



Safeguarding

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Principle

Naíscoil na Seolta is committed to safeguarding the well-being of children; promoting their rights and best interests.

Policy

We at Naíscoil na Seolta have a primary commitment to and responsibility for the welfare, safety and holistic development of each child in our care.

We aim to carry out this duty by providing a caring, supportive and safe environment in which the individual child is given time, encouragement and support to learn and develop to their full potential. The welfare of each child is our paramount consideration.

We in Naíscoil na Seolta want to ensure that children are protected and kept safe from harm while they are in our care. We ensure our staff and volunteers are carefully selected, trained and supervised. We will endeavour through discussion and written guidelines and forms to ensure parents/carers/guardians know how to voice their concerns or complaints if there is anything they are not happy about. This policy has been developed in line with the Regional Child Protection policy and procedures, and the UNOCINI referral template is attached.

This policy outlines the protection of children by identifying clear instructions in accordance with the legislative framework of The Children (NI) Order 1995, taking into consideration the five main principles of the Order, the first being “the welfare of the child is paramount”.

Everyone at Naíscoil na Seolta who comes into contact with children and their families have a duty to safeguard and promote the well-being of children. At Naíscoil na Seolta the committee/staff/volunteers will work with children, persons with parental responsibility as well as carers/guardians and the community to ensure the rights and safety of children and to give them the very best start in life.

Throughout this Policy and Procedures, we use the term “Parents/carers/guardians” to mean those with parental responsibility as defined by the Children (NI) Order 1995.

Naíscoil na Seolta promotes children's right to be strong, resilient and listened to by creating an environment in our setting that encourages children to develop a positive self-image, which includes their heritage arising from their colour and ethnicity, their languages spoken at home, their religious beliefs, culture traditions and home background.

Naíscoil na Seolta promotes children's right to be strong, resilient and listened to by encouraging children to develop a sense of autonomy and independence.

Naíscoil na Seolta promotes children's right to be strong, resilient and listened to by enabling children to have the self-confidence and the vocabulary to resist inappropriate approaches.

Naíscoil na Seolta helps children establish and sustain satisfying relationships within their families, with peers, and with other adults.

Naíscoil na Seolta works with parents/carers/guardians to build their understanding of, and commitment to, the principles of safeguarding all our children.

Procedures

In accordance with Trust Guidelines, Our Duty to Care and Social Services, at Naíscoil na Seolta we will endeavour to safeguard children by:

Key commitment 1

Naíscoil na Seolta is committed to building a culture of safety in which children are protected from abuse and harm in all areas of our service delivery.

Staff/Students/Trainees and Volunteers

Our Designated Child Protection Officer is Gerardine Monroe

Contact details: 07786 782083 or naiscoil@scoilnaseolta.org

Our Committee Designated Child Protection Officer is: Annelies Taylor

Contact details: fao Annelies Taylor naiscoilnaseolta@outlook.com

Our Committee Deputy Designated Child Protection Officer is: Caoimhe O'Connell

Contact Details: fao Caoimhe O'Connell naiscoilnaseolta@outlook.com

At Naíscoil na Seolta we endeavour to ensure that:

All staff and parents/carers/guardians are made aware of our safeguarding policy and procedures.

Naíscoil na Seolta provides adequate and appropriate staffing resources to meet the needs of children.

Candidates are informed of the need to carry out 'enhanced disclosure' checks with the current up to date vetting procedures before posts can be confirmed. No person will be placed in a position (either paid or unpaid) which involves contact with children without being properly and effectively vetted.

Where applications are rejected because of information that has been disclosed, applicants have the right to know and to challenge incorrect information.

Naíscoil na Seolta adheres to the Health and Social Care Trust requirements in respect of references and criminal record checks for staff/students/trainees and volunteers, to ensure that no disqualified person or unsuitable person works at the setting or has access to the children.

Students/trainees/volunteers do not work unsupervised.

Naíscoil na Seolta adheres to the relevant guidelines in respect of any person who is dismissed from our employment, or resigns in circumstances that would otherwise have led to dismissal for reasons of child protection concern.

Naíscoil na Seolta has a procedure for recording the details of visitors to the setting.

There are security steps in place to ensure that we have control over who comes into the setting so that no unauthorised person has unsupervised access to the children.

Key commitment 2

We are committed to responding promptly and appropriately to all incidents or concerns of abuse that may occur and to work with statutory agencies in accordance with the procedures that are set out.

