

CLOUGHOGUE PRIMARY SCHOOL & NURSERY UNIT



Ag foghlaim 's ag fás le grá
Learning and growing with love

Safeguarding & Child Protection Policy

(Reviewed April 2019)

MISSION STATEMENT

Cloughoge School (Primary and Nursery Unit) is a Catholic School living with Christ at its heart. It is with this foundation that all adults, by example, aim to celebrate the uniqueness of every child and value all their contributions. We will ensure our children are happy, healthy, secure, respected and cared for in their learning environment.

Cloughoge Primary School Community in partnership with our parents and guardians aim to:-

- 1. Share and promote our Catholic ideals, values, and beliefs so our whole community has mutual respect.**
- 2. Promote the spiritual, personal, social, health and academic goals desirable for all our pupils in order to mould them into caring and responsible citizens of the future.**
- 3. Enable our children to become articulate, literate and numerate with early intervention in place as required.**
- 4. Ensure all may become independent and confident learners in a well resourced environment.**
- 5. Encourage the children to develop lively, enquiring, imaginative and creative minds with the ability to question and argue rationally.**
- 6. Highlight the dignity and worth of each individual and promote the development of the whole person to the best each can be as valuable contributors to running our school effectively.**
- 7. Promote the multicultural nature of society and to foster respect for those with different religions, beliefs and ways of life.**
- 8. Involve parent, local schools and the local community as active participants and mutual partners in the education of our children.**
- 9. Ensure we deliver the Northern Ireland Curriculum to the highest standard and include a broad range of rich and meaningful experiences as part of their development in school time or as extra curricular activities.**
- 10. Foster children's awareness of and a caring attitude towards their local and wider community and environment, and of the effects their actions can have on them.**

1. Child Protection Ethos

We in Cloughoge Primary School have a responsibility for the Pastoral Care, general welfare and safety of the children in our care and we will carry out this duty by providing a caring, supportive and safe environment, where each child is valued for his or her unique talents and abilities, and in which all our young people can learn and develop to their full potential. All staff, teaching and non-teaching should be alert to the signs of possible abuse and should know the procedures to be followed. This Policy sets out guidance on the action, which is required where abuse or neglect of a child is suspected and outlines referral procedures within our school. Our main concern is the care, welfare and safety of the children in our school. The welfare of each child is our paramount consideration.

Our Aims are to

1. Sustain the Catholic Ethos of our school as defined in our Pastoral Care Policy.
2. Uphold the rights of the children in our care.
3. Protect our pupils through a range of personal safety programmes across the curriculum by:
 - a. Helping them to learn about the risks of possible abuse.
 - b. Ensuring they can recognise unwelcome behaviour and skills they need to keep themselves safe.
 - c. Enabling them to identify the key members of staff from whom they can seek support
 - d. Include in the curriculum activities and opportunities for PDMU to develop the skills needed to stay safe from abuse.
4. Ensure all members of staff are aware of the signs and symptoms of all forms of abuse.
5. Ensure all staff can identify children in need.
6. Provide a Code of Conduct for staff to follow with regard to their behaviour towards pupils.
7. Implement the policy whereby all staff know how to respond to Child Protection issues, follow procedures, and are aware of the roles and responsibilities of others.
8. Provide opportunities for the Principal, Designated Teacher and Deputy Designated Teachers to consolidate their knowledge, skills and competence in this area.
9. Maintain when necessary a Child Protection / At Risk Register.
10. Inform parents annually of our Pastoral Care/Safeguarding arrangements.
11. Review our policy, procedures and Pastoral Care/Safeguarding leaflet annually.

2. Principles

The general principles, which underpin our work, are those set out in the UN Convention on the Rights of the Child and are enshrined in the Children (Northern Ireland) Order 1995, the Department of Education (Northern Ireland) guidance "Safeguarding and Child Protection in School"(DENI Circular 17/04 and the SBNI Core Policy and Procedures 2017.

The following principles form the basis of our Child Protection Policy.

- It is a child's right to feel safe at all times, to be heard, listened to and taken seriously.
- We have a pastoral responsibility towards the children in our care and should take all reasonable steps to ensure their welfare is safeguarded and their safety is preserved.
- In any incident the child's welfare must be paramount, this overrides all other considerations.
- A proper balance must be struck between protecting children and respecting the rights and needs of parents and families; but where there is conflict the child's interest must always come first.

