



**Harmony Hill Primary School**  
**Child Protection & Safeguarding**  
**Policy**

2024-2025

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## **Safeguarding and Child Protection**

Safeguarding is more than child protection. Safeguarding begins with promotion and preventative activities which enable children and young people to grow up safely and securely in circumstances where their development and wellbeing is not adversely affected. It includes support to families and early intervention to meet the needs of children, and continues through to Child Protection. Child Protection refers specifically to the activity that is undertaken to protect individual children or young people who are suffering, or are likely to suffer significant harm.

All staff in our school, both teaching and non-teaching, have a responsibility to ensure the protection and welfare of children is paramount. This also extends to any volunteers accepted to work in the school.

Through preventative and responsive curriculum, embracing many planned and incidental opportunities for the teaching of personal, social and health education and citizenship, we aim to develop appropriate attitudes in our children and make them aware of the impact of their decisions on others. We help children to learn about the risks of possible abuse by helping them to recognise appropriate behaviour in others and acquire the confidence and skills they need to keep themselves safe. The staff have adopted a Code of Conduct which is attached to this Policy.

## **TERMS OF REFERENCE**

Members of Staff -	All teachers; full and part time, temporary or permanent.
	classroom assistants
	secretarial, ancillary and auxiliary staff
D.T. -	Designated teacher for Child Protection
D.D.T. -	Deputy Designated Teacher for Child Protection
B.O.G. -	Board of Governors

## **The School's Responsibility**

The staff in Harmony Hill Primary School seek to reinforce the ethos and general aims of the school. They recognise the importance of values and caring attitudes. They aim to nurture an atmosphere in which all pupils are confident that they are cared for, valued and respected. It endeavours to ensure they receive the guidance and support necessary to reach their full potential.

All members of staff have a responsibility for the day-to-day care of pupils. If a pupil asks to speak to a member of staff in confidence, he/she should respond positively, but point out that it may be necessary to seek advice before an answer can be given.

If a member of staff, student on placement, or volunteer, becomes concerned about the welfare of a particular pupil, he/she should consult the designated teacher (D.T.) or if not available, the deputy designated teacher (D.D.T.). In the absence of Mr C. Hyndman or Mrs H. Johnston, contact Mr P. Henry (Vice-Principal) or Mrs T. McCauley, SENCo.

Members of staff should also appreciate that, while every effort will be made to keep them informed about pupils for whom they have direct responsibility, there may be occasions when it will not be possible to provide confidential information.

## **Preventative Curriculum**

Through planned activities, incidental learning, assemblies and targeted action on specific issues, school staff plan for age-appropriate lessons to develop understanding and insight within the preventative curriculum, for example, in relation to issues of anxiety, feelings, resilience, and friendship, amongst many others.

In addition, there is prompt responsive action to facilitate bespoke intervention should a specific issue suddenly arise.

The school has developed a 'Pastoral Pyramid', which gives possibilities of the layers of systems we can put in place to support children with more complex emotional needs. Some pupils require more defined pastoral intervention. The pyramid is reflective of the systems in place and gives structure to them. The baseline of the pyramid is the core foundation of strong school ethos and all our positive behaviour management and practice that is the bedrock of what we do. This encompasses all the curriculum and incidental work we do as a wider school community to support the building of life skills and resilience.

The preventative curriculum links to all other safeguarding policies (see pages 12-13)

## **The United Nations Convention on the Rights of the Child**

The United Kingdom agreed to be bound by the Convention in 1991 wherein it is stated (in Article 19) that children have;

*“The right to be protected from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation including sexual abuse by those looking after them.”*

Article 3 provides that;

*“When organisations make decisions which affect children, the best interests of the child must be a primary consideration.”*

In setting out these procedures for Harmony Hill Primary School in accordance with guidance from the DENI document Pastoral Care in Schools CHILD PROTECTION, we take the view that

**The overriding concern of every adult associated with Harmony Hill Primary School must be the safety and wellbeing of every child who is placed in the school’s care.**

## **1. RESPONSIBILITIES**

### **a) GOVERNORS**

Ultimate responsibility for ensuring that appropriate child protection measures and procedures are in place rests with the Board of Governors.

Mr S O’Neill was appointed Designated Child Protection Governor in October 2023 and all relevant training was completed immediately after appointment by Governors.

The Governors will oversee Child Protection procedures if a disclosure was made about a member of the school staff. The members of the Board of Governors are trained annually by the Designated or Deputy Designated Teacher or the Principal. The Board of Governors is informed of any ongoing Child Protection issues and the number of children on the Child Protection Register at each meeting.

### **b) PRINCIPAL**

In the event of an allegation, suspicion or instance of child abuse, the Principal, Mrs Hilary Johnston, will:

- Consider the report received from the Designated Teacher.
- Ensure that appropriate procedures are implemented, including the immediate safeguarding of a child considered at risk.

- Decide on the needs for a referral, either informal or formal, to Social Services, to the Education Authority Designated Officer and to other agencies as appropriate.
- Inform parents as and **when appropriate**.
- The Principal will also have responsibility for:
  - Initiating vetting procedures for new staff, volunteer helpers etc.
  - Responding to issues under the School's Complaints Procedure.