Responding to suspicions of abuse

All those working with children are aware that abuse of children can take different forms - physical, emotional and sexual, as well as neglect. Appendix 1 Definitions of Abuse & Specific types of Abuse

When children are suffering from physical, sexual or emotional abuse, or may be experiencing neglect, this may be demonstrated through the things they say (direct or indirect disclosure) or through changes in their appearance, their behaviour, or their play. Appendix 2 Signs of Abuse

Where such evidence is apparent, the child's key worker/staff member makes a dated record of the details of the concern and discusses what to do with the Designated Officer. The information is stored on the child's personal file.

Naíscoil na Seolta will refer concerns to the Gateway team and co-operate fully in any subsequent investigation.

Those involved will take care not to influence the outcome either through the way they speak to children or by asking questions of children.

The designated/deputy designated officer will use detailed procedures and reporting format when making a referral to Gateway.

Contact will be made with Early Years Link Social Worker/Early Years Team.

Where a child is already known to Social Services and has a social worker, we will contact them directly.

Contact details are:

Early Years Social Worker: Clare O'Dempsey

Recording suspicions of abuse

Where a child makes comments to a member of staff that give cause for concern (disclosure), or a member of staff observes signs or signals that give cause for concern, such as significant changes in behaviour, deterioration in general well-being, unexplained bruising, marks or signs of possible abuse or neglect, a member of staff will:

Listen to the child, offer reassurance and give assurance that he/she will take action.

Not question the child.

Make a written record that forms an objective record of the observation or disclosure that includes:

the date and time of the observation or the disclosure;

the exact words spoken by the child as far as possible;

the name of the person to whom the concern was reported, with the date and time;

the names of any other person present at the time.

These records are signed and dated and kept in the child's personal file which is kept securely and confidentially.

Making a referral to Gateway

Naíscoil na Seolta will follow any procedures that the Gateway team has in place.

Naíscoil na Seolta will also inform our link social worker that we have made a referral to the Gateway team.

Where the child already has a social worker, Naíscoil na Seolta will contact them directly.

Naíscoil na Seolta will retain a copy of any forms filled in for Gateway in the child's personal file.

All staff are aware of the referral procedures for recording and reporting.

Contact details for Gateway Team are:

Gateway Team: 028 9050 7000

In person:

Speak to a Duty Social Worker at

Gateway Services

110 Saintfield Road

BELFAST

BT8 6HD

Out of Hours Service (after 5pm each evening, at weekends and public holidays):

028 9504 9999

The following link provides detailed information on making a referral through the local Health and Social Care (HSC Trust) Children's Gateway Single Point of Entry or in urgent situations the police:

https://www.proceduresonline.com/sbni/p_referrals.html

Informing parents/carers/guardians

Parents/carers/guardians are normally the first point of contact.

If a suspicion of abuse is recorded, parents/carers/guardians are informed at the same time as the report is made, except where guidance does not allow this. **Copy of record template Appendix 3**

This will usually be the case where the parent/carer/guardian is the likely abuser. In these cases the investigating officer will follow guidance from outside agencies as to whether to inform parents/carers/guardians.

Liaison with other agencies

Naíscoil na Seolta will work with the Health and Social Care Trust guidelines.

All staff are familiar with what to do if they have concerns.

Naíscoil na Seolta has procedures for contacting the Health and Social Care Trust on child protection issues, including maintaining a list of names, addresses and telephone numbers of social workers, to ensure that it is easy, in any emergency, for the setting and the Trust to work well together.

Naíscoil na Seolta will notify the Health and Social Care Trust of any incident and any changes in our arrangements which may affect the well-being of children.

If a referral is to be made to the Gateway team, Naíscoil na Seolta will act within the area's Safeguarding Children and Child Protection guidance in deciding whether we must inform the child's parents/carers/guardians at the same time.

Other agencies which may be contacted for advice. **Details on Appendix 4**

Allegations against staff

Naíscoil na Seolta ensures that all parents/carers/guardians know the complaints policy if they have concerns regarding the behaviour or actions of staff/students/trainees/volunteers within the setting.

Naíscoil na Seolta will follow the guidance of the Health and Social Care Trust when responding to any complaint that a parent/carer/guardian has put forward.

Naíscoil na Seolta will respond to any disclosure by children or staff that abuse by a member of staff, student/trainee/volunteer within the setting, by first recording the details of any such alleged incident.

