

**CARRICKFERGUS**

**MODEL SCHOOL**



**Policy for Child Protection and  
Safe-Guarding**



## **Carrickfergus Model School – Child Protection and Safe-Guarding Policy** **(CP&SG)**

### **Ethos Statement**

The Model Primary School is a co-educational controlled Primary School. Our School Motto is one of inspiring excellence through example, endeavour and encouragement. We promote pastoral vigilance and pride in high standards within our whole school community. We aim to create an orderly, caring and calm environment where teachers teach and children learn.

Central to the creation of this environment is a commitment to Christian values, the recognition of the worth and value of each child and the cultivation of self-respect, so that the child may accept his/her appropriate responsibilities and show respect for others. We aim to establish a community wherein pupils, teachers, parents and support staff enjoy a sense of belonging and have an important part to play. Whilst we attempt to express Christian values in the life of the school, we remain open to all children and their parents and believe that diversity in the school community enhances the educational experience for everyone.

The Model Primary School has a strong tradition of high standards of pupil attainment and this is reflected in the expectations held by staff for pupils in terms of their attitude, approach and application to learning, school discipline, respect for others, appearance and attendance. We value the need for clear expectations, rules and procedures, which encourage children to take responsibility for their own actions. Well established routines and clear communication contribute to a sense of well-being, safety and security for each child.

As part of our pastoral care in the Model Primary School and our statutory obligation and awareness of Child Protection & Safe-Guarding, the Board of Governors and Staff have agreed the following aims and rationale of this policy.

*“Schools are expected to do whatever is reasonable, in all the circumstances of the case, to safeguard and promote their pupils’ safety and wellbeing. Every school should work to create and maintain an ethos which contributes to the care, safety and well-being of children or young people and must maintain a child protection policy that reflects both its legal duties and its safeguarding and child protection responsibilities.”*

*(Safeguarding and Child Protection in schools: DENI: 2017: Page 4-6)*

### **Aims**

- To outline arrangements for Child Protection & Safe-Guarding within school
- To recognise the legislative and policy context
- To define the various forms of child abuse
- To make clear school procedures and protocols

- To outline the methods of recording and reporting

### **Rationale**

At the Model Primary School we want all pupils;

- To feel safe and secure in their environment;
- To know how to access the help that they need;
- To have opportunities for class and group discussion of thoughts and feelings in an atmosphere of trust, acceptance and tolerance;
- To develop a positive self-image;
- To develop positive relationships at all levels; and
- To be able to make well informed decisions and choices in order to protect themselves from harm or danger.

Summary of key principles of Safe-Guarding and Child Protection (2.1).

- The child or young person's welfare is paramount.
- The voice of the child or young person should be heard.
- Parents are supported to exercise parental responsibility and families helped to stay together.
- Partnership.
- Prevention.
- Responses should be proportionate to the circumstances.
- Protection.
- Evidence-based and informed decision making.

### **1. Child Protection & Safe-Guarding: The Legal Context**

*'Safeguarding is more than child protection. Safe-Guarding begins with preventative education and activities which enable children and young people to grow up safely and securely in circumstances where their development and wellbeing is promoted. It includes support to families and early intervention to meet the needs of children and continues through to child protection, which refers specifically to the activity that is undertaken to protect individual children or young people who are suffering, or likely to suffer harm.'*

*(Safeguarding and Child Protection in schools: DENI: 2017)*

## **CHILD PROTECTION – THE LEGAL CONTEXT**

- The Criminal Law Act (NI)1967
- United Nations Convention on the Rights of the Child 1991
- The Children (NI) Order 1995
- The Human Rights Act 1998
- The Public Interest Disclosure (NI) Order 1998
- The Education (NI) Order 1998
- Family Homes and Domestic Violence (NI) Order
- The Sexual Offences Act 2003
- Education and Libraries Order 2003 – Welfare and Protection
- Protection of Children and Vulnerable Adults (NI) Order 2003
- Regional Policy Framework on the use of Reasonable Force and Safe Handling
- Safeguarding Vulnerable Groups (NI) order 2007
- The Sexual Offences Order 2008
- Safeguarding Board NI 2011
- Protection of Freedoms Act 2012
- SENDO Legislation
- The Children’s Services Co-operation Act (NI) 2015
- The Public Services Ombudsman Act (NI) 2016
- The Addressing Bullying in Schools Act (NI) 2016
- All applicable DE Circulars

## **2. Key Roles & Responsibilities**

- a. Education Authority Officers
- b. The Board of Governors
- c. School Designated Teacher for Child Protection (DT)
- d. School Deputy Teacher for Child Protection (DDT)
- e. School staff, teaching and non-teaching
- f. The School Curriculum
- g. Parents
- h. Children
- i. Whole School Arrangements
- j. Visitors

### ***a. Education Authority Officers***

Personnel in the EA fulfil an important role in providing invaluable advice in Child Protection Matters. Currently the personnel are as follows;

- Designated Child Protection Officers: Ms Elaine Craig  
Mr Michael Kelly  
Mrs Collen Ellison
- Education & Welfare Officer: Mrs Ruth Fitzpatrick
- Education Psychologist: Mrs Dionne Connelly

## **b. *The Board of Governors***

### **Chairperson**

The chairperson of the Board of Governors plays a pivotal role in creating and maintaining the safeguarding ethos within the school environment.

In the event of a safeguarding and child protection complaint being made against the Principal, it is the Chairperson who must assume lead responsibility for managing the complaint/allegation in keeping with guidance issued by DENI, employing authorities and the school's own policies and procedures.

The Chairperson is also responsible for ensuring child protection records are kept and for signing and dating the Record of Child Abuse Complaints annually, even if there have been no entries.

