



## Heads Together Children and Adults Safeguarding Policy – May 2017

### 1. Introduction

Heads Together believes that everyone who accesses our services has a right to a life free from fear, to be treated with dignity and respect, to have their choices respected and not to be forced to do anything against their will.

Heads Together believes that each person has a right to a life that maintains independence and enables them to make their own decisions and choices. We also understand that there will be cases where an individual may be unable to make their own decisions and/or to protect themselves or their assets.

*“We at Heads Together Productions are committed to practice which protects children and vulnerable adults from harm. Staff and participants in this organisation accept and recognise our responsibilities to develop awareness of the issues which cause harm to children and vulnerable adults.”*

We will endeavour to safeguard children and vulnerable adults by:

- ◆ Adopting safeguarding guidelines through procedures and a code of conduct for staff and participants
- ◆ Sharing information about safeguarding and good practice with children, vulnerable adults, parents and carers, staff and participants
- ◆ Sharing information about concerns with agencies who need to know, and involving parents / legal guardians, children and young adults appropriately
- ◆ Following carefully the procedures for recruitment and selection of staff and participants
- ◆ Providing effective management for staff and participants through supervision, support and training

We are also committed to reviewing our policy and good practice at regular intervals.

### Training

It is recognised that appropriate training and support must be available to all staff who are involved in working with children/young people and vulnerable adults.

Heads Together will provide safeguarding training to new staff as part of their induction sessions. We will review staff training needs regularly.

### 2. Examples

You may think good practice for safeguarding participants is obvious and clear-cut. Have a look at the examples below; what would you do in these situations?



You are working with a class in a high school. The class teacher asks if she can leave you to it, and leaves the room.

We are running a caravan broadcast in a primary school, and the teacher informs you that not all children have 'permission' from parents to be on the radio.

You are asked by a young person, aged 14, to talk about something in private. The young person confesses that she is pregnant, and doesn't know what to do about it.

A participant in a session is having an anxiety attack and asks to be taken home. Upon arrival you become aware that they are living alone with a family member with a learning disability

You book a training session for a small number of participants. Before the session, all but one participant calls to say they can't make it. The session lasts an hour with one participant, 14 years old

A young person with epilepsy commonly fits during sessions. In one session he fits violently a number of times, for a lot longer than usual.

A 13-year-old participant adds you as a friend on facebook.

On meeting days, participants aged 12 – 16 leave the building at break time to buy food and drinks.

You take a photograph during an event in a school, and upload it to the website.

A young person tells you that her mother has hit her. When asked about it she shrugs it off as not important.

A Vulnerable Adult participating in a session comes to you the facilitator and shows you some cuts on their arm and asks for a plaster.

**These are all real examples that Heads Together staff have dealt with in the past.**

**This Policy will give you guidance for dealing with situations like these.**



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## 4. Definitions

### 4.1 Definition of Child / Young Person

Anyone under the age of 18 years should be considered as a child/young person. [Children Act 1989]

### 4.2 Definition of a Vulnerable Adult

A vulnerable adult is defined as a person who: “may be in need of services by reason of mental or other disability, age or illness: and who may not be able to take care of him or herself, or is unable to protect him or herself against significant harm or exploitation” (No Secrets, Department of Health - 2000). At Heads Together we recognise that people may not realise they are in needs of services and we may refer to support rather than services, particularly when the participant may not be known to any formal ‘service’.

**Note:** Participants outside of these definitions may also be vulnerable to abuse due to low self-esteem, social exclusion, drug or alcohol misuse, offending history, homelessness, domestic violence, ethnicity, immigration status, gender or sexuality.

### 4.3 Definition of Abuse

Abuse is described as “a violation of an individual’s human or civil rights by any other person or persons” (No Secrets, Department of Health - 2000). We recognise that some of our participants are potentially at risk due to their current life situations. Abuse can occur in any relationship, context or environment. The seriousness of abuse varies and can range from behaviour that is intentionally abusive (e.g. violent, criminal), to that which is unintentional (e.g. neglectful)

### 4.4 Forms of abuse (relevant to all age groups):

Heads Together recognises that abuse may happen as a result of deliberate intent, negligence or ignorance. Incidents of abuse may consist of a single act or repeated acts and may happen to one person in a continuing relationship and/ or, of more than one person at a time. We aim to look beyond any single incident or breach of policy and practice in order to identify any underlying patterns of harm.