The Committee will refer any such complaint immediately to the Gateway team and the link social worker to investigate. Naíscoil na Seolta is aware that it is an offence not to do this.

The Committee team of Naíscoil na Seolta will co-operate fully with any investigation carried out by the Gateway team/Early Years Team.

Where the committee team and Health and Social Care Trust agree it is appropriate in the circumstances, the committee will suspend the member of staff/volunteer/student/trainee, for the duration of the investigation. This is not an indication of admission that the alleged incident has taken place but is to protect the staff as well as the children and families throughout the process.

Disciplinary action

Where a member of staff/student/trainee/volunteer has been dismissed due to engaging in activities that caused concern for the safeguarding of children, the committee will notify Gateway/Early Years and the Independent Safeguarding Authority of relevant information so that individuals who pose a

threat to children (and vulnerable adults), can be identified and barred from working with these groups.

Key commitment 3

Naíscoil na Seolta is committed to promoting awareness of child abuse issues throughout child protection training for staff. Naíscoil na Seolta is also committed to empowering young children, through our curriculum, promoting their right to be strong, resilient and listened to.

Training

The committee will seek out training opportunities for all adults involved in the setting to ensure that they are able to recognise the signs and signals of possible physical abuse, emotional abuse, sexual abuse and neglect and that they are aware of the Health and Social Care Trust guidelines for making referrals.

The committee will ensure that all staff know the procedures for reporting and recording their concerns in the setting.

The committee will ensure that staff/volunteers are trained in Safeguarding Children/Child Protection in line with current regulations and this will be reviewed annually at staff appraisals where training needs can be identified.

Planning

The layout of the room allows for constant supervision. No child is left alone with staff/volunteer/students/trainees in a one-to-one situation without being visible to others.

Curriculum

Naíscoil na Seolta introduces key elements of keeping children safe into our programme to promote the personal, social and emotional development of all children, so that they may grow to be strong, resilient and listened to and that they may develop

an understanding of why and how to keep safe. This is referred to as Preventative Education.

Naíscoil na Seolta creates a culture of value and respect for every individual within the setting, having positive regard for children's heritage arising from their colour, ethnicity, languages spoken at home, cultural and social background. We also understand the additional vulnerability of children with disabilities. (See Appendix 5)

We ensure that this is carried out in a way that is developmentally appropriate for all children.

Confidentiality

All suspicions and investigations are kept confidential and shared only with those who need to know. Any information is shared under the guidance of the Health and Social Care Trust.

Support to families

Naíscoil na Seolta believes in building trusting and supportive relationships with families, staff/students/trainees/volunteers in the group.

Naíscoil na Seolta makes clear to parents/carers/guardians our roles and responsibilities in relation to child protection, such as for the reporting of concerns, providing information, monitoring of the child, and liaising at all times with the Health and Social Care Trust.

Naíscoil na Seolta follows child protection guidelines as set out by Health and Social Care Trust in relation to the setting's designated role and tasks in supporting that child and their family, subsequent to any investigation.

Confidential records kept on a child are shared with the child's parents/carers/guardians in accordance with Health and Social Care Trust guidelines.

Understanding the Needs of Children in Northern Ireland (UNOCINI)

Naíscoil na Seolta is aware of the referral system of UNOCINI – Understanding the Needs of Children in Northern Ireland. The registering social worker and the Gateway Team will keep us informed of any changes and training available.

‘Understanding the Needs of Children in Northern Ireland’ (UNOCINI) is a framework to support professionals in assessment and planning to better meet the needs of children and their family. The UNOCINI model is used to enable practitioners and their agencies to communicate their concerns about children using a common format, language and understanding of the levels of need, concern or risk for all children across Northern Ireland.

The UNOCINI referral form must be 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.

Reporting Procedures with relevant contact details are displayed on noticeboard in foyer and attached as **Appendix 6**

Appendix 1

Types of Abuse

Child abuse may take a number of forms, including:

Neglect is the failure to provide for a child's basic needs, whether it be adequate food, clothing, hygiene, supervision or shelter that is likely to result in the serious impairment of a child's health or development. Children who are neglected often also suffer from other types of abuse.

Physical Abuse is deliberately physically hurting a child. It might take a variety of different forms, including hitting, biting, pinching, shaking, throwing, poisoning, burning or scalding, drowning or suffocating a child.

