



Scoil Chaitríona Junior

CHILD PROTECTION POLICY

Introduction

This document has been reviewed by staff of Scoil Chaitríona Junior in October 2011 in response to recent changes in legislation. It further develops previous policy in this area and takes account of the provisions of the following pieces of legislation.

The Education Act 1998
The Child Welfare Act 2000
Children Act 2001
Criminal Justice Act 2006
Domestic Violence Act 1996
Protection for Persons Reporting Child Abuse Act 1998
Data Protection Act 1988 & 2003
Non-Fatal Offence against the person Act 1997
Freedom of Information Acts 1997 & 1997

Aims of this Policy

- To provide clear guidelines and procedures to all staff regarding child protection.
- To identify a designated person to act as a liaison with outside agencies and a resource person to any staff member or volunteer who has child protection concerns.
- To encourage staff to report concerns or suspicions to the designated liaison person.
- To assist people in identifying and reporting child abuse and neglect and deal effectively with concerns.
- To empower children to cope with all situations regarding safety by equipping them with the necessary life skills.

References

In all instances of suspicion or allegations of abuse or neglect, the following resource books will be referenced.

- Children First : National guidelines for the Prevention and Welfare of Children” – Department of Children and Youth Affairs 2011
- Children First” - Department of Children and Youth Affairs 2011

The *Child Protection Procedures for Primary and Post Primary Schools* have been developed following extensive consultation with the education partners and are based on the recently published *Children First – National Guidance for the Protection and Welfare of Children 2011*.

- The purpose of these procedures is to give clear direction and guidance to school management authorities and school personnel in implementing *Children First* within the school setting.
- The procedures will apply with immediate effect to primary and post-primary schools.

Designated Liaison Person (DLP)

The Principal shall act as DLP in all situations except where a conflict of interest arises. In such circumstances either the deputy DLP or a named senior teacher shall act as DLP. Should circumstances warrant it, the Deputy Principal shall act as DLP.

The DLP has specific responsibility for child protection and shall represent the school in all dealings with Health Boards, An Garda Síochána and other parties in connection with allegations of abuse.

All matters pertaining to the processing or investigation of child abuse should be processed through the DLP.

Further information on the responsibilities of the DLP in cases where there are reasonable grounds for suspicion or where an allegation has been made are in ‘Child Protection DES’ – Pg 8 – Section 2.2

Action to be taken the DLP in cases where there are reasonable grounds for suspicion or where an allegation has been made are in ‘Child Protection DES’ Chapter 3 – Section 3.2 pg 11-12.

The Designated Liaison Person (DLP) is **Patricia Coleman**

The Deputy Designated Liaison Person (Deputy DLP) is

Teresa Carleton, Deputy Principal

Confidentiality

All information regarding concerns of possible child abuse should only be shared on a need to know basis in the interests of the child.

Only those persons who have a legitimate involvement or role in dealing with the issue should be kept informed.

The provision of information to protect a child who may have been or is being abused, to those who need to have that information, is not a breach of confidentiality.

The DLP who is submitting a report to the Health Board or An Garda Síochána should also inform a parent/guardian unless doing so is likely to endanger the child or place that child at further risk. Where it is decided not to inform a parent or guardian, the reasons for not doing so should be briefly recorded.

In emergency situations, where the Health Board cannot be contacted, and the child appears to be at immediate and serious risk, An Garda Síochána should be contacted immediately.

A child should not be left in a dangerous situation pending Health Board intervention.

Protection for Persons Reporting Child Abuse

The Protection for Persons Reporting Child Abuse Act 1998, provides immunity from civil liability to any person who reports child abuse 'reasonably and in good faith' to designated officers of Health Boards or any member of An Garda Síochána.

This means that even if a reported suspicion of child abuse proves unfounded, a plaintiff who took an action would have to prove that the complainant had not acted reasonably and in good faith making this report.

The act provides significant protection for employees who report child abuse. These protections cover all employees and all forms of discrimination up to and including dismissal (*Child Protection, Guidelines and Procedures*, Department of Education & Science 2001 p. 6).

Qualified Privilege

While the legal protection outlined above only applies to reports made to the appropriate authorities (i.e. The Health Boards and An Garda Síochána), Common Law qualified privilege continues to apply as heretofore. Consequently, should a Board of Management member or school personnel furnish information with regard to suspicions of child abuse to the DLP or the Board of Management chairman, such communication would be regarded under common law as having qualified privilege.

A further definition of qualified privilege is outlined in Section 1.4.2 and 1.4.3, page 6 of *Child Protection – Guidelines & Procedures*.