#### 4.4.1 Physical Abuse

Physical abuse can be defined as anything intentional that causes injury, illness or trauma to another person usually by bodily contact. Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm.

#### 4.4.2 Emotional Abuse

Emotional abuse is treating someone badly in a way that causes big effects on someone’s emotional state. It may involve convincing people that they are worthless or unloved or inadequate. It may feature inappropriate expectations being imposed on people. It may involve causing children frequently to feel frightened or in danger, or the exploitation or corruption of anyone.



#### 4.4.3 Sexual Abuse

Sexual abuse involves forcing or enticing a person to take part in sexual activities, whether or not the person is aware of what is happening. The activities may involve physical contact, including penetrative (e.g. rape or buggery) or non-penetrative acts (e.g. inappropriate touching).

Specifically for safeguarding purposes they may include non-contact activities, such as involving children or vulnerable adults in looking at, or in the production of, pornographic material or watching sexual activities, or encouraging children to behave in inappropriate ways.

#### 4.4.4 Neglect

Neglect is the persistent failure to meet a person's basic physical and/or mental needs, likely to result in the serious damage to a person's health or development. It may involve a parent or carer failing to provide adequate food, shelter or clothing, failing to protect a person from physical harm or danger, or the failure to ensure access to appropriate medical care or treatment.

#### 4.4.5 Self Harm

Self-harm also known as self-injury, is defined as the intentional, direct injuring of the body, done without suicidal intentions. Although this is not a recognised form of abuse within safeguarding specifically it can often be a sign of abuse and also shows a person to be a risk to themselves.

*(From: Leeds ACPC Procedures Document)*

### 5. Changes to CRB & DBS checks

#### 5.1 Background - What Is A DBS Check?

DBS (Disclosure and Barring Services) checks replaced the Criminal Records Bureau (CRB) checks on 1st December 2012. All services continue and the contact details for DBS remain the same as they were for the CRB.

#### 5.2 Who needs a DBS check?

In practice DBS checks are required for unsupervised participants and staff involved with an organisation that has direct access to, or works directly with children, young people or adults at risk.

The following list gives some examples of people who require a DBS check:

- Instructors, teachers, coaches, activity leaders, healthcare workers, dental staff, social work staff, child minders, unsupervised participants, anyone working in a school, nursery, children's home, childcare premises, anyone providing healthcare, personal care, or who assists with the managing of someone's affairs or finances.

#### 5.3 Implications For Heads Together

Anyone we employ or contract to lead workshops with participants **will** need an enhanced DBS check. Anyone assisting the workshop leader, who is **never** left alone with the group, will **not** need a DBS check. *(this is a change from the previous situation whereby everyone, whether they were leading a session or just assisting, required a CRB check).*



## 6. Prevention of and dealing with incidents of abuse

Heads Together acknowledges that its primary responsibility is the protection of participants, and the prevention of abuse.

Measures for preventing incidents of abuse include:

- 6.1** Ensuring that clear policies and procedures are in place and are being followed by staff who are appropriately skilled and have an awareness of abuse.
- 6.2** Effective recruitment and selection processes, which involve DBS checks and thorough checking of employment history references.
- 6.3** Ensuring that breaches of policy and procedures are dealt with appropriately and consistently.
- 6.4** Maintaining effective partnership with other agencies, including Social Services and the police and working in line with local inter-agency guidelines for the protection of vulnerable adults.
- 6.5** Cases of abuse are reported to the Safeguarding officer; currently **Linda Strudwick**. In the absence of the Safeguarding Officer all incidents must be reported to the member of the Board with Safeguarding Responsibility; currently **Jeremy Richardson**.