Sexual Abuse occurs when others use and exploit children sexually for their own gratification or gain or the gratification of others. Sexual abuse may involve physical contact, including assault by penetration (for example, rape, or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside clothing. It may include non-contact activities, such as involving children in the production of sexual images, forcing children to look at sexual images or watch sexual activities, encouraging children to behave in sexually inappropriate ways or grooming a child in preparation for abuse (including via e-technology). Sexual abuse is not solely perpetrated by adult males. Women can commit acts of sexual abuse, as can other children.

Emotional Abuse is the persistent emotional maltreatment of a child. It is also sometimes called psychological abuse and it can have severe and persistent adverse effects on a child's emotional development. Emotional abuse may involve deliberately telling a child that they are worthless, or unloved and inadequate. It may include not giving a child opportunities to express their views, deliberately silencing them, or 'making fun' of what they say or how they communicate. Emotional abuse may involve bullying - including online bullying through social networks, online games or mobile phones - by a child's peers.

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. It extends to the recruitment, transportation, transfer, harbouring or receipt of children for the purpose of exploitation. Exploitation can be sexual in nature.

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

Bullying - the repeated use of power by one or more persons intentionally to harm, hurt or adversely affect the rights and needs of another or others.

Although bullying is not defined as abuse, in its more extreme form it would be regarded as physical and/or emotional abuse.

Specific Types of Abuse

Domestic and Sexual Violence and Abuse

The Stopping Domestic and Sexual Violence and Abuse Strategy (2016) defines domestic and sexual violence and abuse as follows:-

Domestic Violence and Abuse:

'threatening, controlling, coercive behaviour, violence or abuse (psychological, virtual, physical, verbal, sexual, financial or emotional) inflicted on anyone (irrespective of age, ethnicity, religion, gender, gender identity, sexual orientation or any form of disability) by a current or former intimate partner or family member.'

Sexual Violence and Abuse

'any behaviour (physical, psychological, verbal, virtual/online) perceived to be of a sexual nature which is controlling, coercive, exploitative, harmful, or unwanted that is inflicted on anyone (irrespective of age, ethnicity, religion, gender, gender identity, sexual orientation or any form of disability).'

Please note that coercive, exploitative and harmful behaviour includes taking advantage of an individual's incapacity to give informed consent.

Female Genital Mutilation

Female Genital Mutilation (FGM) is a form of child abuse and violence against women and girls. FGM comprises all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons. The procedure is also referred to as 'cutting', 'female circumcision' and 'initiation'. The practice is medically unnecessary, extremely painful and has serious health consequences, both at the time when the mutilation is carried out and in later life.

FGM is a form of child abuse and, as such, staff have a statutory duty to report cases, including suspicion, to the appropriate agencies, through agreed and established school procedures.

In the UK, FGM has been a specific criminal offence since the Prohibition of Female Circumcision Act 1985. The Female Genital Mutilation Act 2003 replaced the 1985 Act in England, Wales and Northern Ireland and the Serious Crime Act 2015 further strengthened the law on FGM.

FGM is a complex issue with many men and women from practising communities considering it to be normal to protect their cultural identity. The procedure may be carried out when the girl is new born, during childhood or adolescence, just before marriage or during the first pregnancy. However, the majority of cases are thought to take place between the ages of five and eight, putting children in this age bracket at highest risk.

Children who Display Harmful Sexualised Behaviour

Learning about sex and sexual behaviour is a normal part of a child's development. It will help them as they grow up, and as they start to make decisions about relationships. Schools support children and young people, through the Personal Development element of the curriculum, to develop their understanding of relationships and sexuality and the responsibilities of healthy relationships. Teachers are often therefore in a good position to consider if behaviour is within the normal continuum or otherwise. It must also be borne in mind that sexually harmful behaviour is primarily a child protection concern. There may remain issues to be addressed through the school's positive behaviour policy but it is important to always apply principles that remain child centred.

It is important to distinguish between different sexual behaviours - these can be defined as 'healthy', 'problematic' or 'sexually harmful'. More details on each type of behaviour can be found in DE Circular 2016/05 'Children Who Display Harmful Sexualised Behaviour'.

Healthy sexual behaviour will normally have no need for intervention, however consideration may be required as to appropriateness within a school setting.

Problematic sexual behaviour requires some level of intervention, depending on the activity and level of concern. For example, a one-off incident may simply require liaising with parents/carers/guardians on setting clear direction that the behaviour is unacceptable, explaining boundaries and providing information and education. Alternatively, if the behaviour is considered to be more serious, perhaps because there are a number of aspects of concern, advice from the EA CPSS may be required.