### **c) DESIGNATED TEACHER/DEPUTY DESIGNATED TEACHER**

- The Designated Teacher for Child Protection is Mr Conor Hyndman
  - The Deputy Designated Teacher is Mrs Hilary Johnston
  - They can be contacted via [info@harmonyhillps.lisburn.ni.sch.uk](mailto:info@harmonyhillps.lisburn.ni.sch.uk) or on 02892664501
- The Designated Teacher and Deputy Designated Teacher are responsible for:
  - Receiving concerns and reports from staff on possible or actual instances of child abuse.
  - Collating details of such reports or concerns.
  - Reviewing Child Protection Policy and Procedures annually.
  - Disseminating information.
  - Liaising with outside agencies.
- Reports of child protection concerns will be kept by the D.T. Information recorded will include dates, events and action taken and only the Principal, D.T. and D.D.T. will have access to this in school, however, this information will be made available to Social Services if appropriate. The Designated Teacher will also be responsible for maintaining the hard-backed book detailing any issues relating to members of staff. This will be signed off annually by the Chairman of the Board of Governors, even if there are no such issues during the school year.
- Teachers may themselves be in need of support, having discovered signs of abuse, and the D.T. should be aware of this and, in discussion with the Principal, ensure appropriate support is given.

### **d) TEACHING/NON-TEACHING STAFF**

The teacher, or another adult in the school, is probably the first professional person a child in need may choose to speak to. The adult must act with tact and sympathy, without appearing to pry, and without examining the child in any way. The adult must not make any promises of confidentiality to the child, or appear to "take sides".

The teacher must make notes, even roughly, immediately after the chat, and these should be made available to the D.T. (*See "Procedures to follow when there is suspicion of child abuse."*)

It may be necessary to inform outside agencies of the abuse allegations, and the teacher must be prepared for a formal interview.

All staff have a duty to:

- Be alert for signs of actual or suspected abuse or neglect.

- Report concerns to Designated Teacher (or Deputy).
- Keep a brief written record of details.
- Ensure their professional conduct is prudent and leaves no grounds for misinterpretation in relation to child protection.

#### **4. RECOGNISING SIGNS OF ABUSE**

Staff in schools are well placed to observe changes in pupils' behaviours e.g. changes in appearance, behaviour, demeanour which **may** be due to some form of abuse.

*[Appendix 1: Details on categories of abuse and related indicators.]*

It is important to remember that any such indicators may be due to other reasons e.g. medical, etc. All concerns regarding the possibility of abuse should never go unreported. It is imperative that any concerns should be discussed with a member of the school Safeguarding Team.

### **ALL CONCERNS AND REPORTS MUST BE REPORTED.**

**In the absence of Mr C. Hyndman or Mrs H. Johnston, contact Mr P. Henry (Vice-Principal) or Mrs T. McCauley, SENCo.**

#### **5. RESPONDING TO A CONCERN OR REPORT**

A member of staff, in talking to a child who has disclosed information or who is a victim of abuse, should adhere to the following guidelines:

1. Staff will listen and accept information calmly. Avoid over-reaction or a response which may compound a child's feeling of guilt.
2. Staff will not give a guarantee that they will keep what is said confidential or secret. If they are told about abuse or neglect, they have a responsibility to report. The best that can be promised is that they will only tell those who have an absolute right to know.
3. Staff will respond positively to the disclosure i.e. avoid attributing blame or criticising anyone. Staff will check their understanding of what has happened.
4. Staff will not interrogate. They will only ask questions for purposes of clarification. They will avoid leading questions which may give their ideas of what might have happened.
5. Staff will not attempt an investigation by interviewing at any length. This is the responsibility of Social Services and Police.
6. Staff will write brief notes, if feasible, and retain. (Original notes written at the time are more important than an improved version written later.) They will use the vocabulary used by the child. They will record any mention of date, time, place, persons etc as well as any signs of injury. (Initial Concern Form; GREEN available from Mr Hyndman)
7. Staff will inform the Designated Teacher/Deputy Designated Teacher as soon as possible. Discuss with him/her whether immediate steps need to be taken urgently to protect the person who disclosed the information, or any others at risk.



## **Operation Encompass**

We are an Operation Encompass school. Operation Encompass is an early intervention partnership between local Police and our school, aimed at supporting children who are victims of domestic violence and abuse. As a school, we recognise that children's exposure to domestic violence is a traumatic event for them.

Children experiencing domestic abuse are negatively impacted by this exposure. Domestic abuse has been identified as an Adverse Childhood Experience and can lead to emotional, physical and psychological harm. Operation Encompass aims to mitigate this harm by enabling the provision of immediate support. This rapid provision of support within the school environment means children are better safeguarded against the short, medium and long-term effects of domestic abuse.

As an Operation Encompass school, when the police have attended a domestic incident and one of our pupils is present, they will make contact with the school at the start of the next working day to share this information with a member of the school safeguarding team. This will allow the school safeguarding team to provide immediate emotional support to this child as well as giving the designated teacher greater insight into any wider safeguarding concerns.

This information will be treated in strict confidence, like any other category of child protection information. It will be processed as per DE Circular 2020/07 'Child Protection Record Keeping in Schools' and a note will be made in the child's child protection file. The information received on an Operation Encompass call from the Police will only be shared outside of the safeguarding team on a proportionate and need to know basis. All members of the safeguarding team will complete online Operation Encompass training, so they are able to take these calls. Any staff responsible for answering the phone at school will be made aware of Operation Encompass and the need to pass these calls on with urgency to a member of the Safeguarding team.

Further information see The Domestic Abuse Information Sharing with Schools etc. Regulations (Northern Ireland) 2022.

## 6. PROCEDURES

**Figure 1** [APPENDIX 5] summarises the procedure to be followed when the school has concerns or has received a report about possible abuse or neglect **by anyone other than a member of the school's staff. The member of staff must act promptly.**

**Figure 2** [APPENDIX 6] summarises the procedure to be followed when a complaint is made about possible abuse or neglect **by a member of the school staff. Again prompt action is required.**

**Figure 3** [APPENDIX 7] summarises the procedure to be followed when a parent/carer has a concern about a child's safety within the school.

