



Summary of Child Protection Policy

We in Newcastle Primary School and Nursery Unit have a primary responsibility for the care, welfare and safety of the pupils in our care and we will carry out this duty through our pastoral care policy, which aims to provide a caring, supportive and safe environment, valuing individuals for their unique talents and abilities, in which all our young people can learn and develop to their full potential. One way in which we seek to protect our pupils is by helping them to learn about the risks of possible abuse, helping them recognise unwelcome behaviour in others and acquire the confidence and skills they need to keep themselves safe.

All our staff and volunteers have been subject to appropriate checks. The staff has also adopted a Code of Conduct for our behaviour towards pupils.

The purpose of following procedures on Child Protection is to protect our pupils by ensuring that everyone who works in our school – teachers, non-teaching staff and volunteers – has clear guidance on the action which is required where abuse or neglect of a child is suspected.

CHILD ABUSE

What is child abuse?

Child abuse occurs when a child is neglected, harmed or not provided with proper care. Children may be abused in many settings, by those known to them, or more rarely, by a stranger. There are different types of abuse and a child may suffer more than one of them.

Neglect – the persistent failure to meet a child's physical, emotional and/or psychological needs, likely to cause significant harm. It may involve a parent or carer failing to provide adequate food, shelter and clothing, failing to ensure access to medical care or treatment, lack of stimulation or lack of supervision.

It may also include non-organic failure to thrive.

Emotional – persistent emotional ill treatment of a child such as to cause severe and persistent adverse effects on a child's emotional development. It may involve conveying to a child that he is worthless or unloved, inadequate, or valued only insofar as he meets the needs of another person. It may involve causing a child to feel frightened or in danger, or the exploitation or corruption of a child. Some level of emotional abuse is involved in all types of ill treatment of a child, although it may occur alone. Domestic violence, adult mental health problems and parental substance misuse may expose a child to emotional harm.

Physical – the deliberate physical injury to a child, or the wilful or neglectful failure to prevent physical injury or suffering. This may include hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocation, confinement to a room or cot, or inappropriate giving drugs to control behaviour.

Sexual – involves forcing or enticing a child to take part in sexual activities. The activities may involve physical contact, including penetrative or non-penetrative acts. They may include

non-contact activities such as involving children in looking at, or in the production of, pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

Domestic abuse is threatening behaviour, violence or abuse (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.

Sexual Exploitation of Children and Young People – Child sexual exploitation is a form of sexual abuse where children are sexually exploited for money, power or status. It can involve violent, humiliating and degrading sexual assaults. In some cases, young people are persuaded or forced into exchanging sexual activity for money, drugs, gifts, affection or status. Consent cannot be given, even where a child may believe they are voluntarily engaging in sexual activity with the person who is exploiting them. Child sexual exploitation doesn't always involve physical contact and can happen online. A significant number of children who are victims of sexual exploitation go missing from home, care and education at some point.

Exploitation is the intentional ill-treatment, manipulation or abuse of power and control over a child or young person; to take selfish or unfair advantage of a child or young person or situation, for personal gain. It may manifest itself in many forms such as child labour, slavery, servitude, engagement in criminal activity, begging, benefit or other financial fraud or child trafficking.

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.

SIGNS AND SYMPTOMS OF CHILD ABUSE

Neglect

Physical Indicators:

- Constant hunger
- Exposed to danger, lack of supervision
- Inadequate/inappropriate clothing
- Poor hygiene
- Untreated illnesses
- Persistent tiredness

Behavioural Indicators:

- Listlessness
- Lack of peer relationships
- Low self-esteem
- Compulsive stealing/begging

Emotional

Physical Indicators

- Sudden speech disorders
- Wetting and soiling
- Signs of mutilation
- Frequent vomiting.

Behavioural Indicators:

- Rocking, thumb sucking
- Fear of change
- Chronic runaway
- Poor peer relationships

- Attention seeking behaviour

Physical

Physical Indicators:

- Scratches
- Bite marks or welts
(Physical indicators continued)
- Bruises in places difficult to mark (behind ears, groin)
- Burns
- Untreated injuries.