The CPSS will advise if additional advice from PSNI or Social Services is required.

E-Safety/Internet Abuse

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

Appendix 2

Signs of Child Abuse

All professionals working with children and their families need to be aware of the indicators of child abuse. Where a professional is unsure but has concerns that a child may have been harmed or may be at risk of being harmed it is essential that they consult with, and share information with, other relevant professionals. In all cases there needs to be an assessment of the nature of the injury or allegation in relation to the explanation offered and the family circumstances. Injuries alone are not always conclusive.

Suspicion should be raised by

Delay in seeking treatment

Inadequate or discrepant explanations

A lack of any explanation for injuries

Injuries of different ages

A history of previous injuries

Failure to thrive

The parent/carer/guardian showing little or no anxiety about the child's condition

The parent/carer/guardian coldly blames the child

Evidence of marital violence

The child telling you

Someone else telling you

Noticing signs i.e. physical injury, the child's behaviour, staff/volunteer's behaviour

Unexplained prolonged absence from setting

Signs which suggest physical abuse

Most inflicted injuries are not the result of conscious, premeditated acts by the carer, but sudden outbursts with no considered intent of harming the child or of doing so seriously. The severity of the injury is often a matter of chance. It is not necessary to establish intent to cause harm to the child to conclude that the child has been subject to abuse.

Possible signs which may suggest physical abuse

The following is a brief list of possible signs :

Any bruising on a baby (pre-toddling)

Multiple bruising other than on the shins

Bruise and scratches to the face and head

Bi-lateral black eyes

Torn upper fraenum

Finger tip bruising which suggests a child may have been forcibly gripped

Finger marks or hand weal's

Bite marks

Weal marks and severe bruising

Cigarette burns

Linear bruises or burns

Head injury, which may present as drowsiness or vomiting.

Poisoning

Fractures of dislocations with implausible explanations

Possible behavioural Indicators

Wary or watchful of adult contact

Behavioural extremes, aggression/withdrawn
Afraid to go home
Reluctance to change clothing

Signs and symptoms of sexual abuse

Possible physical Indicators

Finger tip bruising on inner thighs

Itching, soreness, discharge, bleeding, pain on passing urine, repeated urinary tract infection

Injuries to the genital area

Faecal soiling, rectal bleeding

Sexually transmitted disease

Persistent abdominal pain and headaches without apparent cause

Emotional Indicators

Fear, anxiety, misery and physical complaints

Sudden changes of mood

Eating disturbances

Regressive behaviour - overly clinging, bed wetting

Sleep disturbances - night terrors, nightmares, sleepwalking and refusal to go to bed

Disobedience, disruptiveness, destructiveness, aggression and often by antisocial behaviour

Changes in relationships with peers or peer group

Undue/unusual preoccupation in sexual matters

Sexualised behaviour towards adults and other children

Explicit sexual play

It should be recognised that many of these signs and symptoms may be caused by conditions unrelated to sexual abuse. Care must be taken to exclude the possibility of medical causes for a child presenting with physical symptoms.

Signs which may suggest neglect

Each indicator should not be seen in isolation. It should take account of the child's age and development and it will need to be persistent or severe, resulting in a significant impairment of the child's health or development for neglect to be considered to meet the threshold criteria for the child protection procedures to apply. However less clear concerns about neglect should not be ignored by professionals. Information should be shared and the family engaged in a case plan to provide the necessary support at an early stage.

It is important to be aware that the following signs may be caused by other aspects of the child's living environment such as poverty, bereavement, stressful change or discrimination.

Possible indicators of neglectful behaviour

Failure to provide sufficient food on a regular basis (child therefore being small and underweight)

Failure to provide appropriate food for age and health needs (e.g. when a child has special dietary needs such as diabetes)

Failure to ensure personal hygiene, including keeping skin/hair clean and washed regularly (e.g. excessive nappy rash, ingrained dirt, urine/excrement smells)

Failure to take to medical appointments. Failure to give medication. Failure to seek treatment including failure to make pre-school children available for medical, developmental and cognitive assessments when necessary

Failure to ensure that the child attends Naíscóil na Seolta regularly and punctually

Failure to provide appropriate safety and protection from harm
Failure to ensure appropriate hygiene condition in the home (e.g. ingrained dirt, rotten food, excrement and urine, animal faeces, soiled bedclothes)
Failure to provide adequate warmth in the home, including appropriate bedding and clothing.
Failure to provide appropriate supervision within the home (left alone, left with unsuitable carers, locked in bedrooms) or outside the home (young children in the street at late hours)

Signs which may suggest emotional abuse

For emotional abuse to be said to be present, a causal link must be established between the signs in the children and specific abusive acts by their parents/carers/guardians.