Detailed copies of procedures will be held by Principal and Designated Teacher.

Parents wishing to register their concern about their child's welfare in school should take one of the following courses of action. The course chosen will depend upon the nature of the complaint.

### **A parent may .....**

- Speak/write to child's teacher.
- Speak/write to Principal.
- Write to the Chairman of Board of Governors.

All concerns will be followed up and, where appropriate, will be investigated under the School's Complaints Procedure.

**PROCEDURE to be followed in the event of;**

**A concern, suspicion or report of abuse or neglect by a member of the school staff:**

- I. Person making or receiving details of complaint should refer it directly to the Principal.
- II. Principal will seek clarification if needed.

Principal will:

- I. Ask Designated Teacher or Deputy to initiate the record of the complaint.
- II. Consult with EA (Education Authority) Designated Officer.
- III. Consult with Chairperson of the Board.
- IV. Principal will consider evidence and advice received.

In consultation with Chairperson of the Board, Principal will decide that the evidence is such that:

- I. The accusation is unsubstantiated and there is no case of answer.  
OR
- II. An immediate referral to Social Services or Police is required.  
OR
- III. Action should be taken under Disciplinary Procedures.

**PROCEDURE to be followed in the event of;**

**A concern/suspicion or report of abuse or neglect by someone other than a member of staff:**

1. Person receiving complaint or report should follow recommended guidelines when listening and talking to a child disclosing information.
2. Report details to Designated Teacher (or Deputy) as soon as possible.
3. Consider need for immediate safeguarding of child at risk.
4. Ensure record of details is kept.
5. Designated Teacher informs Principal.
6. Principal and Designated Teacher decide if additional information is required.
7. If so, discreetly consult with class teacher, informally advise Social Services and contact the Education Authority Designated Officer. Parents should be consulted as soon as possible (unless parent is implicated in the abuse).
8. Principal decides.
  - a. **EITHER - a referral is necessary**
    - i. Inform Social Services or Police.
    - ii. Inform Education Authority Designated Officer through consultation with Child Protection Support Services (CPSS).
    - iii. Inform parents/guardians (*unless they are the alleged perpetrator*).
  - b. **OR - no referral is necessary**
    - i. Inform person making complaint or providing information.
    - ii. Inform parents or guardians (unless implicated).
    - iii. Record details, including reasons for no referral in Child Protection files.
9. Ensure that detailed record is retained (until after the child's 21<sup>st</sup> birthday).

## 7. VETTING

Safeguarding Vulnerable Groups (NI) Order 2007 is operated by the Independent Safeguarding Authority. The scheme applies to all employers and employees (including volunteers) working in specified positions with children and vulnerable adults. Application forms and guidance on completing the Access NI packs are available from Conor Hyndman.

Pre-employment vetting checks will be carried out as part of the recruitment process for those staff being offered a post in school. Enhanced Disclosure Certificates (EDCs) issued by Access NI are valid for each recruitment process that an individual undertakes. The information contained in EDCs is only accurate on the date of issue and, therefore, is not valid for subsequent recruitment processes. From April 2011, DE does not fund the cost of vetting checks for paid employees working in/for schools. Paid employees are expected to pay the charge for the EDC.

Harmony Hill Primary School only employs permanent and temporary staff who are registered with the General Teaching Council or who are on the Northern Ireland Substitute Register (NISTR) in accordance with Circular Number 2006/7.

Teachers employed through NISTR are normally vetted every two years as part of their registration. It is Harmony Hill Primary School policy to only engage the services of substitute teachers who are registered with NISTR and, therefore, appropriately vetted.

In the case of an emergency, where temporary arrangements have to be quickly put in place before an advance vetting check is fully secured, the Principal will carry out a risk assessment and appropriate steps will be taken to ensure the safeguarding of the children and young people.

Where the school enters into a private arrangement with coaches and tutors for music, drama and sport, the guidance for volunteers in DE Circular 2012/19 will apply. All tutors and coaches working regularly in the school in an unsupervised capacity are vetted. The Designated and Deputy Designated teachers retain a record of all such staff.

Visitors to the school will be expected to sign in on arrival and sign out when leaving. They will be expected to wear an official visitor badge and will be supervised at all times when around children.

Visitors, such as parents attending meetings or persons delivering goods or carrying out maintenance tasks, do not routinely need to be vetted before being allowed onto school premises. However, school staff should manage such visitors; their access to areas and movement within school should be restricted as needs require. Every effort should be made to ensure they are:

- Met/directed by school staff/representatives.
- Signed in and out of the school by school staff.

- If appropriate, be given restricted access to only specific areas of the school.
- Where possible, be escorted round the school premises by a member of staff.
- If left unattended, they should be clearly identified with visitor/contractor passes; their access to pupils will be restricted to the purpose of their work.
- If delivering goods or carrying out building, maintenance or repair tasks, their work should be cordoned off from pupils for health and safety reasons.

In compliance with AccessNI's Code of Practice, EDCs will not be kept longer than is required for the purpose they were sought.

In accordance with DE recommendations, Harmony Hill Primary School will keep a note of:

- The date an EDC application is sent for processing
- The date the EDC is received from AccessNI
- The EDC reference number

In the event of the school being asked for evidence that a member of staff has been appropriately vetted, the school will use the record of the date and the EDC reference number to confirm when a vetting check was obtained.

