

ST MACNISSI'S PRE-SCHOOL CENTRE SAFEGUARDING POLICY AND PROCEDURES

Key Principles of Safeguarding and Child Protection

The general principles, which underpin our work, at St MacNissi's Pre-School are those set out in the UN Convention on the Rights of the Child and are enshrined in the Children (Northern Ireland) Order 1995, "Co-operating to safeguard children and young people in Northern Ireland" (DHSSPSNI, 2017), the Department of Education (Northern Ireland) guidance "*Safeguarding and Child Protection in Schools*" Circular 2017/04 (amended September 2019; updated June 2020) and the SBNI Core Child Protection Policy and Procedures (2017).

The following principles form the basis of St MacNissi's Pre-School's Child Protection Policy:

- 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 stay together.
- Partnership.
- Prevention.
- Responses should be proportionate to the circumstances.
- Protection; and
- Evidence based and informed decision making.

POLICY

**** (this policy forms part of St. MacNissi's Primary School Child Protection Policy)**

- In St MacNissi's Pre-School we are committed to creating a safe environment for children which is free from abuse and where any suspicion of abuse is dealt with promptly and appropriately. St MacNissi's Pre-School staff must follow the guidelines agreed by the Board of Governors of St MacNissi's Primary School and the Pre-school Committee, regarding the reporting of any suspected child abuse or neglect- this is our legal and professional obligation.

PROCEDURES

- All staff, volunteers etc (including new) engaged in working with children in the pre-school will have undergone vetting through Social Services before commencing work in the pre-school. This vetting consists of Access NI checks, two-character references and a declaration of health. All appointments within the group will be subject to a probation period until the group is satisfied that the applicant is fully suitable to work in the settling.

GOOD PRACTICE FOR PREVENTING ABUSE

- All staff and volunteers shall receive appropriate training and updates regarding recognising the signs and symptoms of abuse.
- The layout of the setting will allow constant supervision of all children.
- Appropriate adult / child ratios will be followed at all times.
- No adult will be left for extended periods of time with individual or small groups of children.

RESPONDING APPROPRIATELY TO SUSPICIONS OF ABUSE

- If a member of staff has concerns about the welfare of a child or if abuse has been disclosed to them, he/she will immediately report their findings to the pre-school teacher and Designated Teacher. The teacher will monitor / observe the child in question to determine whether there is cause for concern. In cases where it is felt a child is in immediate danger, he / she will report these concerns immediately without monitoring, to the Single Point of Contact (SPOC Tel:- 028 90259299).
- The designated person for child protection on the management committee will be informed, without disclosing the child's identity / record details.
- Parents will be informed following consultation with the Social Services Gateway Team.

POSSIBLE INDICATORS OF ABUSE

Physical Abuse

Physical Abuse – is the deliberate physical injury to a child, or the wilful neglectful failure to prevent physical injury or suffering. This may include hitting, shaking, throwing, poisoning, burning, or scalding, drowning, suffocating, confinement to a room or cot, or inappropriately giving drugs to control behaviour. (ACPC, 2005)

<u>Physical Indicators</u>	<u>Behavioural Indicators</u>
<ul style="list-style-type: none"> • Multiple bruising or bizarre markings on the skin • Multiple bruising at different stages of resolution • Bruising and or lacerations around the mouth • Finger and thumb marks on the face or body • Black eyes (particularly when both are affected) • Burns, scalds or bites which appear to have been caused by adults • Untreated injuries 	<ul style="list-style-type: none"> • Self-destructive tendencies • Improbable excuses given to explain injuries • Chronic runaway • Aggressive or withdrawn • Fear of returning home • Reluctant to have physical contact • Clothing inappropriate to weather – worn to hide part of the body

Neglect

Neglect – is the persistent failure to meet a child's physical, emotional and/or psychological needs, likely to result in significant harm. It may involve a parent or carer failing to provide adequate food, shelter and clothing, failing to protect a child from physical harm or danger, failing to ensure access to appropriate medical care or treatment, lack of stimulation or lack of supervision. It may also include non-organic failure to thrive. (ACPC, 2005)

<u>Physical Indicators</u>	<u>Behavioural Indicators</u>
<ul style="list-style-type: none"> • Constant hunger • Poor state of clothing /personal hygiene • Untreated medical problems • Emaciation / distended stomach • Constant tiredness 	<ul style="list-style-type: none"> • Tiredness, listlessness • Lack of social relationships • Compulsive stealing, begging or scavenging • Frequently absent or late • Low self-esteem

Emotional Abuse

Emotional Abuse – is the persistent emotional ill treatment of a child such as to cause severe and persistent adverse effects on the 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 frequently to feel frightened or in danger, or the exploitation or corruption of a child. Domestic violence, adult mental health problems and parental substance may expose a child to emotional abuse. (ACPC,2005).