It is important to be aware that the signs may be caused by other aspects of the child's living environment, such as poverty, bereavement, stressful change, or discrimination. These signs are not in themselves indicative of emotionally abusive acts by the parents/carers/guardians.

Habit Disorders - rocking, thumb sucking, over-eating, disturbed sleeping

Conduct Disorders - withdrawal, stealing, destructiveness, smearing of faeces, bedwetting, excessive attention seeking

Affect Disorders - anxiety, depression, absence of attachment behaviour, low self-esteem, inappropriate attention seeking or avoiding behaviour, frozen awareness

Behavioural Extremes - overly compliant or disobedient, overly passive or aggressive

Delays in Physical, Social or Intellectual Development - poor growth, speech delay, under achievement, inability to form peer relationships, inability to be independent or to concentrate

Possible indicators of emotionally abusing behaviours in adults

Rejecting - treating a child differently in a way which suggests dislike, refusing to help a child or to acknowledge a child's request for assistance

Degrading - labelling a child as inferior or worthless or unlovable

Terrorising - threatening a child, exposing brutal or violent behaviour, alternately indulging or abusing so that the child is unable to predict adult moods and actions, threatening to leave

Isolating - not allowing the child to interact with the carer or other adults or children

Corrupting - teaching acts which degrade or criminalise, encouraging anti-social behaviour as being usual or appropriate such as aggression

Exploiting - using the child solely to gratify adult needs such as giving the child the role of servant or parent

Denying - denying the child's need for praise or physical attention or stimulation or affection or education or discipline, being emotionally unavailable, seriously unrealistic expectations of a child in relation to its age

All forms of abuse have an emotional component however emotional abuse often occurs where there are no indicators that other forms of abuse have taken place. Children who have been emotionally abused often carry the psychological consequences of the abuse into adulthood with adverse effect on their behaviour, relationships and parenting ability. It is essential therefore that professionals recognise the signs of this very damaging form of abuse at an early stage. Where professionals are unsure as to whether abuse is occurring, they should consult and share information with other relevant professionals.

Signs and symptoms of Bullying

Emotional - excluding, being unkind

Physical- hitting, kicking, theft

Racist- racial taunts, graffiti, gestures

Sexual- unwanted physical contact or sexually abusive comments

Homophobic- because of or focusing on the issue of sexuality

Verbal- name calling, sarcasm, spreading rumours, teasing

Cyber- text messages, picture/video and phone calls, email, websites.

The damage inflicted by bullying can frequently be underestimated. It can cause considerable distress to children, to the extent that it affects their health and development.

Appendix 3 Naíscoil na Seolta Report Form

Name of child

Age

Name of Person with parental responsibility

Home address

Phone number

Please complete if a child has disclosed to you about abuse
If no disclosure has been made please state Not Applicable (N/A)

When was the disclosure made? (Date & time)

Where was the disclosure made?

What were the immediate circumstances leading to disclosure?

Were others present at the time of disclosure?

If yes please state who (Names & positions)

Record factually what was disclosed. Where possible, record the exact words spoken by the child

Has anyone been alleged to be the abuser?

Reason for suspicion including factual description of the child's behaviour/change in behaviour

Reason for suspicion including factual description of the child's appearance

Time and date of observations

Did the child need medical attention?

Any action taken

Is the person making the report expressing their own concerns, or passing on those of somebody else? If so, record details.

Name and signature of recorder _____ Date _____

Referred to designated person _____ Date _____

Appendix 4

Key Contacts

Duty Social Worker Gateway Team (Health & Social Care Trust)

Phone:
028 9050 7000

In person:
Speak to a Duty Social Worker at
Gateway Services
110 Saintfield Road
BELFAST
BT8 6HD

Out of hours Emergency Service (after 5p.m. each evening, at weekends and public/bank holidays):
028 95049999

PSNI
PSNI The Central Referral Unit (CRU) based in Antrim Road PSNI Station is part of the Public Protection Unit and is the central referral point for child sexual and physical abuse allegations. The office is open Monday to Friday 8 am to 9 pm and weekends and public holidays 9 am to 5 pm. Telephone: 028 9025 9299