## **8. SOCIAL NETWORKING**

All staff and volunteers are in a position of trust and should exercise caution when using social networking sites and avoid inappropriate communication of any kind. They are expected to always maintain appropriate professional boundaries. They should avoid improper contact or relationships which might include:

- Communication of a personal nature
- Inappropriate dialogue through the internet
- The sending of emails or text messages of an inappropriate nature.

Our Child Protection Policy is reviewed annually by the Safeguarding Team and reviewed and ratified by the Board of Governors prior to staff dissemination. The policy may be amended upon receipt of DE circulars and guidance from Education Authority.

### **Links with other policies;**

- The school has a duty to ensure that safeguarding permeates all activities and functions. The Child Protection Policy, therefore, complements and supports a range of policies including:
  - Pastoral Care Policy
  - Code of Conduct Policy
  - Work Experience and Placement Policy
  - Anti-Bullying Policy

- Positive Behaviour Policy
- Attendance Policy
- Newcomer Policy
- Complaints Policy
- Reporting Malpractice in the Workplace Policy
- E-Safety Policy
- Twitter Policy
- Use of Digital Devices Policy
- Intimate Care Policy
- Educational Visits Policy
- Relationships and Sexuality Education Policy
- First Aid Policy
- Administration of Medicines Policy
- Drugs Awareness Policy
- Health and Safety Policy
- Personal Emergency Evacuation Policy
- Critical Incidents Policy
- Staff Code of Conduct

## PROTECTING CHILDREN – *a duty to care*

### ABUSE CATEGORIES & INDICATORS

Child abuse means ill treatment or neglect leading to physical, sexual or emotional injury or harm. The following illustrations outline common indicators of abuse and neglect. These signs are not a checklist; indeed many of them could have other explanations.

<p><b>Physical Abuse</b></p> <p>If a child is being deliberately hurt causing them physical harm, such as cuts, bruises, broken bones or other injuries.</p>	
<p><b>Physical Indicators:</b></p> <ul style="list-style-type: none"> <li>• Unexplained bruises or burns particularly if they are recurrent</li> <li>• Human bite marks, welts or bald spots</li> <li>• Unexplained lacerations, fractures or abrasions</li> <li>• Untreated injuries</li> <li>• Bruising on cheeks, ears, palms, arms, back, buttocks, tummy, hips and backs of legs.</li> <li>• A history of bruising</li> <li>• Multiple bruising in clusters, usually on the upper arms or outer thighs.</li> <li>• Bruises that look like they have been caused by fingers, a hand, or an object.</li> <li>• Burns or scalds</li> <li>• Burns which have a clear shape, like a cigarette burn.</li> <li>• Large oval shaped bite marks</li> <li>• Fractures</li> <li>• Scarring</li> <li>• Poisoning</li> <li>• Drowning or suffocating</li> <li>• Head injuries caused by a blow or by shaking</li> <li>• Fabricated or induced illness</li> <li>• FGM<sup>1</sup></li> </ul>	<p><b>Mental Health or Behavioural Indicators:</b></p> <ul style="list-style-type: none"> <li>• Self-destructive tendencies (including self-harm)</li> <li>• Improbable excuses given to explain injuries</li> <li>• Chronic runaway</li> <li>• Aggressive or withdrawn</li> <li>• Fear of returning home</li> <li>• Reluctant to have physical contact</li> <li>• Clothing inappropriate to weather – worn to hide part of the body</li> <li>• Depression</li> <li>• Anxiety</li> <li>• Problems with relationships and socialising</li> <li>• Trying to hide injuries under clothing</li> <li>• Suicide<sup>2</sup></li> </ul>

<sup>1</sup> See Appendix 1

<sup>2</sup> See Appendix 2



**Neglect**

The persistent failure to meet a child's basic physical and/or psychological needs resulting in serious impairment of health and/or development.

**Physical Indicators:**

- Constant hunger
- Poor state of clothing and/or personal hygiene
- Untreated medical problems
- Emaciation/distended stomach
- Constant tiredness
- Inappropriate dress for the weather
- Dirty or unbathed
- Inadequately supervised or left alone for unacceptable periods of time
- Malnourished
- Lack of hygiene

**Mental Health or Behavioural Indicators:**

- Tiredness, listlessness
- Lack of social relationships
- Lack of attachment to other adults
- Compulsive stealing, begging or scavenging
- Frequently absent or late
- Low self-esteem
- Poor attendance/poor school performance
- Poor social skills
- Demanding of affection and attention
- Little understanding of basic hygiene.

## **Emotional Abuse**

Emotional Abuse is severe and persistent ill treatment of a child. It can have long-lasting and devastating effects on a child's emotional health and development. It can be an element of other child abuse and neglect.

### **Physical Indicators:**

- Sudden speech disorder
- Signs of mutilation
- Signs of solvent abuse (eg mouth sores, smell of glue, drowsiness)
- Wetting and/or soiling
- Attention seeking behaviour
- Poor peer relationships
- Tense meal times – affect a child's eating.

