeguarding policy was in place), after which they will be permanently deleted.

Whether we are working in places with safeguarding policies in place (Section 3i) or in settings without safeguarding policies in place (Section 3ii) we ensure all information relating to safeguarding issues held by us is stored as detailed above. Such assurance cannot necessarily be given for how information is stored by our partner organisations and we are mindful of this when sharing information (see below).

v) Sharing Information

The risk that abuse can escalate when it is challenged and so investigating concerns must be approached with great sensitivity. This extends to how we share information relating to safeguarding concerns involving children, young people and adults at risk.

However, 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 individuals at risk from harm. When it is in the best interests of the child, young adult or adult at risk, it is our responsibility to share information. We approach this on a strictly 'need to know' basis. Decisions relating to sharing information may be made by the DSO or DDSO, guided by the person who raised the safeguarding concern, local policies in the setting where the concern arose, LTS and the Director.

Our approach to sharing information is informed by the Seven Golden Rules for Information Sharing, as set out by the Government (2024):

1. All children have a right to be protected from abuse and neglect. Protecting a child from such harm takes priority over protecting their privacy, or the privacy rights of the person(s) failing to protect them.
2. When you have a safeguarding concern, wherever it is practicable and safe to do so, engage with the child and/or their carer(s), and explain who you intend to share information with, what information you will be sharing and why.
3. You do not need consent to share personal information about a child and/or members of their family if a child is at risk or there is a perceived risk of harm.
4. Seek advice promptly whenever you are uncertain or do not fully understand how the legal framework supports information sharing in a particular case.
5. When sharing information, ensure you and the person or agency/organisation that receives the information take steps to protect the identities of any individuals (e.g., the child, a carer, a neighbour, or a colleague) who might suffer harm if their details became known to an abuser or one of their associates.
6. Only share relevant and accurate information with individuals or agencies/organisations that have a role in safeguarding the child and/or providing their family with support, and only share the information they need to support the provision of their services.
7. Record the reasons for your information sharing decision, irrespective of whether or not you decide to share information.

Where concerns relate to child sexual abuse, we will comply with any applicable mandatory reporting duties under UK, alongside local legal requirements for overseas projects.

As detailed in Section 3i) our safeguarding procedure when we are working in places with safeguarding policies in place is to follow local policy and guidance. It follows that we will follow local policy and guidance on sharing relevant information.

As detailed in Section 3ii) some of our projects take place in settings without safeguarding policies in place and may also not have policies in place relating to data protection or information sharing. Such settings are always outside the UK our frameworks may not be locally recognised. As such we cannot always know

what will happen locally to the information we share and local understanding or awareness of the risk that abuse can escalate when it is challenged. What we know of the local context and practices must be given particularly careful consideration when decisions are made about what information we share, how and with whom. These decisions will be made jointly by the person who has identified the safeguarding concern, the DSO (or DDSO) and the LTS within the Action Planning stage of our Safeguarding Procedure.

The charity's wider protocols for sharing information are detailed in our Consent Policy, Privacy and Data Protection Policy and our Press and Media Guidelines. The policies are available to the public via the charity's website and are shared with employees and individuals engaged to deliver activities for the charity (alongside the Press and Media Guidelines) as relevant to their roles.

vi) Escalation

a) Escalation when we are working in places with safeguarding policies in place

If the setting's immediate response to a safeguarding concern is deemed insufficient by the person who raised the concern, this person should report back to the DSO (or DDSO).

The DSO (or DDSO) in consultation with the LTS will then contact the setting's Safeguarding Lead directly within 2 working days to discuss their actions in response to the incident or concern raised.

Should appropriate action still fail to result within 4 working weeks, the DSO (or DDSO), in consultation with the LTS and the person who raised the concern will report the incident to the relevant Local Authority (if the setting is in the UK) and/or the Police (where it is believed the incident may involve criminality). The DSO and LTS may decide to take this action sooner. In settings abroad, a suitable organisation or governmental body will be identified and reported to. This may include local Police. When reporting to authorities abroad, we always take into account local laws and risks to those involved, as per the Charity Commission guidance on criminal reporting of safeguarding offences including overseas (2019).