Public Service Ombudsman
May be contacted for advice or any concerns regarding the process:
0800 343424

NSPCC
Phone: If you are worried about a child and need advice - 0808 800 5000
Text number: 0800 056 0566 or 0800 1111
Email: help@nspcc.org.uk

Name of setting: Naíscoil na Seolta
Designated Person: Gerardine Monroe
Deputy Designated Person: Caoimhe O'Connell

Contact Details on parent's notice board for gateway teams Social Services and Designated Officers
Contact Details for the committee

Annelies Taylor
Fao Annelies Taylor naiscoilnaseolta@outlook.com
Caoimhe O'Connell
Fao Caoimhe O'Connell naiscoilnaseolta@outlook.com

Appendix 5

Children with Disability

In recognising child abuse all professionals should be aware that children with a disability can be particularly vulnerable to abuse for a number of reasons and that detection can be especially difficult

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Signs may be confused or because of the nature of the disability there may be a tendency to explain away signs such as bruising or inappropriate sexual behaviour.

Children with a disability are often more dependent on adults, including for intimate care and may be cared for by a number of different adults.

Children with disabilities may be unable to recognise abusive behaviour because they may have learning difficulties, a lack of education or information and because they may have reduced exposure to the norm of adult/child interaction. For example, a disabled child may have difficulty in differentiating between appropriate and inappropriate touching.

Children with disabilities may have little opportunity for involvement with adults or other children outside their home or care setting. Consequently, they have reduced opportunity to disclose any abuse.

Children with disabilities may be unable to convey their experiences to others, or adults may be unable to communicate with them.

Children with disabilities often have low self-esteem and consequently may lack the confidence to disclose abuse.

Parents/carers/guardians and family members of children with a disability often experience considerable stress both in coming to terms with the disability and in managing the ongoing care of the child.

There is still societal and professional reluctance to accept that disabled children could be abused.

The often specialist nature of services for children with a disability separates them from the mainstream services for children and families. This can lead to insufficient knowledge of child protection issues within the specialist disability services and insufficient knowledge about disability in the child protection services.

Appendix 6

Action to be taken if you suspect child abuse by a member of staff/volunteer or committee member.

Contact the Gateway Team:

Duty Social Worker Gateway Team (Health & Social Care Trust)

Phone:

028 9050 7000

In person:

Speak to a Duty Social Worker at

Gateway Services

110 Saintfield Road

BELFAST

BT8 6HD

Out of hours Emergency Service (after 5p.m. each evening, at weekends and public/bank holidays):

028 95049999

PSNI

PSNI The Central Referral Unit (CRU) based in Antrim Road PSNI Station is part of the Public Protection Unit and is the central referral point for child sexual and physical abuse allegations.

The office is open Monday to Friday 8 am to 9 pm and weekends and public holidays 9 am to 5 pm.

Telephone: 028 9025 9299



Child Protection

If you suspect that a child is being abused by a parent/carer/guardian or other adult, please report this immediately to :



Designated Officer

Gerardine Munroe

07786782083



Deputy Designated Officer

Caoimhe O'Connell

caoimheoconnell@gmail.com

or to one of the following committee members with responsibility for Child Protection



Designated Officer (for Naíscoil Committee)

Annelies Taylor

07798607625

Or you should contact the Gateway Services Child Protection Team By phone:

During office hours (9:00am - 5:00pm) - you should contact Gateway on 028 9050 7000

At all other times (all through the night, at weekends and over Bank Holidays) - you should contact the out-of-hours Emergency Service: 028 9504 9999

Other useful contacts:

NSPCC

0808 800 5000

PSNI CRU

028 9025 9299

Public Service

Ombudsman

0800 343424

Action to take if you suspect child abuse by a parent/carer/guardian or another person.