### **Designated Governor for Child Protection**

The Board of Governors will delegate a specific member of the governing body to take the lead in safeguarding/child protection issues in order to be able 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, vetting and induction of staff

### **Board of Governors**

The full Board of Governors play a vital role and hold responsibilities in all aspects of our Child Protection Policy.

- To Safe-Guard and promote the welfare of pupils.
- Have a written Child Protection Policy.
- Will successfully address the prevention of bullying in school behaviour management policies.

### **Training**

Child Protection Training for school governors has 3 specific strands:

- Initial Child Protection Training as part of the induction programme for all new governors
- Child Protection Training from the CPSS for Chairperson and Designated Governor for Child Protection in order that they can assist the full Board of Governors with their child protection governance. This should be completed every 4 years.
- Training on recruitment, selection and vetting which incorporates child protection legislation and DE guidance for all governors who will be sitting on interview or teacher appointments panels.

On line training packages from ESAGs TV will also be used.

### ***c. The Principal***

The Principal will;

- Assist Board of Governors to fulfil its Safe-Guarding and Child Protection duties, keeping them informed of any changes to guidance, procedure or legislation relating to Safe-Guarding and Child Protection, ensuring any circulars and guidance from the Department of Education is shared promptly, and termly inclusion of Child Protection activities on the Board of Governors meeting agenda. In addition, the Principal takes the lead in managing Child Protection concerns relating to staff.
- Ensure that parents and staff receive a copy, or summary of the Child Protection policy at intake and at a minimum every 2 years.

### ***d. The Designated Teacher for Child Protection & Safe-Guarding***

The School's Designated Teacher for Child Protection & Safe-Guarding is Mrs S. Mitchell. Her role is:

- To attend Safe-Guarding and Child Protection Training every 3 years.
- To be available to discuss Safe-Guarding and Child Protection concerns of any member of staff.
- To maintain a current awareness of early intervention supports and other local services eg Family Support Hubs.
- To make referrals to social services or PSNI, where appropriate.
- To liaise with the EA designated Officers for Child Protection.
- To keep the Principal informed.
- To exercise professional judgement and confidentiality on complex and emotive issues.
- To keep up to date with relevant legislation and Education Authority/Department of Education guidance.
- To report to Board of Governors on Safe-Guarding and Child Protection matters.
- To report to ETI on Safe-Guarding and Child Protection matters in school.
- To have responsibility for secure record keeping of all Child Protection concerns.
- To compile regular written reports on Child Protection for the Board of Governors.
- To contribute to the Board of Governors Annual Report.
- Ensure Primary parents receive copy of the policy as part of the Primary 1 Induction package.
- Notify the Chair of Board of Governors if there is a complaint against the Principal; To ensure the induction and training of all school staff, teaching and non-teaching as Designated Teacher for Safe-Guarding and Child Protection every 2 years.
- To be the lead responsibility for the development of the school's Safe-Guarding and Child Protection policy which is to be revised and ratified by the Board of Governors annually.
- To promote a Safe-Guarding and Child Protection ethos in the school.

- To lead staff meetings / key stage meetings, where appropriate.
- To build capacity in our staff through support, guidance, direction, coaching, mentoring, example and continuing professional development opportunities.

#### ***e. Deputy Designated Teacher for Child Protection & Safe-Guarding***

The School's Deputy Designated Teacher for Child Protection & Safe-Guarding is the Principal, Mrs J. Miller. Her role is to work co-operatively with the Designated Teacher in fulfilling her responsibilities.

It is important that the Deputy Designated Teacher works in partnership with the Designated Teacher so that she develops sufficient knowledge and experience to undertake the duties of the Designated Teacher when required. Deputy Designated Teachers are also provided with the same specialist training by CPSS to help them in their role.

Schools may have more than one Deputy Designated Teacher. At Carrickfergus Model, we have the Safeguarding Team.

#### ***f. School staff, teaching and non-teaching***

All school staff have important roles and responsibilities in relation to the effective implementation of our Child Protection & Safe-Guarding arrangements. The school plays a huge part in teaching children how to keep safe and how to become responsible, caring and confident. At the Model Primary School we encourage children to look after one another and protect more vulnerable members of the school community.

The teachers in the Model Primary School have specific training, knowledge and experience in all aspects of child development. They should be able to detect changes in a child's behaviour over time or to observe a child's failure to thrive.

Non-teaching staff also have a responsibility to keep children safe in all areas of the school. More importantly, children will often confide in non-teaching staff as playtimes can be a less threatening time to make disclosures to adults.

Adherence to the Staff Code of conduct is expected by all staff.

#### ***g. The School (Preventative) Curriculum***

*“The statutory personal development curriculum requires schools to give specific attention to pupils’ emotional wellbeing, health and safety, relationships, and the development of moral thinking and value system. The curriculum also offers a medium to explore sensitive issues with children and young people in an age-appropriate way which helps to develop appropriate protective behaviours.”*

*(Safeguarding and Child Protection in schools: DENI: 2017)*

The Model is committed to raise awareness of social, emotional, and health issues, developing the confidence, resiliencies and coping skills of pupils, and offering early intervention when pupils are experiencing certain difficulties.

The personal development curriculum and wellbeing of pupils has a high priority in the School Development Plan and keeping safe messages are embedded throughout the school.

Parents are consulted and informed about our 'Preventative Curriculum.'