## 7. Recognising Abuse

All staff should be alert to the potential signs of abuse. However the presence of one or more signs does not always mean that abuse is taking place, but may mean that further investigation/observation is required.

Abuse is not always easy to recognise and it is understood that most employees will not be experts. In some cases it is easy to identify if someone is being abused. In many situations, however, the signs will not be clear-cut.

Heads Together also recognise that some participants may show signs of abuse that are self inflicted or may pose a risk to them selves and in our organisation it is important to refer such cases to the Safeguarding Officer.

### 7.1 Physical signs of abuse:

- Injuries which someone cannot explain, or explains unconvincingly
- Injuries which have not been treated, or treated inadequately
- Bruising which reflects hand or finger marks
- Cigarette burns or human bite marks
- Scalds, especially from splashed hot water, or rings from sitting/standing in very hot water

### 7.2 Physical signs of neglect:

- Being constantly hungry
- Being in an unkempt state, frequently dirty or smelly,
- Being dressed inappropriately for the weather conditions

### 7.3 Behavioural signs of abuse:

- Aggressive behaviour or severe temper outbursts
- Showing fear of going home
- Flinching when approached or touched
- Sudden or unexplained changes in behaviour
- Self-harm







- Alluding to secrets which they cannot reveal

#### 7.4 Indicators of Abuse:

- Full or partial disclosure
- Signs of depression or stress which may happen suddenly or gradually emerge
- Changes in habits/mood ranging from withdrawal from normal activities to a total lack of communication
- Dramatic change of behaviour/personality – this can happen very suddenly and unexpectedly and is often associated with fear
- Confusion
- Denial that anything is wrong and an emphasis that all is extremely well
- Acceptance or resignation of their situation as part of being old and /or disabled

### 8. Disclosures of abuse

Staff, participants and their family or friends, may disclose allegations of abuse perpetrated upon vulnerable adults involved with Heads Together activities.

#### 8.1 Responding to a child, young person or vulnerable adult, who makes an allegation of abuse

- **stay calm**
- **listen** carefully to what is said
- find an appropriate early opportunity to explain that it is likely that the information will need to be shared with others – **do not promise to keep secrets**
- **allow** the child/young person/vulnerable adult to continue at his/her own pace
- **reassure** them that they have done the right thing in telling you
- **tell** them what you will do next and with whom the information will be shared
- **record** in writing what was said using the person's own words as soon as possible – note date, time, any names mentioned, to whom the information was given and ensure that the record is signed and dated.

#### REMEMBER:

**It is important that everyone in the organisation is aware that the person who first encounters a case of alleged or suspected abuse is not responsible for deciding whether or not abuse has occurred. That is the task for the professional agencies following a referral to them of concern about a child or young person.**

#### 8.2 Disclosures made by a participant or family member

8.2.1 Many incidents of abuse are only recognised when the person being abused discloses the information himself or herself. Sometimes they may not realise they are being abused and may not be aware that they are 'disclosing'. Some disclosures may happen after many years have passed. There may be good reasons for this and any delay in reporting or disclosing by an abused person should not cast doubt on their truthfulness. Staff members will be expected to take all allegations seriously, however insignificant they may initially seem.



8.2.2 During a disclosure of alleged abuse, staff should always explain that they are required to share this information with the Safeguarding designated worker at Heads Together, and possibly others. Where the Safeguarding worker is allegedly involved in the incident staff must explain that they are required to inform the Board member responsible for Safeguarding.

8.2.3 If it is possible and appropriate, staff should make notes at the time of the disclosure, noting what the person actually says using their own words and phrases. **A full record of the disclosure must be made as soon as possible, and always within 24 hours.**

### 8.3 Consent of the participant

All action, including referrals to the police, should be subject to the consent of the participant. In every situation it will be assumed that a person can make their own decisions and action will only be taken in the absence of consent from the participant where:

- They or others are in physical danger, i.e. they are not the only person at risk and the risk to others needs to be considered;
- Asking for consent may increase the risk of significant harm to the person.
- A delay in sharing information may increase the risk of harm to a person.
- It has been assessed (by the Safeguarding officer and the Safeguarding Board member) and agreed that the participant is unable/incapable of making an informed decision for him or herself.
- Staff should be prepared to accept that not all referrals result in direct action. If a referral is made that no action may be taken other than continued monitoring of the situation

### 8.4 Disclosures made by a member of staff

Where a member of staff wishes to disclose alleged abuse perpetrated by a colleague they must immediately contact the Safeguarding officer, who will discuss the issue with their line manager. The manager should discuss the option of approaching the police with the individual if appropriate.