### **Mental Health or Behavioural Indicators:**

- Neurotic behaviour (eg rocking, hair twisting, thumb sucking)
- Reluctance for parent liaison
- Fear of new situations
- Chronic runaway
- Inappropriate emotional responses to painful situations
- Tense meal times
- Eating disorders
- Difficulty expressing a full range of emotions appropriately and difficulty controlling their emotions.
- Difficulties with school attainment
- Problems with relationships and socialising
- Anti-social behaviour/criminality
- Self-isolating behaviour
- Negative impulse behaviour

## Sexual Abuse

Involves forcing or persuading a child to take part in sexual activities or encouraging a child to behave in a sexually inappropriate way. It can be very difficult to identify.<sup>3</sup>

### Physical Indicators:

- 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
- Vulnerable diseases
- Unexplained pregnancies

### Mental Health or Behavioural Indicators:

- Be chronically depressed/suicidal
- Inappropriately seductive or precocious
- Sexually explicit language
- Low self-esteem, self devaluation, lack of confidence
- Recurring nightmares/fear of the dark
- Outburst of anger/hysteria
- Overly protective to siblings
- Aggressive behaviour
- Sleep problems
- Bed wetting/soiling
- Risk taking behaviour
- Negative thoughts
- Problems with school or missing school
- Fear of adults and reluctance to socialise with adults
- Becoming sexually active at a young age
- Use of sexual language/information (beyond age appropriate knowledge)

**NB: If in doubt, speak to someone NOW.**

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<sup>3</sup> Appendix 3

## **APPENDIX 1**

### **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.

*Multi-agency Practice Guidelines: Female Genital Mutilation. DFP 2014*

#### *FGM Issues*

- It is illegal in the UK to subject a girl or a woman to FGM or to assist a non-UK person to carry out FGM overseas
- FGM is prevalent in 28 African countries as well as in parts of the Middle East and Asia
- It has been estimated that over 20 000 girls under the age of 15 are at high risk of FGM in the UK each year and that 66 000 women in the UK are living with the consequences of FGM (majority of cases of FGM are thought to take place between the ages of 5 and 8 – therefore girls of this age at higher risk)
- FGM constitutes a form of child abuse and violence against women and girls, and has severe short-term and long-term physical and psychological consequences

*DFP NI published Multi-Agency Guidelines July 2014*

#### **Indicators that FGM is Imminent**

- Being a girl aged 5 - 8 within a community where FGM is practised
- Prolonged return to country of origin for summer break – giving sufficient healing time before return to school
- Female elder visiting from a country of origin
- Child may tell other children about it
- A girl may disclose that she is to have a 'special procedure' or attend a special occasion to 'become a woman'
- Parents state that they or a relative will take the child out of the country for a prolonged period.

## **APPENDIX 2**

### **Self-Harm and Suicide**

“It is most helpful to consider self-harm as a continuum, ranging from behaviour which has a strong suicidal intent (for example, some kinds of overdose) to behaviour which is non-life threatening (such as cutting, banging, scratching and deliberately damaging parts of the body)”

*Paraphrase from John Coleman 2004*

### **Why Do Young People Self Harm?**

- To release tension caused by anxiety, grief or anger.
- As a means of communication, to tell themselves and others that they need help.
- To feel as though they have control over something in their lives.
- To make ‘real’ emotional pain they are unable to express.

## APPENDIX 3

### 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.' (SBNI 2014, adopted from CSE Knowledge Transfer Partnership NI)

The key factor that distinguishes cases of CSE from other forms of child sexual abuse is the concept of exchange – the fact that someone coerces or manipulates a child into engaging in sexual activity in return for something they need or desire and/or for the gain of those perpetrating or facilitating the abuse. The something received by the child or young person can include both tangible items and/or more intangible 'rewards' OR 'benefits' such as perceived affection, protection or a sense of value or belonging.

Any child under the age of eighteen, male or female, can be a victim of CSE, including those who can legally consent to have sex. The abuse most frequently impacts upon those of a post-primary age and can be perpetrated by adults or peers, on an individual or group basis.

The potential indicators of CSE can include, but are not limited to:

- Acquisition of money, clothes, mobile phone etc. without plausible explanation.
- Leaving home/care without permission.
- Persistently going missing or returning late.
- Receiving lots of texts/phone calls prior to leaving.
- Agitated/stressed prior to leaving home/care.
- Returning distraught/dishevelled or under the influence of substances.
- Truancy from school.
- Inappropriate sexualised behaviour for age.
- Physical symptoms or infections e.g. bruising, bite marks, infections
- Concerning use of the internet.
- Entering or leaving cars driven by unknown adults or by taxis.
- New Peer groups.
- Significantly older 'boyfriend' or 'girlfriend'.
- Increasing secrecy around behaviours
- Low self-esteem.
- Change in personal hygiene (greater attention or less).
- Self-harm and other expressions of despair.
- Evidence or suspicion of substance abuse.

Whilst these indicators can be usefully used to identify potential risk, it is important to note that their presence does not necessarily mean that CSE is occurring. More importantly, nor does their absence mean that it is not.

## APPENDIX 4

### Domestic Abuse

Domestic Violence and Abuse is:

*'Threatening, controlling, coercive behaviour, violence or abuse (psychological, physical, verbal, sexual, financial or emotional) inflicted on anyone (irrespective of age, ethnicity, religion, gender or sexual orientation) by a current or former intimate partner or family member'*

(Stopping Domestic and Sexual Violence and Abuse in Northern Ireland: A Seven Year Strategy: March 2016).