#### **h. Parents**

*"The primary responsibility for safeguarding and protection of children rests with parents who should feel confident about raising any concerns they have in relation to their child."*

*(Safeguarding and Child Protection in schools: DENI: 2017)*

At intake, parents should receive at least a summary of:

- Child Protection Policy (every 2 years after intake)
- Pastoral Care
- Anti-Bullying
- Positive behaviour
- E-safety
- Complaints

Parents must inform the school if:

- Their child has a medical condition or educational need
- There are any court orders relating the safety or wellbeing of a parent or child
- If there is any change in a child's circumstances
- Changes to who brings their child to and from school
- Their child is absent and send a note on the child's return to school

The arrangements for raising a child protection concern is included below:



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



I can talk to the class/form teacher



If I am still concerned, I can talk to a member of the Safeguarding Team:

- Designated Teacher: Mrs S Mitchell
- Deputy Designated Teacher: Mrs J Miller
- Vice Principal: \_\_\_\_\_
- Care and Welfare Co-ordinator: Miss Manson



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 or the PSNI Central Referral Unit at 028 9025 9299

## **Dealing with Allegations of Abuse made Against a Member of Staff**

Where a complaint about possible abuse is made against a member of staff, the procedures in Circular 2015/13 should be followed. In all decisions, the child's welfare is the paramount consideration and the child should be listened to and his/her concerns taken seriously. The possible risk of harm to children posed by a member of staff must be evaluated and managed and in some cases this will require consideration of suspension as a precautionary measure.

As employers, Principals and Board of Governors have a duty of care to their staff and should ensure they provide effective support for anyone facing an allegation of abuse.

In the interests of all involved the issue should be dealt with as a priority and unnecessary delays should be avoided.

### ***i. Children***

Children play an active role in our approach to our Child Protection & Safe-Guarding arrangements. All children are provided with a planned programme of learning opportunities to enable them to acquire the knowledge, understanding and skills necessary to take responsibility for the decisions they make and to develop awareness of Child Protection & Safe-Guarding issues.

### ***j. Whole School Arrangements***

The following arrangements are the practical workings of the policy. This is not an exhaustive list as many other school policies also contain practical day to day arrangements for the protection of our children.

- A main school noticeboard features photographs of all school staff
- A staff room noticeboard contains policy documents and reminders for all school staff
- Posters around the school alert children to who they can speak to if they're worried about something
- All classrooms have a system for reporting worries to their class teacher
- The School Council can also report concerns to the Principal during School Council Meetings
- Clear arrangements are made for the arrival and pick-up of children
- A buzzer system works throughout the school so the site is secure
- Staff and anyone working with the children have been vetted by Access NI
- Risk Assessments are carried out when necessary
- Permission is sought from parents regarding the publication of a photograph of their child (See Appendix iii)
- Children are taught how to use the internet safely

### ***k. Visitors***

All visitors to school are issued with guidelines regarding Child Protection & Safe-Guarding and wear a visitor tag for the duration of their stay (See Appendix i).

Visitors to school, such as parents, suppliers of goods and services, to carry out maintenance etc do not routinely need to be vetted before being allowed onto school

premises. However, such visitors should be managed by school staff and their access to areas and movement within the school should be restricted as needs required.

Visitors are:

- Required to report to the office
- Directed by school staff
- Signed in and out of the school by staff
- If appropriate be given restricted access
- Where possible, be escorted by a member of staff/representative
- Clearly identified with visitor/contractor passes
- Access to pupils restricted to the purpose of their visit
- If delivering goods or carrying out building maintenance or repair tasks their work should be cordoned off from pupils for health and safety reasons.

Pupils on work experience:

- Pupils coming into school on work experience do not require AccessNI clearance if they are fully supervised by school staff.
- Health and Social Care programmes will require an Enhanced Disclosure Certificate for pupils on long term placement.

### **3. What is Child Abuse?**

*A child in need of protection is a child who is at risk of, or likely to suffer significant harm which can be attributed to a person or persons or organisation, either by an act of commission or omission; or a child who has suffered or is suffering significant harm. 'Harm' means ill treatment or the impairment of health or development, and the question of whether harm is significant is determined in accordance with Article 50(3) of the children order.*

*(Safeguarding and Child Protection in schools: DENI: 2017)*

*'The first step in recognising abuse is the ability to entertain the possibility of abuse taking place.'*

*S. Sgroi 1982*

Appendix v outlines guidance for staff in identifying abuse.

Appendix ii (a – c) gives detailed information about the following;

- Appendix ii (a) Guidance for Physical Abuse (including Female Genital Mutilation)
- Appendix ii (b) Guidance for Sexual Abuse (including Sexual Exploitation of Young People)
- Appendix ii (c) Guidance for Neglect & Emotional Abuse (including Domestic Abuse)

### **4. Procedures for Dealing with Suspected Child Abuse**

It is the policy of Carrickfergus Model School to act positively and decisively in the interests of any child over which there may be reasonable concerns related to physical, sexual, emotional abuse or neglect. The staff and governors of the school have agreed a number of steps to be taken and are aware that within the process, anonymity is not

guaranteed and it could be necessary to provide evidence openly in the face of parental hostility.

*'The relationships which teachers, other education professionals and other staff in the education service have with the children in their charge is based on trust, and often confidentiality. Such relationships are an integral feature of a secure, caring environment which fosters learning and personal development. Staff have, however, a professional responsibility to share relevant information about the protection of children with other professionals, particularly the investigative agencies and, where physical or sexual abuse is suspected, a legal duty to report this. All staff should recognise, therefore, that, in order to protect children from harm, cases may arise where confidentiality must be subordinated to the need to take appropriate action, by informing and involving others, in the child's best interest.'*

*(Pastoral Care in schools: Child Protection: DENI: Page 11)*

There is a range of circumstances that would invoke Child Protection/Safe-Guarding Procedures;

- A child makes a disclosure to a member of staff
- A member of staff has concerns about a child either as a result of one observation or many observations over a period of time
- A parent expresses concern about the safety of his/her child
- Other sources of information eg Social Services/EWO/PSNI etc

**Remember to use Receive, Reassure, Respond, Report and Record**



Member of staff does not investigate but may use *'Discreet Preliminary Clarification'*

**BUT MUST ACT PROMPTLY**

*'Child Concern Form'* is completed (Appendix iv)

Designated or Deputy Designated Teacher Informed

Designated Teacher meets with Principal to plan course of action and ensures that the *'Child Concern Form'* is stored in a secure location.  
A written record should also be kept of the meeting.