## 9. Criminal Offences

The organisation recognises that some instances of abuse constitute a criminal offence, and in such cases people are entitled to the protection of the law in the same way as any other person. Criminal offences include

- Physical or psychological assault
- Sexual assault
- Theft
- Fraud
- Discrimination, victimisation or harassment

Where there is obvious evidence of a criminal offence a simultaneous referral to the police and the safeguarding board must be made and, in such cases, criminal investigations by the police take priority over all other lines of enquiry.





## 10. Referral Procedure

Heads Together Staff – When a member of staff suspects that a participant is suffering abuse in any of the ways outlined above, they must follow the following procedures:

- Check that the signs and symptoms they are questioning fit into the categories of abuse in the policy
- Consult with the Safeguarding Officer: Linda Strudwick or, in her absence the Board member with responsibility for Safeguarding; Jeremy Richardson
- Make decisions together as to:
  - Continue to observe, monitor and record
  - Act instantly as signs and symptoms are clear enough for action to be taken
- The Safeguarding Officer will telephone the designated Safeguarding Board to report the suspected abuse (telephone numbers below). The Safeguarding Board will then co-ordinate further action at that level.
- The Safeguarding Officer will co-ordinate the preparation of reports and arrange representation at any case conference that may follow.

### Leeds Safeguarding Children's Board:

☎ 0113 222 4403

### Leeds Safeguarding Adults Board:

#### Adult Social Care:

☎ 0113 222 4401

#### Out of hours:

☎ 07712 106 378





## 11. Premises Checklist

When working with participants in other premises, look at the area where participants will have access and consider the following:

- Who is supervising them?
- Are they with teachers, group leader or parents?
- Who is responsible for them?
- Who else has access to the area or activity session?
- What are the expectations put upon staff re supervising clients in general?

### 11.1 Staff need to consider the following areas and look at the level of risk to participants.

1. Layout of the building - are there any areas which are out of supervising staff's view and would provide opportunities for participants to be at risk.
2. Are there adequate safety procedures i.e. security coded doors, clearly labelled areas that are no entry to members of the public?
3. Do you have a designated area for lost participants and a procedure in place?
4. Are all the staff wearing clearly labelled ID badges or name badges so participants know who staff are?
5. Do you have clear statement policies for the public on display explaining what to do in the event of losing a child or vulnerable adult?
6. Do you have clear statement policy on display which explains to the public Heads Together's expectations with regard to supervising participants?
7. Are all staff working with participants aware of what to do in an emergency regarding participants going missing or being lost?
8. Does the lead worker know how to assess areas of risk with regard to child protection?
9. Are there clear up-to-date Safeguarding policies and procedures?
10. Where are the facilities for participants in relation to where they do the activity i.e. toilets or changing rooms.
11. Do participants have to go a long way from the lead worker or supervisor, on their own?
12. What is the participant/trainer ratio?
13. Are staff aware of what they do if they see a colleague behaving in-inappropriately with participants or if they have any worries about colleague's behaviour?
14. Do all staff understand about good practice and how they need to protect themselves and not make themselves vulnerable to allegations when working with participants?





## 12. Administering Medication Policy

Medicines should only be brought to the Heads Together activities if absolutely essential.