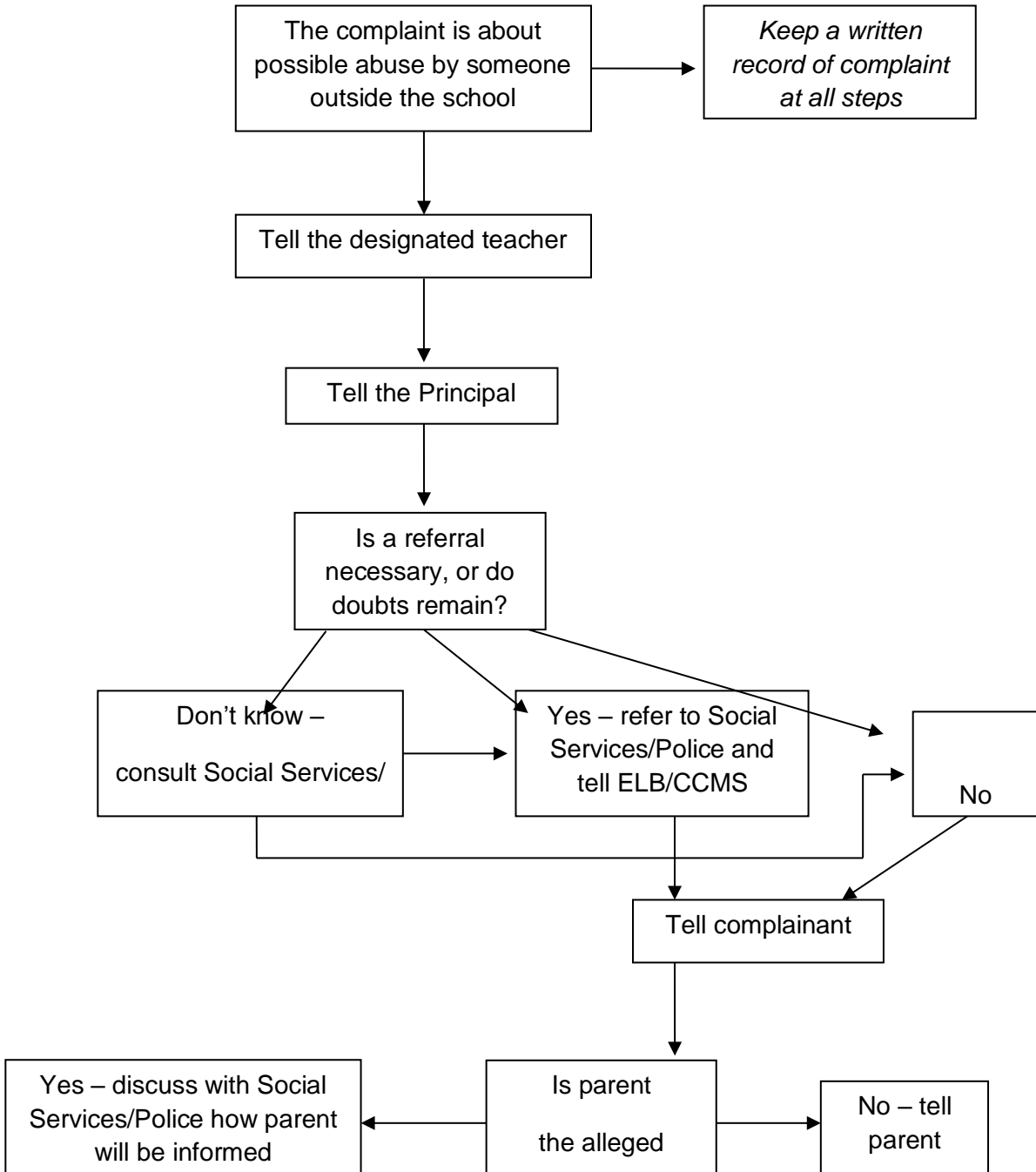
Signs that a child has witnessed domestic abuse (as set out by the NSPCC) can include:

- aggression or bullying
- anti-social behaviour, like vandalism
- anxiety, depression or suicidal thoughts
- attention seeking
- bed-wetting, nightmares or insomnia
- constant or regular sickness, like colds, headaches and mouth ulcers
- drug or alcohol use
- eating disorders
- problems in school or trouble learning
- tantrums
- withdrawal

Whilst these indicators can be usefully used to identify potential risk, it is important to note that their presence does not necessarily mean that domestic abuse is occurring. More importantly, nor does their absence mean that it is not.