If deemed appropriate:

Principal / Designated Teacher makes referral to Social Services and Care Unit

Copy to EA Designated Officer via secure email

UNOCINI to Single point of Entry Team (SPOE)

Indicate that it is a Child Protection/Safe-Guarding issue and that it is **'CONFIDENTIAL'**

**SPOE**

**SPOE**

Family Support/Child in  
Need Visit within 48 hours  
Assessment within 10 days

Child Protection visit within  
24 hours.  
Investigation within 7 days

Looked After Child  
Emergency (EPO)  
Planned Admission

## **The UNOCINI**

The UNOCINI assessment framework is intended to be used by all professionals working with children as a tool to help them identify the needs of children at an early stage. It is completed whenever staff wish to refer a child or young person to children's social services for support, safeguarding or a fuller assessment of a child's needs.

If there is a concern that a child may be suffering, or at risk of suffering, significant harm, then an urgent referral to children's social services through the local Gateway service must be made. When making an urgent referral by telephone, the Duty Social Worker will advise you that you will be required to confirm your referral in writing on a UNOCINI within 24 hours.

Prior to making a referral to Social Services the consent of the parent/carers and/or the young person (if they are competent to give this) will normally be sought. The exception to this is where to seek such consent would put that child, young person or others at increased risk of significant harm or an adult at risk of serious harm, or it would undermine the prevention, detection or prosecution of a serious crime including where seeking consent might lead to interference with any potential investigation.

Non-urgent referrals **MUST** have the consent of the parent/carers and should be made in writing using the UNOCINI referral form.

5.7 flowcharts are included with the paper copy of this policy and should be referred to each time a concern is raised.

### **5. Vulnerable Groups**

*“Children and young people with disabilities 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.”*

*(Safeguarding and Child Protection in school: DENI: 2017)*

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 skills, especially where there are concerns that abuse may have occurred.

The following groups of children may be at particular risk:

- Children who have a disability;
- Children whose parents can be violent;
- Children whose parents have mental health problems;
- Children who have been bullied;
- Children who have been bullies;
- Children who go missing;
- Children who are used for sexual exploitation;
- Children who may get involved in crime on-line;

- Children who might be bullied on-line or through texts; and
- Children who might be sexually abused on-line or through texts.
- Newcomer Pupils.

## **6. Training**

The Designated and Deputy Designated Teachers for Child Protection & Safe-Guarding are fully trained every 3 years by the CPSSS (Child Protection School Support Service). Staff, teaching and non-teaching are trained every 2 years by the Designated Teacher. New members of staff are trained when they begin employment and a child protection summary is provided as guidance for students, work experience students and visitors to school. Training records are kept by the Designated Teacher.

Other arrangements include;

- The Child Protection and Safe-Guarding Policy is available on the Public Folder;
- All school staff are given clear guidance regarding the procedure for reporting a Child Protection & Safe-Guarding concern;
- All staff are aware of who the Designated and Deputy Designated Teachers are and have an understanding of their role; and
- All staff groupings will be consulted as part of a planned review of Child Protection & Safe-guarding.

## **7. Record Keeping & Sharing of Information**

An important part of protecting our children will be gathering, storage and access to information as appropriate.

- a. Individual Child Protection & Safe-Guarding records are maintained for;
  - Past Pupils;
  - Children who have been removed from the Child Protection Register;
  - Children who are currently on the Child Protection Register;
  - Children who have current social service involvement; and
  - Children who have 'Record of Concern' forms.
  
- b. Regular meetings to discuss 'at risk' children between the Designated and Deputy Designated Teachers. The Vice Principal may also be involved if the Principal is going to be away from school whilst a concern is 'live.'
  
- c. Information is shared with relevant staff when deemed appropriate for the welfare of the child.
  
- d. Information is only shared with the child's next teacher if appropriate to the welfare of the child. If information is to be shared, it will be shared by the Designated or Deputy Designated Teacher only, not the child's previous class teacher.
  
- e. All records are stored securely and signed annually by the Chair of Board of Governors.
  
- f. A Child Protection & Safe-Guarding board in the staffroom displays up to date information as well as relevant policies and 'Record of Concern' forms.

## **8. Arrangements for Checking on Criminal Records for Staff Employed in Carrickfergus Model School**

*“Vetting checks are a key preventative measure in preventing unsuitable individuals access to children and vulnerable adults through the education system and schools must ensure that all persons on school property are vetted, inducted and supervised as appropriate.”*

*(Safeguarding and Child Protection in schools: DENI: 2017)*

The responsibilities and processes to be followed are clearly set on in:

- DE Circular 2013/01 ‘Disclosure and Barring Arrangements: Vetting Requirements for paid staff working in or providing a service in schools.’
- DE Circular 2012/19 ‘Disclosure and Barring Arrangements: Changes to Pre-employment Vetting Checks for Volunteers Working in schools from 10<sup>th</sup> September 2012.’

Access NI Clearance: The following groups must have Enhanced Disclosure Certificate (EDC) from Access NI **before** taking up post:

- All new paid teaching and non-teaching staff
- Examination Invigilators
- Private Contracted transport providers – named drivers

All members of staff employed by the Education Authority will undergo automatic checks of criminal background within the appointment procedure. The Department currently holds lists of those unsuitable to work with children and those whose eligibility to teach has been withdrawn.

There is a list of documents which applicants must now provide and these must be verified by the Principal.

When employing a member of staff;

- At least one member of the interview panel must have training in recruitment matters
- One reference must be from the last employer
- As far as substitute teachers are concerned only those on the Northern Ireland Substitute Teachers Register should be used.