Parent/carer/guardian/staff trainee/volunteer
to inform



Designated Officer
Gerardine Munroe
07786782083

Deputy Designated Officer
Caoimhe O'Connell
caoimheoconnell@gmail.com



Gateway Team
028 9050 7000
Trust
028 9050 7000



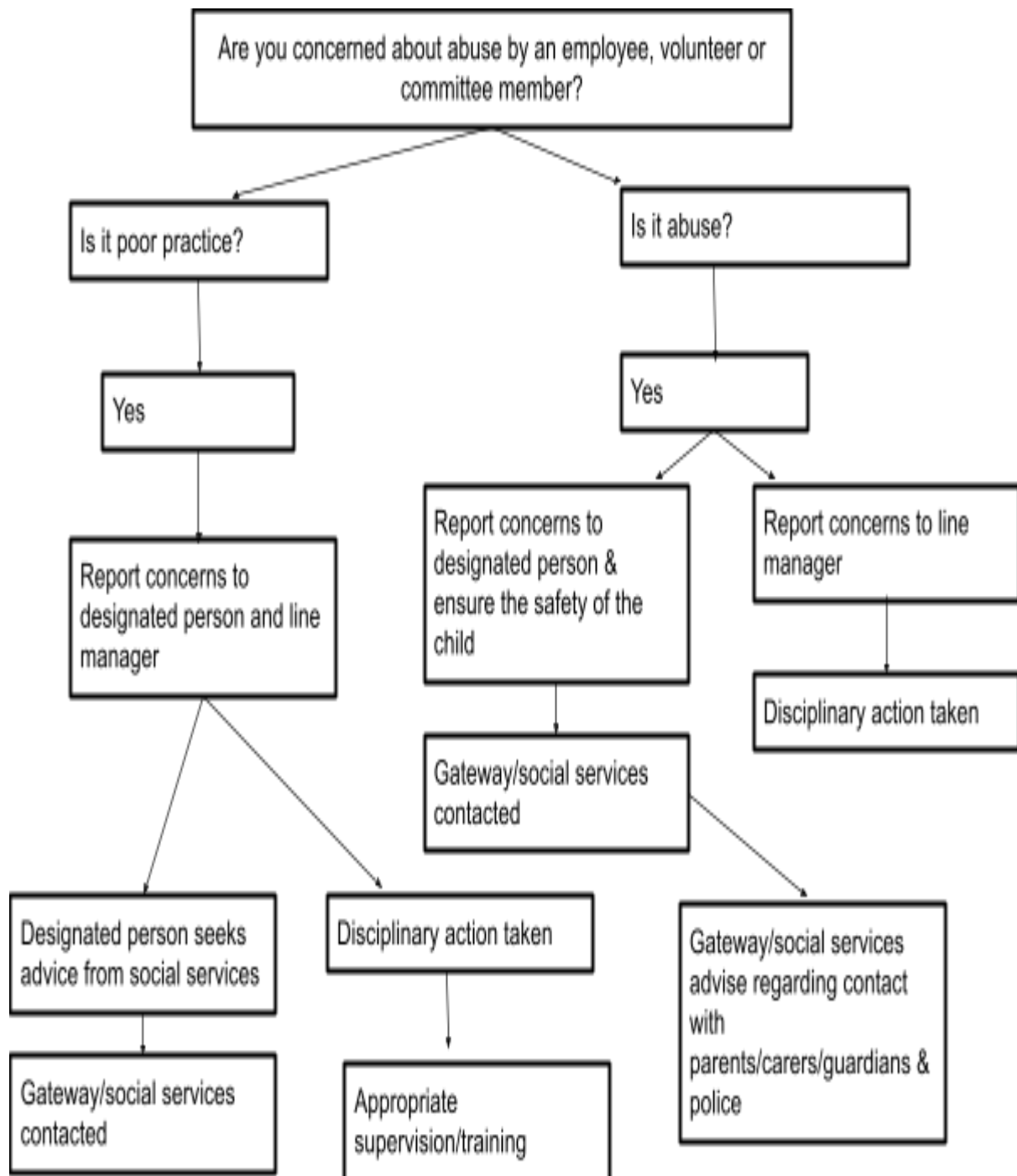
Inform committee no identifying information given

Additional advice may be sought from **NSPCC**
0808 800 5000

PSNI CRU
028 9025 9299

Public Service Ombudsman
0800 343424

Action to be taken if you suspect child abuse by a member of staff/volunteer or committee member.



Monitoring

This policy will be reviewed annually by the committee team to ensure it remains fit for purpose.

This policy was adopted by Naíscoil na Seolta committee team.

This policy links with the following:

Child Protection Policy

Medicine Policy

Staff Training Policy

CCTV

Complaints

Confidentiality

Intimate/Personal Care

Managing Aggression and Challenging Behaviour – including bullying

Management of Risks Associated with the Care of Individual Service Users

Parents' Access to Records

Reporting Adverse and Untoward Incidents

Security of the Setting

Social Networking

Staffing

Further information on Safeguarding can be found at the following link:

<https://www.health-ni.gov.uk/publications/co-operating-safeguard-children-and-young-people-north-ern-ireland>