- 12.1** Medications will only be accepted by Heads Together if they have been prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber or is an integral component in meeting the needs of the young person or vulnerable adult.
- 12.2** Medications will only be accepted by Heads Together if they have been prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber or is an integral component in meeting the needs of the young person or vulnerable adult.
- 12.3** For children, parents must hand medication to a member of the Heads Together team. It should not be sent with the child and medication will not be accepted without a written and signed consent form and instructions from the parent/carer.
- 12.4** Medicines should be provided in the original container as dispensed by a pharmacist and include the instruction for administration.
- 12.5** Heads Together will not accept medication that has been taken out of its original container nor make changes to dosages on parental instructions.
- 12.6** Any member of staff may administer medication to the child or vulnerable adult for whom it is prescribed but should follow prescriber's instructions.
- 12.7** Staff members do have the right to refuse to administer medication.
- 12.8** A record of all medication administered by staff must be recorded in the incident report book, and signed by two staff members and the parent/carer.
- 12.9** All medicines should be locked away in the office other than inhalers or medication that needs to be kept in the refrigerator.
- 12.10** When administering medication staff should check the following:
  - ❖ Recipients name
  - ❖ Prescribed dosage
  - ❖ Expiry date
  - ❖ Written instructions provided by prescriber

If a participant refuses to take medication, staff will not force them to do so, but will keep a note in the incident report book, and inform the parent or carer.





### 13. Allegations Against Staff Policy

In the event of an allegation being made against a member of staff, the following procedure must be followed:

- Record in writing any allegations made by participants or their parents or carers, in their own words, and make a note of names and the date.
- Report the allegation to the Safeguarding Officer: this is currently Linda Strudwick.
- The Safeguarding Officer will communicate any allegations to the Safeguarding representative on the Board of Directors, who will make decisions as to the action to be taken. The current Board member with Safeguarding responsibility is Jeremy Richardson.

### 14. Behaviour Policy

Heads Together staff should accept that participants are individuals however they behave.

Heads Together staff should encourage the development of a sense of right and wrong behaviour and participants should be encouraged to co-operate and respect others.

Heads Together activities should create an environment where participants learn to care for each other, to share and respect each other.

Heads Together staff should deal with behaviour problems by reasoning with participants rather than shouting or threatening.

Heads Together staff should help the participants to understand the effects of their actions through reasoning, explanations and appropriate language.

If a participant is in danger or is likely to harm himself/herself or others, property or equipment, the child may be gently removed from area/activity, to enable the child to reflect on what they have done.

If a child continually demonstrates challenging behaviour, it may be necessary to discuss with parents in order to gain or offer information to support the child in gaining or re-gaining acceptable behaviour. In this case a record should be made in the incident report book.

Always look for and encourage positive behaviour by positive communication.





## 15. Anti Bullying Policy

Heads Together activities encourage participants to care for each other, to share and respect each other.

**15.1** We ask all participants taking part in our activities to observe the following aims:

- ✚ To encourage active communication between people of all ages in their communities
- ✚ To encourage debate about the key issues in their communities and discussion as to how to make the area a better place to live in
- ✚ To give a voice to and to tell the stories of all those people and organisations who are making a difference to the area
- ✚ To showcase local talent in writing, music etc.
- ✚ To help affirm a positive identity for the area
- ✚ To have some fun!

**15.2** We ask all those who participate in our projects and programmes to

- ✚ Be respectful of their position and their relationships with other participants, including listeners to radio broadcasts
- ✚ Treat all participants, observers and listeners as respected guests.
- ✚ Not swear during broadcasts.

**15.3** Heads Together will not allow or tolerate any abusive or defamatory remarks to be made during any of our projects or broadcasts and in particular any comments that could be construed as racist, sexist, ageist or homophobic or in any way demeaning. Rather, we will strive to include a range of opinion and representation from all sections of our communities.