3. Other Relevant Policies ~

The school has a duty to ensure that safeguarding permeates all activities and functions. This policy therefore complements and supports a range of other school policies including:

- Positive Behaviour
- Pastoral Care
- Anti-Bullying
- Code of Conduct
- Intimate Care
- Acceptable Use of ICT, Internet & E-Safety
- Special Educational Needs
- Health & Safety
- First Aid
- Administration of Medication
- Educational Visits
- Critical Incidents
- Safe Handling/Reasonable Force
- Relationships and Sexuality
- Use and Misuse of Drugs

Policies are available to parents and any parent requiring a copy should contact the School office or visit the school website at www.cloughogeprimaryschool.com

4. School Safeguarding Team

The following are members of the schools Safeguarding Team

- Designated Teacher Mr Mark Murtagh
- Deputy Designated Teacher Mrs Ashlene Mc Kevitt & Miss Paula Rafferty & Mrs Joanne O Hagan
- Principal Mrs Isobel Temple
- Designated Governor for Child Protection Mrs Alice Reilly
- Chair of the Board of Governors Mr John Doherty

5. Roles And Responsibilities

5.1 The Designated Teacher and Deputy Designated Teachers

The designated teacher and deputy designated teachers must:

- Avail of training so that they are aware of duties, responsibilities and role
- Organise training for all staff (whole school training)
- Lead in the development of the school's Child Protection Policy
- Act as a point of contact for staff and parents
- Assist in the drafting and issuing of the summary of our Child Protection arrangements for parents
- Make referrals to Social Services Gateway team or PSNI Public Protection Unit where appropriate
- Liaise with the Education Authority's {EA} Designated Officers for Child Protection
- Maintain records of all child protection concerns
- Keep the School Principal informed
- Provide written annual report to the Board of Governors regarding child protection

5.2 The Principal

The Principal must ensure that:-

- DENI 2017/04 guidance is implemented within the school
- She attends training on Managing Safeguarding and Child Protection
- A designated teacher and deputy designated teacher are appointed
- All staff receive child protection training
- All necessary referrals are taken forward in the appropriate manner
- The Chair of the Board of Governors is kept informed
- Child protection activities feature on the agenda of the Board of Governors meetings and termly updates & annual report are provided
- The school's child protection policy is reviewed annually and that parents and pupils receive a copy/summary of this policy at least once every 2 years
- Confidentiality is paramount. Information should only be passed to the entire Board of Governors on a need to know basis.

5.3 The Designated Governor for Child Protection

The Designated Governor should avail of child protection awareness training delivered by CPSSS and will take the lead in child protection issues in order to advise the Governors on:

- The role of the Designated Teachers
- The content of child protection policies
- The content of a code of conduct for adults within the school
- The content of the termly updates and full Annual Designated Teachers Report
- Recruitment, selection and vetting of staff

5.4 The Chair of the Board of Governors

The Chair of the Board of Governors should:

- Ensure that he has received appropriate Education Authority training
- Ensure that a safeguarding ethos is maintained within the school environment
- Ensure that the school has a Child Protection Policy in place and that staff implement the policy
- Ensure that Governors undertake appropriate child protection and recruitment & selection training provided by the Child Protection Support Service {CPSS} and the Governor Support and Human Resource departments.
- Ensure that a Designated Governor for Child Protection is appointed
- Assume lead responsibility for managing any complaint/allegation against the School Principal
- Ensure that the Board of Governors receive termly updates and a full written annual report in relation to child protection activity

5.5 Other Members of School Staff

Staff in school see children over long periods and can notice physical, behavioural and emotional indicators and hear allegations of abuse.

They should remember the 5 Rs: *Receive, Reassure, Respond, Record and Refer*

The member of staff must:

- refer concerns to the Designated/Deputy Teacher for Child Protection/Principal
- listen to what is being said without displaying shock or disbelief and support the child
- act promptly
- make a concise written record of a child's disclosure using the actual words of the child (**Note of Concern Appendix 1**)
- Avail of whole school training and relevant other training regarding safeguarding children
- **Not** give children a guarantee of total confidentiality regarding their disclosures
- **Not** investigate
- **Not** ask leading questions

In addition the Class Teacher should:

- Keep the Designated Teacher informed about poor attendance and punctuality, poor presentation, changed or unusual behaviour including self-harm and suicidal thoughts, deterioration in educational progress, discussions with parents about concerns relating to their child, concerns about pupil abuse or serious bullying, concerns about home conditions including disclosures of domestic violence.

We will take seriously any concerns which are raised about a pupil in our school who has self-harmed and/or has expressed suicidal thoughts.

The Designated/Deputy Designated teacher will immediately follow the school's child protection procedures.