**Figure 1 (APPENDIX 5)**

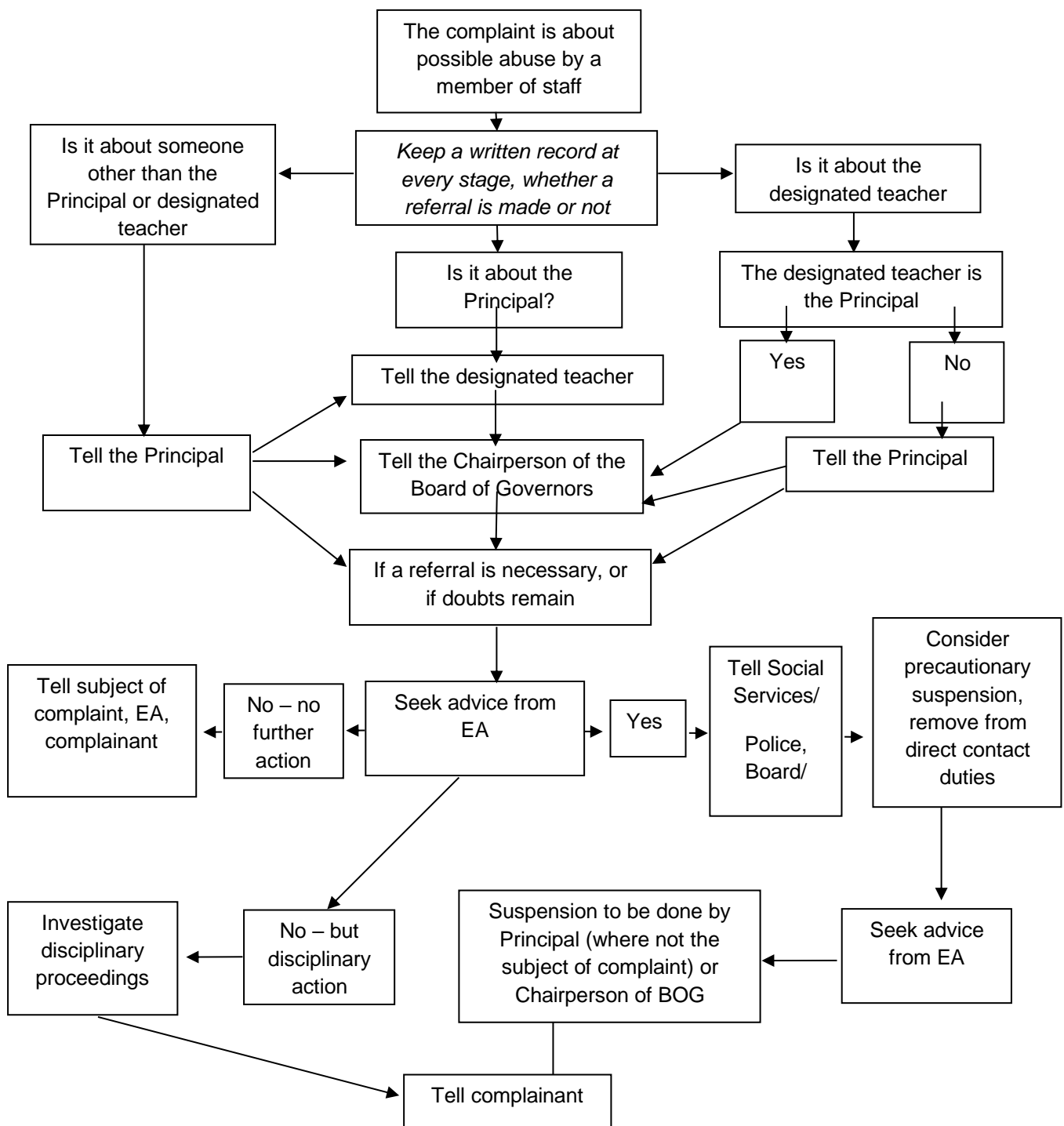
**Procedure where the school has concerns, or has been given information, about possible abuse by someone other than a member of the school's staff**