### **Volunteers**

There are two types of volunteers working in schools: those who work unsupervised and those who work under supervision. Volunteers who work unsupervised are required to have an EDC. A volunteer who works under supervision is not required to obtain an EDC, however, schools/organisations must determine whether the level of supervision meets the statutory standard.

The school will ensure that volunteers, coaches, music tutors, school photographers etc, who are employed by others, have the necessary clearances in place.

- Copies of Access NI checks will be kept by the school

## **9. Monitoring, Reviewing and Evaluating our Child Protection & Safe-Guarding Policy.**

The responsibility to monitor, review and evaluate the Child Protection & Safe-Guarding Policy rests with the Board of Governors, Principal and Designated Teacher.

Monitoring will include reviewing the day-to-day outworking of the policy in practice so will be ongoing.

Our policy will be reviewed and evaluated annually and will include the views of staff, children, parents and governors.

## **10. Other Safeguarding Policies:**

- Anti-Bullying Policy
- Safe Handling Policy
- Intimate Care Policy
- Educational Visits Policy (under review)
- E-Safety Policy
- Whistle Blowing Policy (under review)
- Attendance and Lateness Policy (under review)
- Health and Safety Policy (under review)
- Supervision Policy (under review)
- Positive Behaviour Policy
- First Aid and Administration of Medicines Policy (under review)
- Relationships and Sexuality Policy
- Staff Code of Conduct



## Photographs for School Purposes

Dear Parent

It has always been the practice in the Model School to maintain community links through articles and photographs of school events in the local press. Pupils have also been pictured and video recorded for many school projects, trips, team events, concerts and school archives. Future involvement in technology may include video links with other schools.

Recent child protection legislation has raised concerns which many parents may have over the display and/or publication of images of their children.

Since we as a school wish to continue to share, celebrate, record and project the success of our pupils in the local community, we need to seek your permission to do so.

In order to feel secure in managing our successes with the same confidence as always, I would ask you to give consideration to this matter and return the reply slip below.

Unfortunately, it would be impractical to consult parents on every occasion photographs were to be taken so we require a general consent while assuring you that careful and protective judgement will be exercised in the event of taking and publicising photographs.

Thank you for your time and assistance in this matter.

Yours sincerely

J. Miller



### Carrickfergus Model School – Photographs/Images for School

Child's Name:

\_\_\_\_\_ Class: \_\_\_\_\_

I have read the attached letter.

**\*I give consent/I do not give consent** for my child to be photographed for school purposes.

Signed: \_\_\_\_\_ (Parent/Guardian)

Please print name: \_\_\_\_\_

**CARRICKFERGUS**

**MODEL SCHOOL**



**Child Protection**

**Identifying Abuse**

## **Identifying Abuse**

It is always preferable to prevent abuse, or for intervention to take place at the earliest possible stage. Because of their day-to-day contact with individual children, school staff - especially teachers, but also non-teaching staff, including lunch-time supervisors and ancillary staff - are particularly well placed to observe outward symptoms of abnormality or change in appearance, behaviour, learning pattern or development. Such symptoms may be due to a variety of other causes, including bereavement or other disruption in family circumstances, or drug, alcohol or solvent misuse. Sometimes, however, they may be due to child abuse. For example:

## **Bruises**

Bruises, particularly bruises of a regular shape which may indicate the use of an implement such as a strap, or the mark of a hand, lacerations, bite marks and burns may be apparent, particularly when children change their clothes for physical education, swimming and other sports activities, or when very young children or children with special educational needs are helped with toileting;

## **Other Physical Signs**

Possible indicators of physical neglect, such as inadequate clothing, poor growth, hunger or apparently deficient nutrition, and of emotional abuse, such as excessive dependence or attention-seeking, may be noticeable. Sexual abuse may exhibit physical signs, or lead to a substantial behavioural change including precocity, withdrawal or inappropriate sexual behaviour. No list of symptoms can be exhaustive. Also, it must always be remembered that alternative medical, psychological or social explanations may exist for the signs and symptoms described above.

## **Emotional & Behavioural Difficulties**

Pupils who are the victims of abuse often display emotional or behavioural difficulties. In cases of children or young people who are felt to have long-term behavioural problems, the school may wish to seek advice from local support services, for example on the availability of counselling or other systematic therapy, or indeed the need for a statutory assessment, the outcome of which may be the maintenance of a statement of special educational needs. In any event, the school should also monitor and review the child's needs, having due regard to the Special Educational Needs Code of Practice.

Signs such as those described above and others can do no more than give rise to concern - they are not in themselves proof that abuse has occurred. But teachers and other staff should be aware of the possible implications of, and alert to, all such signs, particularly if they appear in combination or are regularly repeated. Where a member of staff is concerned that abuse may have occurred, he or she must report this immediately to the designated teacher who has specific responsibility for child protection (see below). The designation of a teacher for this purpose should not, however, be seen as diminishing the role of all members of staff in being alert to signs of abuse and being aware of the procedures to be followed, including those in cases where an accusation is made against any member of the school's staff, teaching or non-teaching (this is discussed further below).

## **Relationships**

The relationships which teachers, other education professionals and other staff in the education service have with the children in their charge is based on trust and, often, on confidentiality: such relationships are an integral feature of a secure, caring environment which fosters learning and personal development. Staff have, however, a professional responsibility to share relevant information about the protection of children with other professionals, particularly investigative agencies. All staff should recognise, therefore, *that, in order to protect children from harm, cases may arise where confidentiality must be subordinated to the need to take appropriate action, by involving others, in the child's best interests.* **No promise of confidentiality can or should ever be given where abuse is alleged.**

## **Signs**

Where teachers see signs which cause them concern, they should, as a first step, seek some clarification from the child with tact and understanding. Where a classroom assistant or another member of the school's ancillary or auxiliary staff sees such signs, he or she should immediately bring them to the attention of either the class teacher or the designated teacher, and it may be appropriate for the necessary clarification to be carried out by the teacher. Such clarification may reassure staff that abuse has not occurred; but signs and symptoms which cause concern, while perhaps not a result of abuse, may nevertheless indicate that the child or his or her family is in need of social services intervention.