<u>Physical Indicators</u>	<u>Behavioural Indicators</u>
<ul style="list-style-type: none">• Sudden Speech• Signs of self-mutilation• Signs of solvent abuse (eg. mouth sores, smell of glue, drowsiness)• Wetting and /or soiling• Attention seeking disorder• Poor per relationships	<ul style="list-style-type: none">• Neurotic behaviour (eg. rocking, hair twisting, thumb-sucking)• Reluctance for parent liaison• Fear of new situations• Chronic runaway• Inappropriate emotional responses to painful situations

Sexual Abuse

Sexual Abuse – 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 to look at, or in the production of, pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways. (ACPC, 2005)

<u>Physical Indicators</u>	<u>Behavioural Indicators</u>
<ul style="list-style-type: none">• Soreness or bleeding in the genital or anal areas or in the throat• Torn, stained or bloody underclothes• Chronic ailments such as stomach pains or headaches• Difficulty in walking or sitting• Frequent urinary or yeast infections• Venereal diseases	<ul style="list-style-type: none">• Be chronically depressed / suicidal• Inappropriately seductive or precocious• Sexually explicit language• Low self-esteem, devaluation, lack of confidence• Recurring nightmares/fear of the dark• Outbursts of anger/hysteria• Overly protective to siblings

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

Physical Indicators:

- Stomach pain
- Physiological – stress / nerves

Behavioural Indicators:

- Nervousness
- Low self-worth
- Disturbed sleep patterns
- Nightmares / flashbacks
- Bed wetting
- Immature / needy behaviour
- Temper tantrums
- Aggression
- Internalising distress or withdrawal
- Truancy
- Alcohol and drugs

CHILD 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 something the child needs or desires and/or for the gain of the person(s) perpetrating or facilitating the abuse

FEMALE GENITAL MUTILATION

FGM is a criminal offence in Northern Ireland. If a member of staff in St. MacNissi's has a concern that a child or young person may be at **immediate** risk of FGM, this should be reported to the PSNI without delay. If there is a concern that a child or young person may be at risk of FGM, a referral will be made to the relevant Health and Social Care Trust.

MISSING CHILD

Children's safety is always maintained as the highest priority, both on and off premises. Every attempt is made through carrying out the outings procedure and the exit/entrance procedure to ensure the security of children is always maintained. In the unlikely event of a child going missing our Missing Child Procedure is followed.

BULLYING

Procedures for dealing with incidents of bullying behaviour in the Pre-School

Pre-School children rarely engage in bullying. Aggressive behaviour can emerge as normal behaviour in 2/3-year-olds, with temper tantrums being part of normal development at this stage. In children with delays in other areas of development- e.g. speech and language, there can be resulting secondary behaviour management difficulties. Therefore, in the Pre-School, while bullying as such is not in evidence, there may be examples of bullying types of behaviour displayed by some children. This is usually of a physical nature and may include hitting, kicking or damage to property.

If this occurs Pre-School staff will put in place some, or all, of the following procedures, as appropriate.

- Staff will intervene to stop unacceptable behaviour
 - The child will be removed from the situation
 - The child will be told why he/she is being removed.

 - The child will be given an alternative, calming activity with a member of staff constantly monitoring his/her behaviour. If he/she remains aggressive, he/she will be told that he/she can go back to play when he/she calms down.
 - When completed, the child will be encouraged to play elsewhere and any appropriate behaviour that occurs will be praised and reinforced. Other staff will be encouraged to do likewise.
 - After the event, the child will be talked to about his/her behaviour and why it was unacceptable.
- More appropriate alternatives will be discussed.
- If this occurs regularly, parents will be informed and a written record, detailing incidents will be kept.

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. Pre-school 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 / she must report this immediately to the Designated Teacher, following the school's guidelines on the identification and reporting of suspected abuse.

REFERRAL AND THE ROLE OF THE DESIGNATED TEACHER

He/she should not investigate – this is a matter for social services and/or PSNI –but should report these concerns immediately to the Designated Teacher, discuss the matter with her, make full notes (signing and dating them), and hand the note to the Designated Teacher.

The DT will discuss the matter with the E.A. Child Protection team as a matter of urgency to plan a course of action and ensure that written records of decisions are made.

The DT, in consultation with the E.A. Child Protection Team 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/vulnerable adult may be at risk of significant harm, the nursery is obliged to make a referral to Social Services. Unless there are concerns that a parent/ guardian may be the possible abuser, the parents / guardians will be informed immediately.