Freedom of Information Act 1997

Reports made to Health Boards may be subject to provisions of the Freedom of Information Act 1997. This act enables members of the public to obtain access to personal information relating to them which is in the possession of public bodies. However, the act also provides that public bodies may refuse access to information obtained by them in confidence.

Definition and Recognition of Child Abuse

Child abuse can be categorised into four different types:

1. neglect
2. emotional abuse
3. physical abuse
4. sexual abuse

A child may be subjected to more than one form of abuse at any given time.

CATEGORIES OF ABUSE:

All references are to *Children First: National Guidance for the Protection and Welfare of Children* - Department of Children and Youth Affairs 2011 (pp. 8-10)

1. Definition of Neglect: (Page 8 of the 2011 National Guidelines for the Protection & welfare of children)

- I. Neglect can be defined in terms of an *omission*, where the child suffers significant harm or impairment of development by being deprived of food, clothing, warmth, hygiene, intellectual stimulation, supervision and safety, attachment to and affection from adults, and/or medical care.
- II. Harm can be defined as the ill-treatment or the impairment of the health or development of a child. Whether it is *significant* is determined by the child's health and development as compared to that which could reasonably be expected of a child of similar age.
- III. Neglect generally becomes apparent in different ways *over a period of time* rather than at one specific point. For example, a child who suffers a series of minor injuries may not be having his or her needs met in terms of necessary supervision and safety. A child whose height or weight is significantly below average may be being deprived of adequate nutrition. A child who consistently misses school may be being deprived of intellectual stimulation.
- IV. The *threshold of significant harm* is reached when the child's needs are neglected to the extent that his or her well-being and/or development are severely affected.

2. Definition of Emotional Abuse: (Page 8 - 9 of the Guidelines)

- I. Emotional abuse is normally to be found in the *relationship* between a parent/carer and a child rather than in a specific event or pattern of events. It occurs when a child's developmental need for affection, approval, consistency and security are not met. Unless other forms of abuse are present, it is rarely manifested in terms of physical signs or symptoms. Examples may include:
 - (i) the imposition of negative attributes on a child, expressed by persistent criticism, sarcasm, hostility or blaming;
 - (ii) conditional parenting in which the level of care shown to a child is made contingent on his or her behaviours or actions;
 - (iii) emotional unavailability of the child's parent/carer;
 - (iv) unresponsiveness of the parent/carer and/or inconsistent or inappropriate expectations of the child;
 - (v) premature imposition of responsibility on the child;
 - (vi) unrealistic or inappropriate expectations of the child's capacity to understand something or to behave and control himself or herself in a certain way;
 - (vi) under- or over-protection of the child;
 - (vii) failure to show interest in, or provide age-appropriate opportunities for, the child's cognitive and emotional development;

- (viii) use of unreasonable or over-harsh disciplinary measures;
 - (ix) exposure to domestic violence;
 - (xi) exposure to inappropriate or abusive material through new technology.
- II. Emotional abuse can be manifested in terms of the child's behavioural, cognitive, affective or physical functioning. Examples of these include insecure attachment, unhappiness, low self-esteem, educational and developmental underachievement, and oppositional behaviour. The *threshold of significant harm* is reached when abusive interactions dominate and become *typical* of the relationship between the child and the parent/carer.

3. Definition of Physical Abuse (Page 9)

Physical abuse of a child is that which results in actual or potential physical harm from an interaction, or lack of interaction, which is reasonably within the control of a parent or person in a position of responsibility, power or trust. There may be single or repeated incidents.

Physical abuse can involve:

- (i) severe physical punishment;
- (ii) beating, slapping, hitting or kicking;
- (iii) pushing, shaking or throwing;
- (iv) pinching, biting, choking or hair-pulling;
- (v) terrorising with threats;
- (vi) observing violence;
- (vii) use of excessive force in handling;
- (viii) deliberate poisoning;
- (ix) suffocation;
- (x) fabricated/induced illness (*see Appendix 1 for details*);
- (xi) allowing or creating a substantial risk of significant harm to a child.

4. Definition of Sexual Abuse: (Page 9 - 10)

It should be noted that the definition of child sexual abuse presented in this section is not a legal definition and is not intended to be a description of the criminal offence of sexual assault.