## **Talking to children**

Where teachers see signs which cause them concern, they should, as a first step, seek some clarification from the child with tact and understanding. Where a classroom assistant or another member of the school's non-teaching staff sees such signs, he/she should immediately bring them to the attention of either the class teacher or the Designated Teacher, and it may be appropriate for the necessary clarification to be carried out by the teacher.

Such clarification may reassure teachers that abuse has not occurred; but signs and symptoms which cause concern, while perhaps not a result of abuse, may nevertheless indicate that the child or his/her family is in need of intervention by statutory, voluntary or community based services through a 'child in need' referral (with parental consent).

Care must be taken in asking and interpreting children's responses to questions about abuse. The same considerations apply when a child makes an allegation of abuse, or volunteers information which amounts to that. In some cases, talking to the child will crystallise initial concerns into a suspicion that abuse has occurred and point to the need for an immediate referral. Staff should be aware that the way in which they talk to a child can have an effect on the evidence which is put forward if there are subsequent criminal proceedings, and the extent of questioning should, therefore, be kept to a minimum.

- Staff should not ask the child leading questions, as this can later be interpreted as putting ideas into the child's mind;
- Staff should not, therefore, not ask questions which encourage the child to change his or her version of events in any way, or which impose the adult's

own assumptions. For example, staff should say, “Tell me what has happened”, rather than “Did this person assault you?”.

- The priority at this stage is to *listen to* the child, and not to interpret if he or she is freely recalling significant events, and to make a note of the discussion to pass on to the designated teacher. The note should record the time, date, place and people who were present, as well as what was said. Signs of physical injury observed should be described in detail, or sketched, but *under no circumstances should a child’s clothing be removed nor a photograph taken*.
- Any comment by the child, or subsequently by a parent or carer or other adult, about how an injury occurred should be written down as soon as possible afterwards, preferably quoting words actually used;
- Staff should *not* give the child or young person undertakings of confidentiality, although they can and should, of course, reassure that information will be disclosed only to those professionals who need to know.
- Staff should also be aware that their note of the discussion may need to be used in any subsequent court proceedings. It is therefore essential that accurate contemporaneous records are maintained.
- Staff should **NOT** ask the child to write an account of their disclosure for the record.

### **Record Keeping**

Schools must create and retain reliable records to demonstrate accountability for decisions and actions taken. The storage and disposal of school documents policy is followed in our school.

The school ensures that:

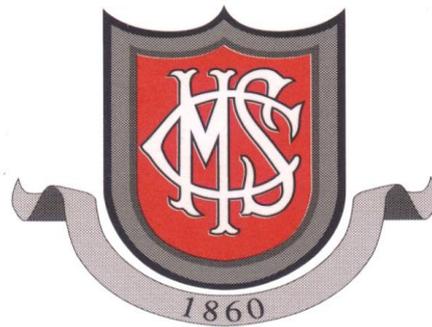
- Staff are aware of the need to record and report child protection issues and the appropriate procedures to be followed. The importance of confidentiality should be highlighted.
- The Child Protection Files are held in a separate, secure confidential filing system. Ideally in a fireproof cabinet. This is only accessible to the Designated Teacher, Deputy Designated Teacher or the Principal.
- Files must not be removed from school premises except when taken to a case meeting or on foot of a court order. A record should be kept of when information is removed, by whom, for what purpose, and when it is returned.
- If information is held electronically, whether on a laptop or portable memory device all must be encrypted and appropriately password-protected.

### **Contacts**

There is a list included with this policy document.

**CARRICKFERGUS**

**MODEL SCHOOL**



**Child Protection**

**Guidance for Physical Injury**

## **PHYSICAL ABUSE**

Falls and accidents can often produce only a single bruise - usually a bony prominence. Multiple bruises can also occur from a child running and falling forwards - leading to bruises on the front of the body and marks on the forehead, knees, shins, as well as on the hands if the fall is broken. Bruises sustained accidentally are usually on outer surfaces of limbs.

In non-accidental injuries staff should be alert to the following:-

- 1 Explanations of injury not consistent or compatible with findings.
- 2 No explanations of the injury.
- 3 Delay in reporting injury or in seeking treatment.
- 4 Bruising on young infant or less mobile child.
- 5 Reports of repeated symptoms or episodes of illness which only occur on one situation with one carer in particular.

## **EXAMPLES OF INJURIES IN CASES OF PHYSICAL ABUSE**

### **1 Injuries to Skin and Subcutaneous Tissue**

Most common - in the form of bruises and skin marks. Multiple bruises in various stages of healing is a characteristic sign. The following list includes areas of the body where abused related injuries are most common:

- (a) Head, ears, cheeks, mouth
- (b) Chest, stomach, upper arms
- (c) Thighs and buttocks
- (d) Lips or gums
- (e) Genital or rectal area

### **2 Finger Marks** require considerable force

- (a) Slap
- (b) Pinch
- (c) Grasp

## **PHYSICAL INJURY**

Most injuries to children are accidental and can be explained simply. Children receive bumps and bruises as a result of the rough and tumble of normal play.

It is important to remain aware however, that injuries may not have been accidental in origin. The presence of the following factors should raise concern.