Should there be disagreement between the DSO/DDSO and the person who raised the concern regarding the adequacy of the response within the setting, the DSO/DDSO will advise the person that they have the right to report the incident directly to the relevant Local Authority (in the UK) or suitable organisation (abroad). The DSO/DDSO will identify the suitable organisation(s) if the setting is outside of the UK.

b) Escalation when we are working in places without safeguarding policies in place

Responses to safeguarding concerns will always be decided in discussion between the person who raised the concern and the DSO/DDSO and LTS. In the unlikely event of an unresolved disagreement on the response, the DSO (or DDSO) will advise the person that they have the right to contact a suitable organisation, which will be identified by the DSO (or DDSO).

SECTION 4: Bullying, Harassment and Whistle-Blowing

Music as Therapy International will ensure that any bullying, harassment or whistle-blowing concerns made against any Trustees, employees (including freelance workers), Project Contributors and volunteers are fully and promptly investigated.

i) Bullying and Harassment

Where a Trustee, employee (including freelance workers), Project Contributor or volunteer is thought to have committed acts of bullying and/or harassment, it should be reported to the Director in the first instance. The Director will initiate a full investigation within 7 days and, if indicated, a course of action will be agreed in terms of immediate steps to stop the behaviour and mitigate the effects of bullying and harassment. All incidents will be recorded and reported to the LTS.

Our process for handling concerns or complaints relating to bullying and harassment are outlined in our separate Equal Opportunities Policy. All staff are aware of this policy and will be supported to use it.

ii) Whistle-Blowing

Whistle-Blowing is the raising of a concern inside or outside the workplace, where the concern is about incidences of wrongdoing that are a danger to others (including members of the public). Whistle-Blowing (and the legal protection it affords) only relates to reporting:

- a criminal offence
- risk of danger to someone's health and safety
- risk or actual damage to the environment
- a miscarriage of justice
- the charity breaking the law
- covering up of wrongdoing

The concern may be about an incident that happened in the past, is happening now, or you believe will happen in the near future. Such concerns can be raised with the Safeguarding team, the Director or the Chair of the Trustees at any time who will initiate a full investigation within 7 days.

Whistle-blowing legislation is to protect whistle-blowers who make an allegation in good faith. It is emphasised that no one should have anything to fear by raising a concern. Provided the individual is acting in reasonable belief that it is in the public interest, it does not matter if he/she/they are mistaken. However, disciplinary action may be taken against any Trustee, employee (including freelance workers), Project Contributor and/or volunteer who is discovered to have made allegations frivolously, falsely or maliciously, for example to pursue a personal grudge against another employee.

Where a Trustee, employee (including freelance workers), Project Contributor or volunteer is thought to have committed a criminal offence the police will be informed. If a crime has been witnessed the police will be contacted immediately. If the incident occurs outside the UK, the guidance of the British Embassy will be sought immediately and their guidance will be followed with respect to reporting the incident locally.

iii) Safety

The safety of the individual(s) concerned is paramount. A risk assessment will be undertaken immediately to assess the level of risk posed by the alleged perpetrator to children, young people or adults at risk. This will include an assessment of whether it is safe for them to continue in their role or any other role within the charity whilst the investigation is undertaken.

The Director will liaise with the relevant organisations and authorities to discuss the best course of action and to ensure that *Music as Therapy International's* disciplinary procedures are coordinated with any other enquiries taking place as part of the ongoing management of the allegation.

The contact points at the front of this policy may be used to make a bullying, harassment or whistle-blowing complaint. If the complaint relates to a member of the Safeguarding Team, the Chair of the Trustees may be contacted directly: johnellis@musicastherapy.org

SECTION 5: Policy dissemination, implementation and compliance

No policy guarantees safe practice. It is ensuring awareness of our policy and procedures and our compliance with this policy that assures we are fulfilling our responsibility to safeguard the children, young people and adults at risk from harm with whom we work.

All our Trustees, employees (including freelance workers), Project Contributors and volunteers who have been engaged to undertake work for *Music as Therapy International* which involves direct contact with – or

responsibility for - children, young people or adults at risk are given a full briefing on our Safeguarding Policy and Procedures before commencing work with us, and a copy of our Safeguarding Policy for their records. This is the responsibility of our DSO.