Sexual abuse occurs when a child is used by another person for his or her gratification or sexual arousal, or for that of others. Examples of child sexual abuse include:

- (i) exposure of the sexual organs or any sexual act intentionally performed in the presence of the child;
- (ii) intentional touching or molesting of the body of a child whether by a person or object for the purpose of sexual arousal or gratification;
- (iii) masturbation in the presence of the child or the involvement of the child in an act of masturbation;

(iv) sexual intercourse with the child, whether oral, vaginal or anal;

(v) sexual exploitation of a child, which includes inciting, encouraging, propositioning, requiring or permitting a child to solicit for, or to engage in, prostitution or other sexual acts. Sexual exploitation also occurs when a child is involved in the exhibition, modeling or posing for the purpose of sexual arousal, gratification or sexual act, including its recording (on film, video tape or other media) or the manipulation, for those purposes, of the image by computer or other means. It may also include showing sexually explicit material to children, which is often a feature of the 'grooming' process by perpetrators of abuse;

Sexual Abuse occurs when a child is used by an other person for his or gratification or sexual arousal or for that of others.

vi) consensual sexual activity involving an adult and an underage person. In relation to child sexual abuse, it should be noted that, for the purposes of the criminal law, the age of consent to sexual intercourse is 17 years for both boys and girls. An Garda Síochána will deal with the criminal aspects of the case under the relevant legislation.

It should be noted that the definition of child sexual abuse presented in this section is not a legal definition

and is not intended to be a description of the criminal offence of sexual assault.

Grounds for Concern: (General – all abuse)

Child neglect or abuse can often be difficult to identify and may present in many forms. A list of indicators of child abuse is contained in **Appendix 1 of the Guidelines**. No one indicator should be seen as conclusive in itself of abuse.

It may indicate conditions other than child abuse. All signs and symptoms must be examined in the context of the child's situation and family circumstances.

Guidelines for Recognition of Child Abuse

The ability to recognise child abuse can depend as much on a person's willingness to accept the possibility of its existence as it does on their knowledge and information. There are commonly three stages in the identification of child neglect or abuse:

- i. Considering the possibility
- ii. Looking out for signs of abuse
- iii. Recording of information

Each of these stages is developed in '*Children First: National Guidance for the Protection and Welfare of Children 2011* p. 10.

Handling Disclosures From Children

Child Protection, Guidelines and Procedures - Department of Education & Science 2001 Section 2.4 p.9, gives comprehensive details of how disclosures should be approached.

When information is offered in confidence the member of staff will need tact and sensitivity in responding to the disclosure. The member of staff will need to reassure the child, and retain his/her trust, while explaining the need for action and the possible consequences, which will necessarily involve other adults being informed. It is important to tell the child that everything possible will be done to protect and support him/her but not to make promises that cannot be kept e.g. promising not to tell anyone else.

The following advice is offered to school personnel to whom a child makes a disclosure of abuse.

- Listen to the child
- Take all disclosures seriously
- Do not ask leading questions or make suggestion to the child
- Offer reassurance but do not make promises
- Do not stop a child recalling significant events
- Do not over react
- Explain that further help may have to be sought
- Record the discussion accurately and retain the record

This information should then be passed on the DLP.

If the reporting person or member of the school staff and DLP are satisfied that there are reasonable grounds for the suspicion/allegation, the procedures for reporting as laid out in 'Children First' – Section 3.4 p 14 will be adhered to. Standardised reporting forms may be photocopies from 'Children First' Appendix 3 p 78.

The Chairman of the Board of Management will be informed before the DLP makes contact with the relevant authorities unless the situation demands that more immediate action to be taken for the safety of the child, in which case the Chairman may be informed after the report has been submitted. Details of what should be included in the report are outlined in 'Children First' – Section 3.5 – pp 14 - 15.

Any Professional who suspects child abuse should inform parents or carers if a report is to be submitted to the Health Board or An Garda Síochána, unless doing so is likely to endanger the child.

In cases of emergency, where a child appears to be at immediate and serious risk, and a duty social worker is unavailable, An Garda Síochána should be contacted. Under no circumstances should a child be left in a dangerous situation pending Health Board intervention.

Allegations of Suspicions in relation to School Employees

The most important consideration for the Chairperson, Board of Management or the DLP is the safety and protection of the child. However, employees also have a right to protection against claims which are false or malicious.

As employers, the Board of Management should always seek legal advice as the circumstances can vary from one case to another.

When an allegation of abuse is received, it should be assessed promptly and carefully by the employer. Action taken in reporting an allegation of child abuse against an employee should be based on an opinion formed 'reasonably and in good faith'. It will be necessary to decide whether a formal report should be made to the HSE Children and Family Services. This decision should be based on reasonable grounds for concern, as outlined in **Chapter 3** of this national guidance.

There are two procedures to be followed:

- i. The reporting Procedure and
- ii. The Procedure for dealing with employee

The DLP has responsibility for reporting the matter to the Health Board. The Chairperson, Board of Management has responsibility, acting in consultation with his/her board, for addressing the employment issues.