No decisions to refer a child to social services will be made without full consideration and on appropriate advice. **The safety of the child is our first priority.**

Where there are concerns about possible abuse of a child, the DT will inform:
Social Services – using the regional UNOCINI template (Understanding the Needs of Children in Northern Ireland).

If it concerns a school pupil, the Designated Teacher for Child Protection at the school where the child is a registered pupil, and the E.A's Designated Officer for Child Protection where appropriate.

The UNOCINI referral will be made in respect of concerns about **children** within 24 hours of the initial telephone referral to social services. **(This will be done in an envelope marked 'CONFIDENTIAL – CHILD PROTECTION')**

Contact Numbers

- **South-Eastern Early Years Team Tel:- 028 93 315112**
- **Single Point of Contact (SPOC Tel: - 028 90259299 or 101x302299)**
- **Regional Emergency Social Work Service Calls Tel:- 028 95049999**
- **Safeguard Gateway Team Tel:- 028 93 340165**
- **PSNI at the Public Protection Unit Tel:- 0845600 8000**

Child Protection:-Responding appropriately to ‘Suspensions of Abuse’

If you have a concern about the safety of your child or another child, you may report your concerns to the Pre-School teacher:-**Mrs P. McCorry**

The matter will be dealt with and, if possible, resolved.

Mrs P. McCorry will monitor/observe the child in question and will respond, indicating a proposed course of action.

In cases where it is felt a child is in immediate danger the Pre-School teacher will report these concerns to the Designated Teacher for Child Protection on the management committee:-

Mrs P.McCorry/ Mr J McAuley (028 90 342166)

or in their absence, The Deputy Designated Teacher:

Mrs Mitchell (028 90 342166)

If deemed necessary the designated teacher will refer to:-

- **Single Point of Contact (SPOC Tel:- 028 90259299 or 101x30229)**
- **South-Eastern Early Years Team (Social Worker) (028 93 315112)**

While it may be necessary to share concerns and complaints, we at St MacNissi's Pre-School will proceed in a confidential manner and only those who need to know will be informed. Do not hesitate to contact us if you have a concern or complaint. **We all have a duty of care to protect children**, and their welfare must always be our priority.

The person (s) who reported the concern will be informed that the matter is being dealt with.

For all other information please view whole school policy on:-
www.saintmacnissis.com

Procedure, where a complaint has been made about possible abuse by a member of the Pre-School's staff.

Tell the Designated teacher of the management committee **Mr. J. McAuley** or in his absence the Deputy Designated teacher **Mrs R. Mitchell**



The matter will be dealt with and, if possible, resolved.
The Designated teacher will keep a written record at every stage, whether a referral is made or not.



If a referral is necessary, or if doubts remain, advice will be sought **Social Services Gateway Team (0300 1234 333)**



On advice from **Gateway Team** consider precautionary suspension / remove from direct contact duties.



If suspension is necessary, this will be done in consultation with the:-
Chairperson of the Management Committee.



Tell the complainant

Advise Early Years Team

While it may be necessary to share concerns and complaints, we at St MacNissi's will proceed in a confidential manner and only those who need to know will be informed. Do not hesitate to contact us if you have a concern or complaint. **We all have a duty of care to protect children**, and their welfare must always be our priority.

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GUIDELINES FOR STAFF

CONFIDENTIALITY

- No promise of confidentiality can or should ever be given where abuse is alleged
- Staff have 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, confidentiality must be subordinated to the need to take appropriate action, by involving others in the child's best interest.

DEALING WITH DISCLOSURES OF ABUSE

- A child may quite innocently disclose details of abuse that occurs within the family or other situations. It is also the case that children with experience of abuse may unburden themselves to a member of staff as the one adult they can trust.
- It is vital that the member of staff in whom a child has chosen to confide is sympathetic and supportive.
- The member of staff should remain calm and reassuring. Children who have suffered abuse may have low self-esteem or may withdraw if they detect signs of doubt or revulsion – *Reassure*.
- The member of staff must not promise to keep secret what the child has said and it must be explained to the child that his or her disclosure must be reported.
- The member of staff should listen carefully and quietly but should never attempt to cross-examine the child or press for information.
- Care must be taken in asking questions and interpreting children's responses.
- 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.
- They should not ask questions, which can later be construed as leading questions. This can later be interpreted as putting ideas into the child's mind.
- They should, 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 happened", rather than, "Did they do X to you"? (a leading question)