- 1 Where the explanation is not consistent with the injury or with the stage of development of the child.
- 2 Any bruising in a child who has not attained mobility is of concern, as is a child's reluctance to move limb(s) or where there is tenderness on touching the child.
- 3 Where there are changes of explanation or no explanation.
- 4 Where there has been an unreasonable delay in seeking medical advice.
- 5 Where there is a history of frequently repeated injury even though the explanation of each individual occurrence appears adequate.
- 6 Where there are bruises of different ages on the child at any one time, other than on the common sites of accidental injury in a child of that age.
- 7 Where there is facial bruising, particularly round the mouth, eyes or ears.
- 8 Where there are unexplained or inadequately explained burns, bite marks, severe bruising or any combination of these.
- 9 Poisoning, particularly if there is more than one accident.

**N.B. A child who alleges physical abuse should be listened to carefully and the listener should consult with appropriate professionals immediately for advice (e.g. paediatrician, social worker etc).**

See Section 6 for further information.

### **3 Bite Marks and Scratches**

Human bite marks are usually distinctive as a circle of two discontinuous semi-circles corresponding to the upper and lower teeth. There is usually no central bruising although this area may be swollen.

### **4 Black Eyes**

Two black eyes are rarely accidental, and even a single black eye is of serious concern in the immobile child.

Accidental black eyes are often accompanied by bruises to another part of the face, such as forehead or the bridge of the nose.

### **5 Burns and Scalds**

Deliberately inflicted burns and scalds are found in 10% of physically abused children, 5% of sexually abused children and 1 - 6% of all children presenting at hospital with burns and scalds. A child who presents with any burn should be comprehensively medically examined, because many of the children deliberately burnt have previously suffered from child abuse.

It can be difficult to distinguish between accidental and inflicted burns, but generally, non-accidental burns are characterised by their regular outlines and their location.

Accidental scalds are usually accompanied by 'splash marks'. Scalds to buttocks and groin are rarely accidental. Accidental burns or scalds should always lead to questions about the amount of supervision and protection offered to the child and should raise the issue of child neglect.

### **6 Injuries to the Head and Central Nervous System**

Head injuries lead to most serious long term consequences for the child, and are the commonest cause of death from abuse. Head injuries may result from a blow to the head of the child, swinging him round or shaking him. A fracture is usually less significant in terms of the physical prognosis, than the associated complications which may result from brain damage. These complications may also occur after the child has been swung around or shaken resulting in a collection of blood immediately underneath the skull (subdural haematoma) causing increasing pressure on the brain. Retinal haemorrhages may also be found with shaking injuries.

### **7 Fractures**

Fractures are among the most serious injuries sustained. They may occur in almost any bone and may be single or multiple, clinically obvious and detectable only by x-ray. The presence of old/healing undiagnosed fractures on x-ray indicates previous incidences of child abuse.

The physical signs of fractures are deformities of the bones, tenderness, swelling, limitation of movement in an extremity or pseudoparalysis.

Immobile babies very rarely break their bones and toddlers rarely suffer more than a green-stick fracture (a crack which does not result in a complete break).

Physical abuse must therefore be seen as a highly probable diagnosis in all fractures in children under one year.

Recent fractures may be difficult to see, but are more obvious when callus forms after about 10-14 days.

## **8 Abdominal Injuries**

In a few cases, children may suffer damage to the kidneys, spleen, liver, intestines or other internal organs as a result of a punch or kick. Such injuries are serious and may lead to death if not treated.

## **9 Chest Injuries**

Rib fractures are highly suspicious of physical abuse in young children unless there is a history of direct trauma to the rib cage, eg, a road traffic accident. The signs are chest deformities and limitations of mobility. If rib fractures cause rupture of blood vessel, bleeding into the chest cavity (haemothorax), may result. If a rib punctures the lung, air leaking into the cavity (pneumothorax) and subcutaneous tissue (surgical emphysema) may ensue.

## **10 Suffocation**

Uncommon but serious form of child abuse usually occurs to young children under age to three years, most under one year. They may present as cot deaths or 'near miss' cot deaths. The diagnosis should be considered if previous unexplained episodes of apnoea, seizure or 'near miss' cot death, or previously unexplained disorders affecting the child.

## **11 Poisoning**

Deliberate poisoning may present as an emergency with claims that the child has accidentally ingested the drug. The child may also present with inexplicable symptoms and signs, or recurrent unexplained illness. These patients overlap with those for whom parents create false illness.

## **12 Female Genital Mutilation (FGM)**

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. It is illegal in the UK and constitutes as Child Abuse but is prevalent in 28 African countries as well as parts of the Middle East and Asia.

Indicators;

- Being a girl aged 5-8 within a community where FGM is practised
- Prolonged return to country of origin for summer break
- Female elder visiting from a country of origin
- A girl may disclose that she is to have a special procedure or attend a special occasion to become a woman

- Parents state that they or a relative will take their child out of the country for a prolonged period

**CARRICKFERGUS**

**MODEL SCHOOL**



# **Child Protection**

**Guidance for Sexual Abuse**

**(Including Sexual Exploitation)**

## **SEXUAL ABUSE**

Many of the signs and behaviours associated with sexual abuse can be found in some medical or emotional conditions. A good rule to follow is that when there are worries about a child's behaviour which cannot be explained satisfactorily, sexual abuse should be borne in mind as a possible explanation. A child who alleges sexual abuse should be listened to carefully and the listener should consult with appropriate professionals immediately (e.g. Social Worker, RUC, Paediatrician) for advice. Sexually abused children are frequently obedient to adults and anxious to please but peer-group relationships are often poor. Many children are asymptomatic, particularly in the younger age range. Other signs which may be present are:-

### **1 Physical Signs:-**

Genital or anal lacerations, bleeding or other trauma;  
Genital or peri-anal inflammation or irritation;  
Persistent or recurrent vaginal discharge;  
Sexually transmitted disease, including peri-anal or genital warts;  
Pregnancy

### **2 Medical Problems which may be connected with Sexual Abuse:-**

Recurrent urinary tract infections or 'cystitis';  
Secondary enuresis or encopresis (wetting or soiling);  
Recurrent unexplained abdominal pain.