5.6 Parents/Carers

Parents should play their part in safeguarding by:

- telephoning the school on the morning of their child's absence, or sending in a note on the child's return to school, so as the school is reassured as to the child's situation;
- informing the school whenever anyone, other than themselves, intends to pick up the child after school;
- letting the school know in advance if their child is going home to an address other than their own home;
- familiarising themselves with the School's Pastoral Care, Anti Bullying, Positive Behaviour, Internet and Child Protection Policies;
- reporting to the office when they visit the school
- **raising concerns they have in relation to their child with the school.**

5.7 The Board of Governors

The Board of Governors must ensure that the school fulfils its responsibilities in keeping with current legislation and DE guidance including

- having a Safeguarding and Child Protection Policy which is reviewed annually
- having a staff code of conduct for all adults working in the school
- attendance at relevant training by governors and that up-to-date training records are maintained
- the vetting of all staff and volunteers

6 Specific Types of Abuse

Sexual Exploitation of Children and Young People

Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity {a} in exchange for something the victim needs or wants, and/or {b} for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

Potential indicators of CSE:

- Acquisition of money, clothes, mobile phones etc. without plausible explanation
- Truancy/leaving school without permission
- Persistently going missing or returning late
- Receiving lots of texts/ phone calls prior to leaving
- Change in mood - agitated/stressed
- Appearing distraught/dishevelled or under the influence of substances
- Inappropriate sexualised behaviour for age
- Physical symptoms e.g. bruising; bite marks
- Collected from school by unknown adults or taxis
- New peer groups
- Significantly older boyfriend or girlfriend
- Increasing secretiveness around behaviours
- Low self-esteem
- Change in personal hygiene (greater attention or less)
- Self harm and other expressions of despair
- Evidence or suspicion of substance abuse

While these indicators can be useful in identifying potential risk, their presence does not necessarily mean CSE is occurring. More importantly, nor does their absence mean it is not.

Grooming

Grooming of a child or young person is always abusive and/or exploitative. It often involves perpetrator(s) gaining the trust of the child or young person or, in some cases, the trust of the family, friends or community, and/or making an emotional connection with the victim in order to facilitate abuse before the abuse begins. This may involve providing money, gifts, drugs and/or alcohol or more basic needs such as food, accommodation or clothing to develop the child's/young person's loyalty to and dependence upon the person(s) doing the grooming. The person(s) carrying out the abuse may differ from those involved in grooming which led to it, although this is not always the case.

Domestic Violence

It is now recognised that children who live in an atmosphere of domestic violence may be at risk. 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 are or have

been intimate partners or family members regardless of gender or sexuality. This can encompass, but is not limited to, the following types of abuse:

- Psychological
- Physical
- Sexual
- Financial
- Emotional

Symptoms which young people may display and which are indicators only include:

- Nervousness
- Low self-worth
- Disturbed sleep patterns
- Nightmares / flashbacks
- Physiological – stress / nerves
- Stomach pain
- Bed wetting
- Immature / needy behaviour
- Temper tantrums
- Aggression
- Internalising distress or withdrawal
- Truancy
- Alcohol and drugs
- Bullying

These symptoms can lead to a child/ young person being misdiagnosed as having an illness, learning difficulties, or being naughty or disruptive.

If it comes to the attention of school staff that domestic abuse is or may be a factor for a child/young person this must be passed to the Designated/Deputy Designated Teacher who has an obligation to share the information to Social Services

A child may suffer or be at risk of suffering from one or more types of abuse and abuse may take place on a single occasion or may occur repeatedly over time.

We recognise the impact on children of an abusive family setting and we will report such incidents to the appropriate statutory agency.

Female Genital Mutilation

FGM involves procedures that include the partial or total removal of the external female genital organs for cultural or other non-therapeutic reasons. The practice is medically unnecessary, extremely painful and has serious health consequences, both at the time when the mutilation is carried out and in later life.

FGM is a criminal offence in Northern Ireland. Where there is a concern that a child or young person may be at immediate risk of FGM a report should be made to the PSNI without delay. Where there is a concern that a child or young person may be at risk of FGM, a referral should be made to the relevant HSCT Gateway Services.

Children who Display Harmful Sexualised Behaviour

It is sometimes difficult to distinguish between normal childhood and adolescent sexual development and experimentation, and sexually inappropriate abusive or aggressive behaviour. Professional judgement may be required. However, any cause for concern should be report to the Designated Teacher who will seek advice.