- The chief task at this stage is to listen to the child , and not to interrupt if he or she is freely recalling significant events. – ***Receive***
- A note of the discussion should be made immediately after the discussion has taken place, itemising what the child has said. – ***Record***

The record should indicate:

- (a) The information revealed by the child, quoting his or her words, where possible**
- (b) To whom the suspicions were reported**
- (c) Date, time and signature**

- No attempt should be made to discuss concerns or fears with the parents or indeed with anyone who is not involved with the care of the child. If the child's allegations prove to be untrue, reporting them to someone who is not concerned with the care of the child may be deemed to be defamatory.
- You must keep a copy of your report and immediately pass a copy to the Designated Teacher, Mr McAuley, in his absence to the Deputy Designated Teacher Mrs Mitchell. No copies should be kept in electronic form. – ***Report***
- The Designated Teacher, Mr McAuley, or in his absence, Mrs Mitchell must always be informed even if the abuse is merely suspected.
- Signs of physical injury observed should be described in details, or sketched, but under no circumstances should a child's clothing be removed.
- Staff should also be aware that their note of the discussion may need to be used in any subsequent court proceedings.

RECEIVE & REASSURE

RECORD & REPORT

CODE OF CONDUCT FOR STAFF

- At St. MacNissi's all staff must safeguard and promote the welfare of pupils in their charge. Staff must always be mindful of the fact that they hold a position of trust and their behaviour towards children in their care must be above reproach. The Code of Conduct is not intended to discourage positive interaction between staff and pupils but assist staff in respect of the complex issue of Child Abuse. The following guidance on appropriate conduct is designed to reduce the risk of allegations being made against any member of staff.
- All staff should ensure that their relationships with pupils are appropriate to the age and gender of the pupils, taking care that their conduct does not give rise to comment or speculation.
- All staff must be aware of the dangers which arise from private interviews with individual pupils. There are occasions when confidential interviews must take place, but such interviews should be conducted in a room with visual access, or with the door open, or in a room or area which is likely to be frequented by other people. It is inadvisable to spend undue amounts of time with one pupil, away from other people.
- All staff need to be aware of the acceptable boundaries of physical contact with pupils, and must bear in mind that even perfectly innocent actions can sometimes be misconstrued. On rare occasions, a teacher might have to restrain a pupil physically, to prevent him / her causing injury to herself or others or to property. In such instances, no more than the minimum necessary force should be used.
- There may be occasions when a distressed child needs comfort and reassurance, which may include physical comforting, such as a caring parent would give. Staff should use discretion in such cases.
- Members of staff should be alert to the risk of emotional abuse, such as persistent sarcasm, verbal bullying or severe and persistent negative comment or actions. Members of staff should be encouraged to reflect on any aspect of their contact with children which may give rise to perceptions or allegations of this form of abuse.
- Members of staff should be particularly careful when supervising children in a residential setting such as a school trip, outdoor education camp or an extended visit away from home, where more informal relationships tend to be usual and where teachers may be in proximity to pupils in circumstances very different from the normal school environment. A risk assessment will be carried out before class trips.
- If in an emergency, staff have to administer First Aid, they should ensure where possible that other children or another adult are present, if staff have any doubts as to whether necessary physical contact in the circumstances could be misunderstood.

- No member of staff should hesitate to provide First Aid in an emergency because another person is not present.
- Following any incident where a member of staff feels that his / her actions have been, or may be, misconstrued, a written report of the incident should be submitted immediately to the Principal of the school. This would apply especially in a case where a teacher had been obliged to restrain a child physically to prevent him / her from inflicting injury to others or self injury.
- Staff must not under any circumstances use corporal punishment such as hitting. If there is a serious problem of such misbehaviour and the member of staff cannot deal with the situation they should bring the pupil(s) to the Principal / Vice-Principal.
- Staff must never keep suspicions of abuse or inappropriate behaviour by a colleague to themselves. If there is an attempted cover-up, staff should be aware that they could be implicated.
- Staff should be aware when using teaching materials of a sensitive nature, especially sex education programmes.
- Staff should not use unsuitable Video / DVD films / programmes. If members of staff are in doubt they should consult the Principal.
- If any allegations are made against a member of staff, details must be recorded and reported to the Principal immediately.
- If a colleague is suspected of inappropriate behaviour or abuse, it is essential that this is reported to the Principal / V-Principal.
- All teaching and non-teaching staff will be vetted by the employing authorities. The school will vet all volunteers. Everyone will be required to complete an Access NI Check. This is to ensure that those who become part of the school community do not pose a threat to the health and well-being of our pupils.

• Policy Reviewed:- May 2022

• Signed: Mrs R. Mitchell (Chair of Management Committee)