Behavioural Indicators:

- Self-mutilation tendencies
- Chronic runaway
- Aggressive or withdrawn
- Fear of returning home
- Undue fear of adults
- Fearful watchfulness

Sexual

Physical Indicators:

- Soreness, bleeding in genital or anal areas
- Itching in genital areas
- Stained or bloody underwear
- Stomach pains or headaches
- Pain on urination
- Difficulty in walking or sitting
- Bruises on inner thighs or buttocks
- Anorexic/bulimic

Behavioural Indicators:

- Chronic depression
- Inappropriate language, sexual knowledge for age group
- Making sexual advances to adults or other children
- Low self-esteem
- Afraid of the dark
- Wariness of being approached by anyone
- Evidence of substance misuse
- Acquisition of money, mobile phones etc without plausible explanation
- Association with older people, particularly men, outside the usual range of contacts
- Phone calls/messages from adults outside the normal range of contacts.

The Role of Parents

It is extremely important for parents to keep the school fully informed of family developments that may eventually give rise to questions regarding pupil welfare and child protection. For example, the reason for:

- Unexplained injury or bruising
- Repeated absence from school
- Untreated medical problems
- Constant hunger/no breakfast/extreme tiredness
- Upset at witnessing family dispute
- Sudden mood swings

In addition, whilst we have a Code of Conduct for Staff, it would be expected that parents, when on school grounds, would adhere to the Child Protection guidelines as well as being courteous and respectful at all times to members of staff, pupils and other parents.

SAFEGUARDING TEAM

The Designated Teacher for Child Protection is

Mrs K Stewart. The Deputy Designated teachers are **Mrs J Crutchley** and **Mrs Bradshaw** (Nursery). The Designated Governor is **Mrs V Methven**

CHILD PROTECTION PROCEDURES

If a child makes a disclosure to a teacher or other member of staff which gives rise to concerns about possible abuse, or a

member of staff has concerns about a child, **the member of staff must act promptly using the following guidelines (5Rs):**

- **Receive** – listen actively, open body language, accept, non-judgemental
- **Reassure** – the right thing, help is coming, don't promise what can't be delivered
- **Respond** – tell what you are going to do and do it. Ensure that the child is ok before leaving
- **Report** – as soon as possible to the DT
- **Record** – **vital** – facts, no opinions-When, Where, Who, What?

He/she should not investigate – this is a matter for the Social Services – but should report these concerns immediately to the Designated Teacher, discuss the matter with her and make full notes.

The Designated Teacher will discuss the matter with the Principal as a matter of urgency to plan a course of action, and ensure that a written record is made.

The Principal, in consultation with the Designated Teacher, will decide whether, in the best interests 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 parents will be informed immediately.

The Principal may seek clarification or advice and consult with the EA's Designated Officer or the Senior Social Worker before a referral is made. 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 first priority.

If domestic violence is suspected in any child's home, whether directly against the child or not, a referral to Social Services will be made immediately on the grounds of Child Protection.

Where there are concerns about possible abuse, the Principal will inform:

- The EA's Designated Officer for Child Protection
- The Social Services

If a complaint about possible child abuse is made against a member of staff, the Principal (or the Designated Teacher, if she is not available) must be informed immediately. The above procedures will apply (unless the complaint is about the Designated Teacher.) Where the matter is referred to Social Services, the member of staff will be removed from duties involving direct contact with pupils, and may be suspended from duty as a precautionary measure pending investigation by Social Services. The Chairman of the Board of Governors will be informed immediately.

If a complaint is made against the Principal, the Designated Teacher must be informed immediately. She will inform the Chairman of the Board of Governors and together they will ensure that the necessary action is taken.

It should be noted that information given to members of staff about possible child abuse cannot be held "in confidence". In the interests of the child, staff may need to share information with other professionals.