Problematic Sexual Behaviour may include some of the following characteristics:

- Not age appropriate
- One off incident of low key touching over clothes
- Result of peer pressure
- Spontaneous rather than planned
- Lacking in other balancing factors e.g. no intent to cause harm, level of understanding, acceptance of responsibility
- Targeting other children, to irritate and make feel uncomfortable. Often the children are not scared and can feel free to tell someone
- Concerning to parents / carers, supportive
- Sometimes involving substances which disinhibit behaviours

Problematic sexual behaviour requires some level of intervention, depending on the activity and level of concern. For example, a one-off incident may simply require liaising with parents on setting clear direction that the behaviour is unacceptable, explaining boundaries and providing information and education. However, if the behaviour is considered to be more serious, perhaps because there are a number of aspects of concern, advice from the Education Authority CPSS may be required. The CPSS will advise if additional advice from PSNI or Social Services is required.

Harmful Sexualised Behaviour may include some of the following characteristics:

- Lacks the consent of the victim
- When the perpetrator uses threats or violence (verbal, physical or emotional) to coerce or intimidate the victim
- Uses age inappropriate sexually explicit words and phrases
- Involves inappropriate touching
- Involves sexual behaviour between children – it is also considered harmful if one of the children is much older – particularly if there is more than two years' difference in age or if one of the children is pre-pubescent and the other is not.
- Involves a younger child abusing an older child, particularly if they have power over them – for example, if the older child is disabled.

Harmful sexualised behaviour will always require intervention and school must seek the support that is available from the CPSS.

Abusive Images of Children

The production of abusive images of children can involve contact sexual abuse of children and/or the manipulation of innocent images, including video, film or photographic data. Such images are often distributed for sexual gratification and sometimes for financial gain. Modern technology has become a key mechanism for distributing abusive images of children and/or young people. Where abusive images or images intended for sexual gratification are identified as that of a child or young person, this must be referred to the Gateway Service in the relevant HSCT and/or the PSNI

E-Safety/Internet Abuse

Online safety means acting and staying safe when using digital technologies. It is wider than simply internet technology and includes electronic communication via text messages, social environments and apps, and using games consoles through any digital device. In all cases, in schools and elsewhere, it is a paramount concern.

Four categories have been identified

- Content risks: the child or young person is exposed to harmful material.
- Contact risks: the child or young person participates in adult initiated online activity.
- Conduct risks: the child or young person is a perpetrator or victim in peer-to-peer exchange.
- Commercial risks: the child or young person is exposed to inappropriate commercial advertising, marketing schemes or hidden costs.

Please refer to e safety policy and safer internet use policy

Sexting

Sexting is the sending or posting of sexually suggestive images, including nude or semi-nude photographs, via mobiles or over the Internet. There are two aspects to Sexting:

1. Sexting between individuals in a relationship

Pupils need to be aware that it is illegal, under the Sexual Offences (NI) Order 2008, to take, possess or share 'indecent images' of anyone under 18 even if they are the person in the picture (or even if they are aged 16+ and in a consensual relationship) and in these cases the school should contact local police on 101 for advice and guidance. Advice should be sought from CPSS.

Forced Marriage

A Forced Marriage is a marriage conducted without the valid consent of one or both parties and where duress is a factor. Forced Marriage is a criminal offence in Northern Ireland, and where an agency, organisation or practitioner has knowledge or suspicion of a forced marriage in relation to a child or young person, they should contact the PSNI immediately

Warning signs within the school environment:

- Absence and persistent absence.
- Request for extended leave of absence/failure to return from visits to country of origin.
- Surveillance by siblings or cousins.
- Decline in behaviour, engagement, performance or punctuality.
- Poor exam results.
- Being withdrawn from school by those with parental responsibility and not being provided with suitable education at home.
- Not allowed to attend extracurricular activities.
- Sudden announcement of engagement to a stranger.
- Prevented from going on to further/higher education.

Fabricated or Induced Illness (FII)

Harm may be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child. Fabricated or induced illness by parents or carers can cause significant harm to children.

The Concepts of Harm and Significant Harm

The Children Order defines 'harm' as ill-treatment or the impairment of health or development. The Order states that 'ill-treatment' includes sexual abuse, forms of ill-treatment which are physical and forms of ill-treatment which are not physical; 'health' means physical and / or mental health; and 'development' means physical, intellectual, emotional, social or behavioural development.

There is no absolute definition of 'significant harm', as this will be assessed on a case by case basis. Article 50(3) of the Children Order states that "where the question of whether harm suffered by a child is significant turns on the child's health or development, his health or development shall be compared with that which could reasonably be expected of a similar child".