Our DSO is responsible for ensuring we comply with our policy in practice and should raise concerns relating to this with the LTS, at any time. A compliance checklist is used annually to support this.

Our Director – together with our DDSO - investigates how we have fulfilled the commitments within this policy in practice on an annual basis and reports this to the Trustees. Our Director is responsible for investigating any breaches in our compliance and, together with the Safeguarding Team, ensuring appropriate steps are taken to address them.

Significant safeguarding incidents and near misses will be reviewed carefully by the Safeguarding Team to identify learning and improve future practice. This learning will inform our annual review of this Safeguarding Policy, alongside any changes to national guidance and updates to best practice. Any arising recommendations for revision must be approved by the Director and the Trustees. The DSO has responsibility for ensuring any changes made to the policy are clearly communicated to all Trustees and employees. The DSO also has responsibility for ensuring that any changes made to the policy are clearly communicated to any freelance workers, Project Contributors and/or volunteers if such changes are made during any given period in which they been engaged to undertake work for *Music as Therapy International* which involves direct contact with – or responsibility for - children, young people or adults at risk.

Last review: April 2025
Date of next review: April 2026

Appendix 1: Glossary

Within this policy, the following terms have been used:

- **Abuse** is maltreatment of a child or an adult. This maltreatment can be of a sexual, emotional, physical, psychological and financial nature.
- **Action Planning** The process of creating a time-bound course of action for us to follow in response to a safeguarding concern encountered in a setting with no safeguarding policy of its own in place
- **Adult at risk** The term 'adult at risk' was introduced in the Care Act 2014 and focuses on the situation causing the risk, rather than the characteristics of the adult concerned. An 'adult at risk' 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.
- **British Association for Music Therapists (BAMT)** is the professional body for Music Therapy in the UK, providing both practitioners and non-practitioners with information, professional support, and training opportunities.
- **Bullying** is a very wide term which encompasses any behaviour that creates an offensive or intimidating environment for the recipient.
- **Care setting** is a place where we deliver projects to provide the resources and skills for care practitioners of the setting to run music sessions or to use the principals of music therapy with those in their care. Care settings include: schools, clinics, hospices, centres for any age demographics or specific special needs, therapy centres, etc.
- **Confidentiality** is defined as 'the state of keeping or being kept secret or private'. All health and social care settings must take steps to ensure an individual's information is protected from unauthorised access.
- **Employee (including freelance worker)** is a person employed for a fee or salary, to work for *Music as Therapy International*.
- **Harassment** is a form of bullying, related to a protected characteristic. It is a form of unlawful discrimination.
- **Health and Care Professionals Council** is a regulator of health and care professions in the UK. This role is to protect the public. Source: Health and Care Professionals Council.
- **Information sharing** The exchange of data between parties, e.g. organisations, people and technologies.
- **Music therapy** is a broad, flexible discipline in which music is used as a creative and non-verbal medium through which the difficulties of children, young people and adults in vulnerable situations can be addressed.
- **Neglect** is the persistent failure to meet a person's basic physical or psychological needs. It may result from carelessness or a disregard for the needs of others. It is likely to result in the serious impairment of the child's health or development, and can seriously impact the health and wellbeing of the neglected adult.
- **Project** is a tailored type of training or support offered by *Music as Therapy International* to address specific aims and needs of care settings worldwide by equipping their care practitioners with the skills, knowledge, resources, experience and confidence to run music sessions or to use the principals of music therapy in their work with children, young people and adults living in vulnerable situations.
- **Project Contributor** is a person who is not employed for wages or salary, to deliver projects for *Music as Therapy International* to provide skills and support to care practitioners globally.
- **Professional indemnity insurance** is a commercial policy designed to protect business owners, freelancers and the self-employed if clients claim a service is inadequate.
- **Protected Characteristics** are Age, Disability (can include physical, neurodivergent conditions as well as long-term sickness / medical conditions), Gender Reassignment, Marriage & Civil Partnership status, Pregnancy & Maternity, Race, Religion & Belief (can include atheism, humanism, gender critical, veganism), Sex and Sexual Orientation