**It should be remembered that for many children these symptoms will be present and are not always associated with abuse.**

### **3 Behavioural Problems may include:-**

#### **In younger children -**

over sexualised behaviour  
compulsive masturbation  
acting out and aggressive behaviour  
drawings or play activity which are explicitly sexual.

#### **In older children -**

withdrawn, overtly compliant behaviour  
depression and suicidal behaviour  
self-mutilation  
running away  
school refusal  
truancy  
drug and alcohol abuse

**At any age - a sudden change in normal behaviour patterns, or a sexual awareness and knowledge well in advance of what would be expected at the child's level of development, may be an indicator of sexual abuse.**

**Children who are being sexually abused do not necessarily display any behavioural disturbance.**

**It should be remembered that for many children these symptoms will be present and are not always associated with abuse.**

## **SEXUAL EXPLOITATION**

Child sexual exploitation is a form of sexual abuse in which a person(s) exploits, coerces and/or manipulates a child or young person into engaging in some form of sexual activity in return for the gain of the person(s) perpetrating or facilitating the abuse.

The CSE Helpline is: 0800 389 1701

**CARRICKFERGUS**

**MODEL SCHOOL**



**Child Protection**

**Guidance for Neglect  
and  
Emotional Abuse**

**(Also witness to Domestic  
Violence)**

## **NEGLECT**

Neglect results from the **persistent failure** to meet the basic needs of this child. This may include failure to provide food, warmth, clothing, appropriate stimulation or consistent caretaking resulting in impairment of the child's health or development.

The signs in the child of neglect may include:-

- 1 Failure to thrive, where medical investigation has excluded any medical reason for the problem.
- 2 Food stealing or gorging of food.
- 3 Lack of appetite and increased feeding difficulties.
- 4 Inappropriate or inadequate clothing or hygiene, (taking account of cultural norms and family means).
- 5 Lack of appropriate supervision.
- 6 Persistent failure to seek or to follow any necessary medical or nursing advice.
- 7 Developmental delay.
- 8 Poor academic attainment or school attendance.
- 9 Poor peer group relationships, but attention-seeking from adults.
- 10 Physical signs of long-standing neglect, including poor growth, thinning hair, protuberant abdomen and persistently cold, reddened hands and feet.

## **EMOTIONAL ABUSE**

There are elements of emotional harm in all forms of abuse. Whilst physical care and environments may appear to meet children's needs it is important to remain aware of the interactions and relationships which occur between children and their carers. An emotionally abused child may be subjected to constant criticism and scape-goating, the continuous withholding of approval and affection, severe discipline or a total lack of appropriate control.

Alternatively, the child may be exploited to fulfil the parent's emotional needs.

As a consequence, the child may:-

- 1 have an impaired ability for enjoyment and play
- 2 lack curiosity and natural exploratory behaviour
- 3 be delayed in language development and play skills
- 4 have a low self-esteem and feeling of worthlessness
- 5 show eating disturbances or growth failure
- 6 severe cases may show physical signs of deprivation as described under **Neglect**. These may occur even when physical care appears adequate.

## **WITNESS TO DOMESTIC VIOLENCE**

Domestic Violence is threatening behaviour, violence or abuse<sup>4</sup> (psychological, physical, verbal, sexual, financial or emotional) inflicted on one person by another where they are or have been intimate partners or family members, irrespective of gender or sexual orientation.

700 families a year are rehomed to Domestic Violence. This can be very upsetting and emotionally damaging for a child to witness even if they themselves are not being physically harmed.

MARAC is a Multi-Agency Risk Assessment Conference who may assist these families.

**CARRICKFERGUS MODEL SCHOOL**

**REPORT TO CHILD PROTECTION CONFERENCE**

PUPIL'S NAME \_\_\_\_\_ DOB: \_\_\_\_\_ Year Group \_\_\_\_\_

Parents/Guardian: \_\_\_\_\_

Address:

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Attendance in current school year: \_\_\_\_\_ days out of possible \_\_\_\_\_ days.

=====

**ATTAINMENT LEVELS/EDUCATIONAL PERFORMANCE**

**INTELLECTUAL ABILITY** (e.g. below average/average/above average):

**PERFORMANCE IN RELATION TO INTELLECTUAL ABILITY:**

**PRESENTATION OF WORK, INCLUDING HOMEWORK:**

**PARTICIPATION IN TEACHING/LEARNING ACTIVITIES:**

**BEHAVIOUR IN CLASS:**

**BEHAVIOUR OUT OF CLASS:**

**RELATIONSHIPS WITH OTHER CHILDREN:**

**RELATIONSHIPS WITH TEACHER/OTHER ADULTS IN SCHOOL:**

**RELATIONSHIPS WITH FAMILY** (if relevant/known):

**SCHOOL'S CONTACTS WITH HOME** (e.g. telephone calls):

GENERAL REMARKS

(e.g. personal appearance, readiness/preparation for learning):

Signed on behalf of the school: \_\_\_\_\_  
(Designated Teacher)

=====

Please complete and return to \_\_\_\_\_ by \_\_\_\_\_

Thank you

=====

- 4 If necessary the member(s) of staff involved will liaise with the relevant authorities in preparation for participation in tribunal or court action.

**Carrickfergus Model Primary School**

**Child Protection Policy**

Record of Complaint against a Member of Staff

Complaint brought by \_\_\_\_\_

Complaint reported to \_\_\_\_\_

Complaint lodged against \_\_\_\_\_

Date of Complaint \_\_\_\_\_

Details of Complaint -

Resolution (either via formal referrals or under the school's disciplinary procedures).

Referred to Board of Governors? (Yes/No) (Date)

Signed \_\_\_\_\_

Date \_\_\_\_\_

\* Refer to Paragraph 63 of "Child Protection" as a final check.

\* A separate file is held as a record of complain