Where we suspect harm a referral will be made to the local Gateway Team

Dealing with Children with Increased Vulnerabilities

Children with a Disability

Children and young people with disabilities (ie any child or young person who has a physical, sensory or learning impairment or a significant health condition) may be more vulnerable to abuse and individuals and organisations working with children with disabilities should be aware of any vulnerability factors associated with risk of harm, and any emerging child protection issues. Staff must be aware that communication difficulties can be hidden or overlooked making disclosure particularly difficult. Staff and volunteers working with children should receive training to enable them to identify and refer concerns early, to allow preventative action to be taken.

Children / Young People Who Go Missing

Children and young people who go missing come from all backgrounds and communities and are known to be at greater risk of harm. This includes risks of being sexually abused or exploited although children and young people may also become homeless or a victim or perpetrator of crime. Those who go missing from their family home may have no involvement with services as not all children and young people who run away or go missing from their family home have underlying issues within the family, or are reported to the police as missing.

The patterns of going missing may include overnight absences or those who have infrequent unauthorised absences of short time duration. When a child or young person returns, having been missing for a period, we should be alert to the possibility that they may have been harmed and to any behaviours or relationships or other indicators that children and young people may have been abused.

Young people in Supported Accommodation

Staff should be aware of and adhere to additional guidance for young people leaving care and those living in supported accommodation.

Children of Parents with Additional Support Needs

Children and young people can be affected by the disability of those caring for them. Parents, carers or siblings with disabilities may have additional support needs which impact on the safety and wellbeing of children and young people in the family, possibly affecting their education or physical and emotional development. It is important that any action taken to safeguard children and young people at risk of harm in these circumstances encompasses joint working between specialist disability and children's social workers and

other professionals and agencies involved in providing services to adult family members. This will assist in ensuring the welfare of the children and young people in the family is promoted and they are safeguarded as effectively as possible. Where it is known or suspected that parents or carers have impaired ability to care for a child, consideration should be given to the need for a child protection response in addition to the provision of family support and intervention.

Children with limited fluency in English

As with children with a special educational need, children who are not fluent in English should be given the chance to express themselves to a member of staff or other professional with appropriate language/communication skills, especially where there are concerns that abuse may have occurred.

Designated teachers should work with their SEN co-ordinators along with school staff with responsibility for newcomer pupils, seeking advice from the EA's Inclusion and Diversity Service to identify and respond to any particular communication needs that a child may have. All schools should try to create an atmosphere in which pupils with special educational needs which involve communication difficulties, or pupils for whom English is not their first language, feel confident to discuss these issues or other matters that may be worrying them.

Gender Identity issues and Sexual orientation

Young people from the LGBTQ community may face particular difficulties which could make them more vulnerable to harm. These difficulties could range from intolerance and homophobic bullying from others to difficulties for the young person themselves in exploring and understanding their sexuality. At such times young people may be more vulnerable to predatory advances from adults seeking to exploit or abuse them. This could impede a young person's ability or willingness to raise concerns if they feel they are at risk or leave young people exposed to contact with people who would exploit them.

As a staff working with young people from the LGBT community we will support them to appropriately access information and support on healthy relationships and to report any concerns or risks of abuse or exploitation

Children / Young People's Behaviours

Peer Abuse

Children and young people may be at risk of physical, sexual and emotional bullying and abuse by their peers. Such abuse should always be taken as seriously as abuse perpetrated by an adult. Where a child or young person has been harmed by another, all professionals should be aware of their responsibilities in relation to both children and young people who perpetrate the abuse as well as those who are victims of it and contribute to an inter-disciplinary and multi-agency response.

Self-harm

Self-harm encompasses a wide range of behaviours and things that people do to themselves in a deliberate, and usually hidden way, which are damaging. It may indicate a temporary period of emotional pain or distress, or deeper mental health issues which may result in the development of a progressive pattern of worsening self-harm that may ultimately result in death by misadventure or suicide. Self-harm may involve abuse of substances such as alcohol or drugs, including both illegal and/or prescribed drugs. Self-harming behaviours may indicate that a child or young person has suffered abuse; however this is not always the case. Appropriate advice should be sought from

appropriately qualified and experienced professionals including those in the non-statutory sector to make informed assessments of risk in relation to self-harming behaviours.

Suicidal Ideation

It is important that children and young people who communicate thoughts of suicide or engage in para-suicidal behaviours are seen urgently by an appropriately qualified and experienced professional, including those in the non-statutory sector, to ensure they are taken seriously, treated with empathy, kindness and understanding and informed assessments of risk and needs can be completed as a matter of priority. What Is Child Abuse?