- **Safeguarding** is a term introduced in the UK to encompass a wide range of measures and principles to ensure that the basic human rights of individuals are protected, including the right to be kept safe from harm, abuse or neglect.
- **Safeguarding Policy** is the full policy document created by Music as Therapy International to detail the charity's approach to safeguarding children, young people and adults at risk from harm.
- **Safeguarding Procedure** is the protocol we follow to fulfil our safeguarding policy when delivering our work in places which support children, young people and adults at risk from harm.
- **Safeguarding Team** consists of appointed people within *Music as Therapy International* who handle safeguarding concerns. The team is made up of a Designated Safeguarding Officer (DSO), a Deputy Safeguarding Officer (DDSO), and a Lead Trustee for Safeguarding (LTS). (See p.3 in the Safeguarding Policy).
- **Trustee** is a member of the *Music as Therapy International* Board of Trustees, which has overall accountability for the organisational development and the activities undertaken in the pursuit of the charitable objectives.
- **Volunteer** is a person who is not employed for wages or salary, but freely offers to undertake work for *Music as Therapy International*. A volunteer can be a Project Contributor, but also someone who undertakes fundraising and administration tasks for the charity.
- **Welfare** the health, happiness, and fortunes of a person.
- **Whistle-Blowing** The raising of a concern inside or outside the workplace, where the concern is about incidences of wrongdoing that are a danger to others (including members of the public).

There are some terms that have not been used in this policy, but are used beyond this policy in the lexicon of safeguarding regarding children, young people and adults at risk:

- **Arranged marriage** The families of both spouses take a leading role in arranging the marriage, but the choice of whether or not to accept the arrangement still remains with the prospective spouses. Source: Multi-agency practice guidance: Handling cases of forced marriage. HM Government June 2014.
- **Assessment** is carried out to identify the needs of an individual and whether these needs are met. It also looks at how an individual's day-to-day life and wellbeing are being impacted.
- **Controlling or Coercive Behaviour** (also known as coercive control) is a form of domestic abuse. It is a pattern of abuse (on two or more occasions) that involves multiple behaviours and tactics used by a perpetrator to (but not limited to) hurt, humiliate, intimidate, exploit, isolate, and dominate the victim.
- **Domestic violence** is any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who have been intimate partners or family members. Domestic violence can include psychological, physical, sexual, financial and emotional abuse. It also includes 'honour' based violence, female genital mutilation (FGM) and forced marriage.
- **Emotional abuse** is the persistent emotional maltreatment of a child. Emotional abuse causes severe and persistent adverse effects on the child's emotional development.
- **Extremism** is strongly linked to terrorist activity. An extremist holds strong beliefs which are contrary to fundamental British values such as democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths, etc.
- **Forced marriage** is a marriage in which one or both spouses do not consent to the marriage but are coerced into it. Duress can include physical, psychological, financial, sexual and emotional pressure. In cases of individuals who lack the capacity to consent to marriage, coercion is not required for a marriage to be forced. Source: Multi-agency practice guidance: Handling cases of forced marriage. HM Government June 2014.
- **Human trafficking** is the movement of people from one place to another by use of threats or force for the purpose of exploitation (which includes sexual exploitation, economic exploitation, criminal exploitation, domestic servitude, etc.)
- **Physical abuse** is the intentional causing of physical harm to a child or an adult. It could involve hitting, shaking, throwing, poisoning, burning, scalding, drowning, suffocating or fabricated and induced illness. It can happen at any time of life.

- **Radicalisation** The HM Government Prevent Strategy 2011 defines radicalisation as ‘the process by which a person comes to support terrorism and forms of extremism leading to terrorism.’
- **Sexual abuse** involves forcing or enticing a child to take part in sexual activities, regardless of whether or not the child is aware of what is happening. The perpetrators can be adult men and women and other children.
- **Terrorism** is defined in the Terrorism Act 2000, as ‘an action that endangers or causes serious violence to a person/people, causes serious damage to property or seriously interferes or disrupts an electronic system... the use of threat must be designed to influence the government or to intimidate the public and is made for the purpose of advancing a political, religious or ideological cause.’