**15.4** Bullying can be defined as:

- **Emotional** – being unfriendly, excluding, tormenting
- **Physical** – pushing, kicking, hitting, punching or any use of violence
- **Racist** – racial taunts, graffiti, gestures
- **Sexual** – unwanted physical contact or sexually abusive comments
- **Homophobic** – because of, or focussing on the issue of sexuality
- **Discriminatory** – about disability, gender, age or other differences
- **Verbal** – name-calling, sarcasm, spreading rumours, teasing
- **Cyber** – all areas of internet, such as email and internet chat room misuse
- **Mobile** – threats by text messaging and calls
- **Misuse of associated technology** ie camera and video facilities





### 15.5 Procedures

Heads Together staff will deal with any bullying problems as follows

- Report bullying incidents to staff
- In cases of serious bullying, the incidents will be recorded by staff in the incident report book.
- If the Designated Safeguarding worker and the worker involved with the young person, mutually agree that an incident (or incidents) of bullying is serious, parents/carers will be informed and invited to attend a meeting to discuss the problem.
- The bullying behaviour or threats of bullying must be investigated and the bullying stopped quickly
- An attempt will be made to help the bully (bullies) change their behaviour
- If a participant shows signs of bullying from others outside of the group, staff should liaise with the Designated Child Protection worker. If the participant is a child, the Safeguarding officer will advise as to whether a report should be made to the school the bully is attending and/or a report to the victim's parents/carers is deemed appropriate.







## 16. Code of Conduct

You must:	You <u>must not</u> :
➤ treat all participants with respect	➤ have inappropriate physical or verbal contact with participants
➤ provide an example of good conduct you wish others to follow	➤ allow yourself to be drawn into inappropriate attention-seeking behaviour
➤ ensure that whenever possible there is more than one trainer present during activities with participants, or at least that you are within sight or hearing of others	➤ make suggestive or derogatory remarks or gestures in front of participants
➤ respect a participants right to personal privacy	➤ jump to conclusions about others without checking facts
➤ encourage young people and adults to feel comfortable and caring enough to point out attitudes or behaviour they do not like	➤ either exaggerate or trivialise abuse issues
➤ remember that someone else might misinterpret your actions, no matter how well intentioned	➤ show favouritism to any individual
➤ be aware that even physical contact with a participant may be misinterpreted	➤ rely on your good name or that of Heads Together to protect you
➤ recognise that special caution is required when you are discussing sensitive issues with participants	➤ believe 'it could never happen to me'
➤ operate within the Heads Together principles and guidance and any particular procedures of the company	➤ take a chance when common sense, policy or practice suggests another more prudent approach
➤ challenge unacceptable behaviour and report all allegations/suspensions of abuse	





## 17. E-Safety And Communications Policy

### 17.1 Social Networking

When communicating with participants via social networks, staff should use appropriate language, and any inappropriate content on a member of staff's personal profile should not be accessible to participants. It is preferable for staff to use a separate account from their personal one.

### 17.2 E-mail and telephone communication

When communicating with participants by e-mail, telephone or text message, staff should use appropriate language. No communication should take place other than that which is relevant to the work of Heads Together.

### 17.3 Photography

Upon registering to take part in our activities, participants have the opportunity to declare that they do not wish to have photographs of themselves used in any publicity or report documents. A letter should also be sent to the parent / legal guardian or carer which offers them the same opportunity. Any child, young person or vulnerable adult who has not declared as such may have their photograph published on any of Heads Together's websites.

## 18. Recruitment Policy

Care and attention should be paid to the recruitment and selection of paid staff, freelancers and participants.

- Advertising – All advertising for posts, freelance contracts or participating should include a statement about how employment / participating is subject to suitable safeguarding checks.
- Application process – Ensure that the application form, CV and references correlate and there are no gaps
- DBS Disclosures – All staff working with Heads Together who come into contact with children, young people or vulnerable adults will be required to have an up-to-date DBS Disclosure ie less than 3 years old.

## 19. Schools Policy

An agreement in writing should be sent to a school prior to any activity led by Heads Together staff, outlining the following points:

- A member of school staff must be present at all times during activities led by Heads Together. It will be assumed that the supervising member of staff understands this.
- Heads Together staff may take photographs for use in future publicity and/or report documents. The school must advise Heads Together of any case wherein a parent does not wish to have photographs of his/her child used in this way, or where there is a child protection issue.
- Heads Together staff may make audio recordings for use in radio broadcasts. The school must advise Heads Together of any case wherein a parent does not wish to have the full name of his/her child recorded and/or broadcast.