6.1 Signs and symptoms of abuse ~ Possible Indicators

Physical Abuse

<u>Physical Indicators</u>	<u>Behavioural Indicators</u>
Unexplained bruises – in various stages of healing – grip marks on arms; slap marks; human bite marks; welts; bald spots; unexplained/untreated burns; especially cigarette burns (glove like); unexplained fractures; lacerations; or abrasions; untreated injuries; bruising on both sides of the ear – symmetrical bruising should be treated with suspicion; injuries occurring in a time pattern e.g. every Monday	Self-destructive tendencies; aggressive to other children; behavioural extremes (withdrawn or aggressive); appears frightened or cowed in presence of adults; improbable excuses to explain injuries; chronic runaway; uncomfortable with physical contact; come to school early or stays last as if afraid to be at home; clothing inappropriate to weather – to hide part of body; violent themes in art work or stories

Emotional Abuse

<u>Physical Indicators</u>	<u>Behavioural Indicators</u>
Well below average in height and weight; “failing to thrive”; poor hair and skin; alopecia; swollen extremities i.e. icy cold and swollen hands and feet; recurrent diarrhoea, wetting and soiling; sudden speech disorders; signs of self-mutilation; signs of solvent abuse (e.g. mouth sores, smell of glue, drowsiness); extremes of physical, mental and emotional development (e.g. anorexia, vomiting, stooping).	Apathy and dejection; inappropriate emotional responses to painful situations; rocking/head banging; inability to play; indifference to separation from family indiscriminate attachment; reluctance for parental liaison; fear of new situation; chronic runaway; attention seeking/needing behaviour; poor peer relationships.

Neglect

Physical Indicators	Behavioural Indicators
Looks very thin, poorly and sad; constant hunger; lack of energy; untreated medical problems; special needs of child not being met; constant tiredness; inappropriate dress; poor hygiene; repeatedly unwashed; smelly; repeated accidents, especially burns.	Tired or listless (falls asleep in class); steals food; compulsive eating; begging from class friends; withdrawn; lacks concentration; misses school medicals; reports that no carer is at home; low self-esteem; persistent non-attendance at school; exposure to violence including unsuitable videos.

Sexual Abuse

Physical Indicators	Behavioural Indicators
Bruises, scratches, bite marks or other injuries to breasts, buttocks, lower abdomen or thighs; bruises or bleeding in genital or anal areas; torn, stained or bloody underclothes; chronic ailments such as recurrent abdominal pains or headaches; difficulty in walking or sitting; frequent urinary infections; avoidance of lessons especially PE, games, showers; unexplained pregnancies where the identify of the father is vague; anorexia/gross over-eating.	What the child tells you; withdrawn; chronic depression; excessive sexual precociousness; seductiveness; children having knowledge beyond their usual frame of reference e.g. young child who can describe details of adult sexuality; parent/child role reversal; over concerned for siblings; poor self-esteem; self-devaluation; lack of confidence; peer problems; lack of involvement; massive weight change; suicide attempts (especially adolescents); hysterical/angry outbursts; lack of emotional control; sudden school difficulties e.g. deterioration in school work or behaviour; inappropriate sex play; repeated attempts to run away from home; unusual or bizarre sexual themes in children's art work or stories; vulnerability to sexual and emotional exploitation; promiscuity; exposure to pornographic material.

The following are guidelines for use by staff should a child disclose concerns of a child protection nature.

Do:	Do not:
<ul style="list-style-type: none"> ❖ Listen to what the child says ❖ Assure the child they are not at fault ❖ Explain to the child that you cannot keep it a secret ❖ Document exactly what the child says using his/her exact words ❖ Remember not to promise the child confidentiality ❖ Stay calm ❖ Listen ❖ Accept ❖ Reassure ❖ Explain what you are going to do ❖ Record accurately ❖ Seek support for yourself 	<ul style="list-style-type: none"> ❖ Ask leading questions. ❖ Put words into the child's mouth. ❖ Ignore the child's behaviour. ❖ Remove any clothing. ❖ Panic ❖ Promise to keep secrets ❖ Ask leading questions ❖ Make the child repeat the story unnecessarily ❖ Delay ❖ Start to investigate ❖ Do Nothing

7. Procedures for making complaints in relation to child abuse

7.1 How a Parent can make a Complaint

We aim to work closely with parents/guardians in supporting all aspects of their child's development and well-being. Any concerns a parent may have will be taken seriously and dealt with in a professional manner. If a parent has a concern they can talk to the class teacher or any member of the school's safeguarding team: the Principal, the Designated or Deputy Designated Teacher for child protection. If they are still concerned they may write to the Chair of the Board of Governors. At any time a parent may talk to a social worker in the local Gateway team or to the PSNI Public Protection Unit. Details of who to contact are shown in the flowchart in **Appendix 2**.