There are some terms that have not been used in this policy, but are used beyond this policy in the lexicon of safeguarding regarding children only:

- **Child criminal exploitation** This happens when an individual or a group of individuals control, coerce, deceive or manipulate a child or young person into a criminal activity. Criminal exploitation does not require physical contact and can occur via the use of technology.
- **Child protection** An activity that is carried out to protect a child who is suffering from, or is likely to suffer from, significant harm.
- **Child sexual exploitation** This is a form of child abuse. An individual or group of individuals control, coerce, deceive or manipulate a child or young person into sexual activity. Sexual exploitation does not require physical contact and can occur via the use of technology.
- **Common Assessment Framework (CAF)** A standardised approach to assessing the additional needs of children and young people and deciding how these should be met. The CAF is a key part of delivering frontline services that are focused on meeting the needs of children and young people. It can be used by practitioners across children’s services in England.
- **County lines** This term describes gangs and organised criminal networks expanding their criminal activities from larger cities to small towns using dedicated mobile phone lines (deal lines) to sell drugs. Often, these organisations exploit children and adults in vulnerable situations to move and store drugs and money.
- **Cyberbullying** happens online via texting, emailing, instant messaging or posting messages on social media or in chat rooms. It is different to other forms of bullying because it can take place everywhere and at any time. Anyone can be a victim. Degrading messages quickly reach not only the target but also a vast number of onlookers. This increases the humiliation felt by the victim.
- **Early help** was recommended by the Munro Review in 2011, calling for local authorities to be duty-bound to provide these type of services. Early help aims to prevent a child, or young person becoming a child in need or requiring child protection to promote their wellbeing and safety.
- **Education, Health and Care Plan** is a plan covering the education, health and social care needs of a child or young person with a disability and/or special educational needs.
- **Fabricated illnesses** is a rare form of child abuse which occurs when a parent or carer exaggerates or deliberately induces signs or symptoms of illness in a child.
- **Female Genital Mutilation (FGM)** is a procedure in which the female genital organs are injured or changed. There is no medical reason for what is frequently a very traumatic and violent experience for the victim, and FGM can be harmful in many ways.
- **Grooming** is a process by which a sexually exploitative adult manipulates a child into sexual exploitation by purporting to be the child’s partner. The child is seduced into feeling loyal to their ‘partner’ and becomes emotionally and materially dependent on them through a process of being isolated from family, friends and professionals.
- **Online grooming** Online grooming is an exploitative process preparatory to sexual abuse. It involves the use of technology to set up an abusive situation online.
- **Parent carer** An adult who has parental responsibility for a child with a disability and provides, or intends to provide, care for this child.

- **Parental mental ill health** is a broad term which covers many conditions, including but not limited to anxiety, depression, psychotic illness and bipolar disorder. When referring to parental mental ill health, anyone who has regular responsibility for the care of the child is included – they do not need to have parental responsibility.
- **Parental substance misuse** Refers to the harmful or hazardous use by parents of psychoactive substances, including alcohol and illicit or prescription drugs.
- **Toxic Trio** is used to describe issues of domestic violence, parental mental ill health and parental substance misuse. These factors are considered to be indicators of increased risk to children and young people when they are present in the family.

There are some terms that have not been used in this policy, but are used beyond this policy in the lexicon of safeguarding regarding adults only:

- **Adult in need of protection** A definition introduced by the Adult Safeguarding: Prevention and Protection in Partnership (2015) in Northern Irish adult safeguarding. A person aged 18 years or over whose exposure to harm through abuse, exploitation or neglect may be increased by their personal characteristics and/or life circumstances. It also refers to someone who is unable to protect their own wellbeing, property, assets, rights or other interests, as well as to where the action or inaction of another person or persons is causing, or is likely to cause, them to be harmed. Note: self harm and self-neglect are excluded from Northern Irish policy.
- **Adult Practice Review (APR)** A multi-agency review process that attempts to determine what could have done differently by the agencies and individuals involved to prevent harm or death from happening.
- **Consent** An individual's voluntary and ongoing permission for an intervention.
- **Disclosure and Barring Service (DBS)** A governmental body which provides a copy of a person's criminal record.
- **Discriminatory abuse** Discriminatory abuse is usually motivated by discriminatory and oppressive attitudes towards individuals based on protected characteristics, which includes race, gender, culture, background, religion or belief, disability/ability, sexual orientation and age.
- **Financial abuse** Financial abuse involves theft or misuse of an individual's money, personal possessions and/or resources without their consent.
- **General Data Protection Regulation (GDPR)** EU regulation on data protection and privacy.
- **Mental capacity** This term describes whether a person has the mental capacity to make their own decisions.
- **Non-disclosure agreement (NDA)** A legally-binding confidentiality agreement, also known as a 'gagging order'.
- **Non-statutory guidance** This is not used to comply or to adhere to legislation, but is more to help improve practice. Non-statutory guidance tends to be shorter and more accessible.
- **Organisational abuse** occurs when there are ongoing or one-off incidences of poor treatment of individuals receiving care and support. It can occur within an institution, in a specific care setting (such as a hospital) or in the individual's own home.
- **Regulations** These are the ongoing processes of monitoring and enforcing the law. On a simplistic level, regulations outline what actions need to be taken to comply with legislation.
- **Safeguarding Adults Board (SAB)** A multi-agency partnership with the purpose of ensuring that local safeguarding arrangements work effectively and that adults at risk are protected from abuse and neglect.
- **Safeguarding Adults Reviews (SAR)** A multi-agency review process that attempts to determine what could have been done differently by the agencies and individuals involved to prevent harm or death from happening.
- **Self-neglect** A behavioural condition in which a person neglects to care for their own basic needs, including personal hygiene, health, food, clothing and living conditions.
- **Safeguarding Guidance (SG)** Outlines practices and ways of working that support the compliance of legislation. Codes of Practice are examples of Statutory Guidance.

Appendix 2: Legal framework

This policy has been drawn up on the basis of law and guidance that seeks to protect children, young people and adults at risk from harm, namely:

- United Nations Convention on the Rights of the Child 1991
<https://www.gov.uk/government/publications/united-nations-convention-on-the-rights-of-the-child-uncrc-how-legislation-underpins-implementation-in-england>
- Data Protection Act 2018
<https://www.gov.uk/data-protection>
- Human Rights Act 1998
<https://www.legislation.gov.uk/ukpga/1998/42/contents>
- Sexual Offences Act 2003
<https://www.legislation.gov.uk/ukpga/2003/42/contents>
- Children Act 2004
<https://www.legislation.gov.uk/ukpga/2004/31/contents>
- Children and Social Work Act 2017
<https://www.legislation.gov.uk/ukpga/2017/16/contents>
- Crime and Policing Act 2026
<https://www.legislation.gov.uk/ukpga/2026/20/contents/>
- Safeguarding Vulnerable Groups Act 2006
<https://www.legislation.gov.uk/ukpga/2006/47/contents>
- Protection of Freedoms Act 2012
<https://www.legislation.gov.uk/ukpga/2012/9/contents>
- Children and Families Act 2014
<https://www.legislation.gov.uk/ukpga/2014/6/contents>
- The Domestic Abuse Act 2021
- SEND code of practice: 0 to 25 years 2014
<https://www.gov.uk/government/publications/send-code-of-practice-0-to-25>
- Keeping Children Safe in Education 2024
<https://www.gov.uk/government/publications/keeping-children-safe-in-education--2>
- Information sharing advice for safeguarding practitioners 2024
<https://www.gov.uk/government/publications/safeguarding-practitioners-information-sharing-advice>
- Department for Education (2023) Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children
<https://www.gov.uk/government/publications/working-together-to-safeguard-children--2>
- Adults with Incapacity (Scotland) Act 2000
<https://www.legislation.gov.uk/asp/2000/4/contents>
- Mental Capacity Act 2005
<https://www.legislation.gov.uk/ukpga/2005/9/contents>
- The Care Act 2014
<https://www.legislation.gov.uk/ukpga/2014/23/contents/enacted>
- Department for Health and Social Care (2016) “Factsheet 7: Protecting adults from abuse or neglect”
<https://www.gov.uk/government/publications/care-act-2014-part-1-factsheets/care-act-factsheets#factsheet-7-protecting-adults-from-abuse-or-neglect>
- Charity Commission guidance (2022) Safeguarding and protecting people for charities and trustees
<https://www.gov.uk/guidance/safeguarding-duties-for-charity-trustees>
- Charity Commission Guidance (2019) “How to report a serious incident in your charity”
<https://www.gov.uk/guidance/how-to-report-a-serious-incident-in-your-charity>