If the allegation is against the DLP, the Board of Management Chairperson will assume the responsibility for reporting the matter to the Health Board.

Reporting.

When an allegation of abuse is made against a school employee, the DLP should immediately act in accordance with the procedures outlined in *Children First: National Guidance for the Protection and Welfare of Children 2011*, Chapter 3, Section 3.4., p 14.

A written statement of the allegation should be sought from the person or agency making the report. The DLP should always inform the Chairperson of the Board of Management.

School employee other than the DLP, who receive allegations against another school employee, should immediately report the matter to the DLP. School employees, who form suspicions regarding conduct of another school employee, should consult with the DLP. The procedures outlined in Section 3, pg 14 will then be followed.

The complainant employee, the Chairperson and DLP should privately make this employee aware:

- i. That an allegation has been made against him/her
- ii. the nature of the allegation and
- iii. Whether or not the Health Board of Gardaí:
 - a. have already been informed,
 - b. should be informed, or
 - c. must and will be informed

The employee should be given a copy of the written allegation and any other relevant documentation. The employee should be requested to respond to the allegation in writing to the Board of Management within a specified period and told that this may be passed to the Gardaí, Health Board, and legal advisers.

The priority in all cases is that no child be exposed to unnecessary risk. Therefore, as a matter of urgency, the Chairman should take any necessary protective measures. Those measures should be proportionate to the level of risk and should not unreasonably penalise the employee in any way, unless to protect the child.

If, in the Chairperson's opinion, the nature of the allegations warrant immediate action the Board of Management should be convened to consider the matter. This may result in the Board of Management directing the employee to absent him/herself from the school forthwith, while the matter is being investigated. The employee shall be placed on administrative leave pending the findings of the investigation.

When the Board of Management is unsure as to whether this should occur, advice should be sought from the Gardaí and/or the Child Care Manager of the Health Board and the legal advisers to the Board of Management and regard be had to this advice.

Administrative Leave

Wherever the Board of Management directs that the employee be placed on administrative leave, it is a leave of absence with pay. Administrative leave is not suspension and does not imply any degree of guilt.

The DES should be immediately informed. (*Children First: National Guidance for the Protection and Welfare of Children 2011 p 17*).

When the Board of Management is unsure as to whether an employee is placed on administrative leave, advice should be sought from the Gardaí and/or the Child Care Manager of the Health Board and the legal advisers to the Board of Management. The Board of Management must seriously consider this advice.

Board of Management

The Chairperson should inform the Board of Management of all the details and remind the members of their serious responsibility to maintain strict confidentiality on all matters relating to the issue and the principles of due process and natural justice.

ORGANISATIONAL ISSUES:

*** Supervision:**

- School opens at 8.40 a.m. – 2.30 p.m. Supervision covers these hours.
- School security is adequate – doors are locked as far as possible
- Bell on front door
- Parents are asked to wait outside to collect children
- Interconnecting phone system
- Rota for break time

*** Attendance:**

- Comply with Welfare Board
- Patterns of absences are noted.
- Notes are requested for absences and held for reasonable period
- Parents notified at 15 days absence

*** Record Keeping:**

- All accidents are recorded and stored in First Aid area
- All serious accidents are recorded by class teacher and held on file.
- Formal reports of suspected abuse are given to D.L.P.

*** Induction of Staff:**

New members are given copy of policies and are briefed on school rules and procedures. Training if available is appropriate.

*** Pupils Transport:**

- If a child is ill, parents are sent for
- In an emergency we send for ambulance
- Special Needs children go to an event. in groups, occasionally in a teacher's car.

*** Special Needs:**

- Special Needs Assistant (SNA) or the class teacher will accompany the special needs child.
- Curriculum is adapted to include special needs pupils and life skills are promoted.

*** Linkage with other policies:**

- Code of Behaviour
- Enrolment
- R.S.E.
- S.P.H.E
- Anti Bullying
- Health & Safety
- Substance Abuse

4. Curricular Implications:

SPHE & RSE

- Promote Life-skills
- Promoting security
- Building trust
- Open atmosphere encourages trust
- Confidence that pupils will be listened to and issues taken seriously and dealt with/action taken
- Child centered school

Success Criteria: Trusting partnership and all are valued and issues are dealt with

Implementation: Current practice

Ratification: Presented at next Board Meeting in October 2011

Review: Annually in September

Reviewed by the Board of Management on September 29th , 2015

Signed..... Date.....
Chairperson of Board of Management

Signed Date
Principal