7.2 Where the school has concerns or has been given information about possible abuse by someone other than a member of the school staff including volunteers

Where staff become aware of concerns or are approached by a child they should not investigate as this is the responsibility of Social Services and/or PSNI. Staff should report these concerns immediately to the Designated/Deputy Teacher and full notes should be made. These notes or records should be factual, objective and include what was seen, said, heard or reported. They should include details of the place and time and who was present and should be given to the Designated/Deputy Designated Teacher. The person who reports the incident must treat the matter in confidence.

The Designated/Deputy Designated Teacher will decide whether in the best interest of the child the matter needs to be referred to Social Services. If there are concerns that the child may be at risk, the school is obliged to make a referral. Unless there are concerns that a parent may be the possible abuser, the parent will be informed immediately.

The Designated/Deputy Designated Teacher may consult with members of the school's safeguarding team, the Education Authority's Designated Officer for Child Protection or Social Services Gateway Team before a referral is made. During consultation with the EA Designated Officer the child's details will be shared. No decision to refer a case to Social Services will be made without the fullest consideration and on appropriate advice. The safety of the child is our prime priority.

Where there are concerns about possible abuse and a referral needs to be made the Designated/Deputy Designated Teacher will telephone Social Services Gateway Team. A UNOCINI (Understanding the Needs of Children in Northern Ireland) referral form will also be completed and forwarded to the Gateway team and a copy will be kept in the school's child protection file.

If the Principal has concerns that a child may be at immediate risk from a volunteer, the services of the volunteer will be terminated immediately.

This procedure with names and contact numbers is shown in **Appendix 3**.

7.3 Where a complaint has been made about possible abuse by a member of the school's staff

If a complaint about possible child abuse is made against a member of staff, the Principal (or Designated/Deputy Designated Teacher if the Principal is not available) **must be informed immediately**. The above procedures will apply (unless the complaint is about the Principal/Designated/Deputy Designated Teacher)

If a complaint is made against the Principal the Designated/Deputy Designated Teacher will inform the Chairperson of the Board of Governors who will ensure that necessary action is taken.

Where the matter is referred to Social Services the member of staff may be removed from duties involving direct contact with pupils or may be suspended from duty as a precautionary measure pending investigation by the appropriate authorities. The Chair of the Board of Governors will be informed immediately.

Child protection procedures as outlined in Appendix will be followed in keeping with current Department of Education guidance.

This procedure with names and contact numbers is shown in **Appendix 4**

8. Attendance at Child Protection Case Conferences, LAC and Core Group Meetings

The Designated Teacher/Deputy Designated Teacher or Principal may be invited to attend an initial and review Child Protection Case Conferences and/or core group meetings convened by the Health & Social Care Trust. They will provide a written report which will be compiled following consultation with relevant staff. Feedback will be given to staff under the 'need to know' principle on a case-by-case basis. Children whose names are on the Child Protection register will be monitored and supported in accordance with the child protection plan.

9. Confidentiality And Information Sharing

Information given to members of staff about possible child abuse cannot be held "in confidence". In the interests of the child, staff have a responsibility to share relevant information about the protection of children with other professionals particularly the investigative agencies. Where abuse is suspected schools have a legal duty to refer to the Statutory Agencies. In keeping with the principle of confidentiality, the sharing of information with school staff will be on a 'need to know' basis.

Should a child transfer to another school whilst there are current child protection concerns we will share these concerns with the Designated Teacher in the receiving school.

10. Record Keeping

All child protection records, information and confidential notes are kept in separate files in a locked drawer. These records are kept separate from any other file that is held on the child or young person and are only accessible by members of the safeguarding team.

11. Vetting Procedures

All staff paid or unpaid who are appointed to positions in the School are vetted / supervised in accordance with relevant legislation and Departmental guidance.

12. Code Of Conduct For all Staff Paid Or Unpaid

All actions concerning children and young people must uphold the best interests of the young person as a primary consideration. Staff must always be mindful of the fact that they hold a position of trust and that their behaviour towards the child and young people in their charge must be above reproach.

The school's code of conduct is available on request.

13. Staff Training

Cloughoge Primary School is committed to in-service training for its entire staff. Each member of staff will receive general training on Policy and procedures with some members

of staff receiving more specialist training in line with their roles and responsibilities. All staff will receive basic child protection awareness training and annual refresher training. The Principal/Designated Teacher/Deputy Designated Teacher, Chair of the Board of Governors and Designated Governor for Child Protection will also attend relevant child protection training courses provided by the Child Protection Support Service.

When new staff or volunteers start at the school they are briefed on the school's Child Protection Policy and Code of Conduct and are given a copy of our Pastoral Care leaflet.

14. The Preventative Curriculum

Throughout the school year child protection issues are addressed through class assemblies and there is a permanent child protection notice board in the main corridor and relevant information in each resource area, which provides advice and displays child helpline numbers. A flow diagram of how a parent may make a complaint/raise a concern is also on display and a diagram for a teacher allegation is displayed in the staff room.

Other initiatives which address child protection and safety issues include:

- PDMU curriculum activities including use of the Special room for circle time etc.
- A-Live O/Grow in Love Religion programmes.
- Stranger Danger activities
- Liaison with Community PSNI officer
- E-Safety – CEOP activities including workshops and promotion of Internet Safety Day
- Childline assemblies, posters and workshops
- Anti-Bullying activities and competitions
- Health Awareness Week
- Personal Development presentations for P6 & 7 children
- UNICEF Rights Respecting Schools initiative – Class Charters

15. Monitoring And Evaluation

The Safeguarding Team in Cloughoge Primary School will update this Policy and Procedures in the light of any further guidance and legislation as necessary and review it annually.

The Board of Governors will also monitor child protection activity and the implementation of the Safeguarding and Child Protection policy on a regular basis through the provision of reports from the Designated Teacher.

On-going evaluation will ensure the effectiveness of the Policy.

Date Policy Reviewed: _____

Signed:

_____ (Designated Teacher)

_____ (Principal)

_____ (Chair of Board of Governor)

Appendix 1
Cloughoge Primary School



CONFIDENTIAL

NOTE OF CONCERN

CHILD PROTECTION RECORD - REPORTS TO DESIGNATED TEACHER

Name of Pupil:
Year Group:
Date, time of incident / disclosure:
Circumstances of incident / disclosure:
Nature and description of concern:
Parties involved, including any witnesses to an event and what was said or done and by whom:

Action taken at the time:	
Details of any advice sought, from whom and when:	
Any further action taken:	
Written report passed to Designated Teacher: If 'No' state reason:	Yes: <input type="checkbox"/> No: <input type="checkbox"/>
Date and time of report to the Designated Teacher:	
Written note from staff member placed on pupil's Child Protection file If 'No' state reason:	<input type="checkbox"/>

Name of staff member making the report: _____

Signature of Staff Member: _____ Date: _____

Signature of Designated Teacher: _____ Date: _____

Appendix 2

If a parent has a potential child protection concern:

I have a concern about my/a child's safety



I can talk to the class/form teacher



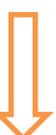
If I am still concerned, I can talk to the Designated/ Deputy Designated Teacher for child protection or the Principal



If I am still concerned, I can talk/write to the Chair of Board of Governors



If I am still concerned I can contact the NI Public Services Ombudsman
Tel: 0800 343 424



At any time I can talk to the local Children's Services Gateway Team [Telephone 0800 783 7745] or the PSNI Central Referral Unit at 028 9025 9299

Appendix 3

Procedure where the School has concerns, or has been given information, about possible abuse by someone other than a member of staff

Member of staff completes the Note of Concern on what has been observed or shared and must ACT PROMPTLY.

Source of concern is notified that the school will follow up appropriately on the issues raised.

Staff member discusses concerns with the Designated Teacher or Deputy Designated Teacher in his/her absence and provides note of concern.

Designated Teacher should consult with the Principal or other relevant staff before deciding upon action to be taken, always taking care to avoid undue delay. If required advice may be sought from a CPSS officer

Child Protection referral is required

Designated Teacher seeks consent of the parent/carer and/or the child (if they are competent to give this) unless this would place the child at risk of significant harm then telephones the Children's Services Gateway Team and/or the PSNI if a child is at immediate risk. He/she submits a completed UNOCINI referral form within 24 hours.

Designated Teacher clarifies/discusses concern with child/ parent/carers and decides if a child protection referral is or is not required.

Child Protection referral is not required

School may consider other options including monitoring the situation within an agreed timescale; signposting or referring the child/parent/carers to appropriate support services such as the Children's Services Gateway Team or local Family Support Hub with parental consent, and child/young person's consent (where appropriate).

Where appropriate the source of the concern will be informed as to the action taken. The Designated Teacher will maintain a written record of all decisions and actions taken and ensure that this record is appropriately and securely stored.

Appendix 4

Dealing with Allegations of Abuse Against a Member of Staff