**Figure 2 (APPENDIX 6)**

**Procedure where a complaint has been made about possible abuse by a member of the school's staff**

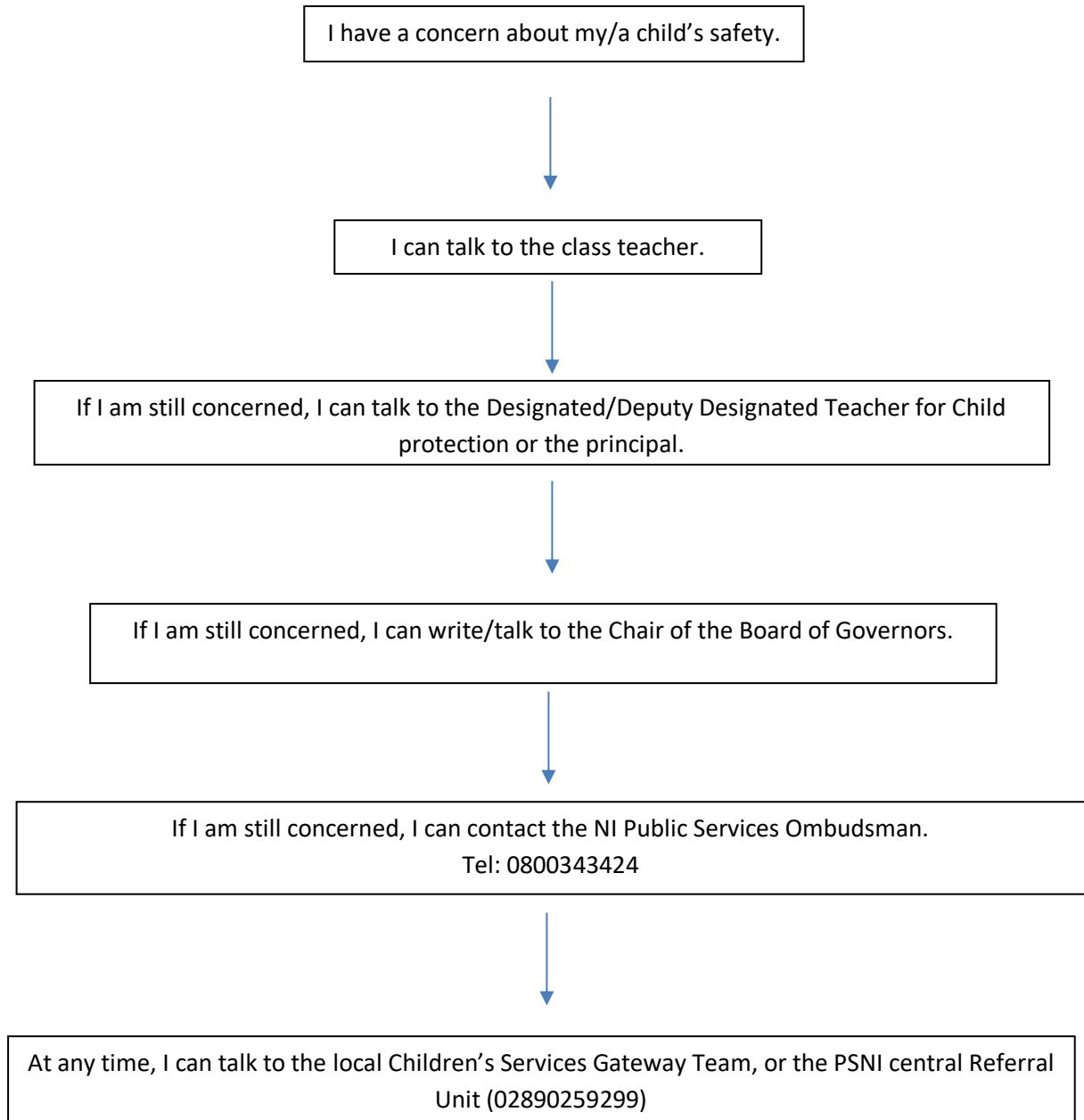


**Advice from EA regarding making a further complaint to the NIPSO:**

If you are not happy with the final response of the Education Authority, you can contact the Office of the Northern Ireland Public Services Ombudsman. In most cases, the Ombudsman will only investigate a complaint after all the organisations internal processes have been exhausted. Please note that the Ombudsman's time limit for review of complaints is **six months** from the date of EA's final response.

### Figure 3 (APPENDIX 7)

Procedure where a parent has a potential concern within the school:



If a parent has a concern about a child's safety, or suspect child abuse within the local community, it should be brought directly to the attention of the Children's Services Gateway Team.

## APPENDIX 8

### Online Safety

#### Online safety

Online safety means acting and staying safe when engaging in the online world. 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.

The overall strategic direction for child safety online is the [Keeping Children and Young People Safe: An Online Safety Strategy](#), published in February 2021. It sets out the Northern Ireland Executive's ambition that all children and young people enjoy the educational, social and economic benefits of the online world, and that they are empowered to do this safely, knowledgably and without fear.

The Strategy recognises that the ever-changing and fast-growing online environment presents both extensive educational benefits as well challenges in terms of keeping children and young people safe from the dangers of inappropriate communication and content.

For further information see: [Online Safety Hub - Safeguarding Board for Northern Ireland \(safeguardingni.org\)](https://safeguardingni.org)

We in Harmony Hill Primary School have a responsibility to ensure that there is a reduced risk of pupils accessing harmful and inappropriate digital content and will be energetic in teaching pupils how to act responsibly and keep themselves safe. As a result, pupils should have a clear understanding of online safety issues and, individually, be able to demonstrate what a positive digital footprint might look like.

The school's actions and governance of online safety are reflected clearly in our safeguarding arrangements. Safeguarding and promoting pupils' welfare around digital technology is the responsibility of everyone who comes into contact with the pupils in the school or on school-organised activities.

**Sexting** is the sending or posting of sexually suggestive images, including nude or semi-nude photographs, via mobile or over the internet. There are two aspects to Sexting:

#### 1. Sexting between individuals in a relationship

Children and young people consider this to be normal and often the result of a young person's natural curiosity about sex and their exploration of relationships. As a consequence, engaging in the taking or sharing of nudes and semi-nudes may not always be in a 'harmful' context. Nonetheless, staff must be aware that an image can be shared non-consensually, or a child can be groomed, tricked or coerced into sending nude and semi-nude images.

Pupils need to be aware that it is illegal, under the Sexual Offences (NI) Order 2008, to take, possess or share 'indecent images' of anyone under 18 even if they are the person in the picture (or even if they are aged 16+ and in a consensual relationship) and in these cases we will contact local police on 101 for advice and guidance. We may also seek advice from the EA Child Protection Support Service

Please be aware that, while offences may technically have been committed by the child/children involved, the matter will be dealt with sensitively and considering all of the circumstances and it is not necessarily the case that they will end up with a criminal record. It is important that particular care is taken in dealing with any such cases. Adopting scare tactics may discourage a young person from seeking help if they feel entrapped by the misuse of a sexual image.

## 2. Sharing an Inappropriate Image with an Intent to Cause Distress

If a pupil has been affected by inappropriate images or links on the internet it is important that it is **not forwarded to anyone else**. Schools are not required to investigate incidents. It is an offence under the Criminal Justice and Courts Act 2015 to share an inappropriate image of another person without the individual's consent. For further information see: [www.legislation.gov.uk/ukpga/2015/2/section/33/enacted](http://www.legislation.gov.uk/ukpga/2015/2/section/33/enacted)

If a young person has shared an inappropriate image of themselves that is now being shared further whether or not it is intended to cause distress, the child protection procedures of the school will be followed.

## **APPENDIX 9**

### **Children with Increased Vulnerabilities**

- **Children With a Disability**

Children and young people with disabilities (i.e. any child or young person who has a physical, sensory or learning impairment or a significant health condition) may be more vulnerable to abuse and those working with children with disabilities should be aware of any vulnerability factors associated with risk of harm, and any emerging child protection issues.

Staff must be aware that communication difficulties can be hidden or overlooked making disclosure particularly difficult. Staff and volunteers working with children with disabilities will receive training to enable them to identify and refer concerns early in order to allow preventative action to be taken.

- **Children With Limited Fluency in English**

Children whose first language is not English/Newcomer pupils should be given the opportunity to express themselves to a member of staff or other professional with appropriate language/communication skills, especially where there are concerns that abuse may have occurred. DTs and other relevant school staff should seek advice and support from the EA's Intercultural Education Service if necessary. All schools should create an atmosphere in which pupils with special educational needs which involve communication difficulties, or pupils for whom English is not their first language, feel confident to discuss these issues or other matters that may be worrying them.

- **Work Experience, School Trips and Educational Visits**

Our duty to safeguard and promote the welfare of children and young people also includes periods when they are in our care outside of the school setting. We will follow DE and EA guidance on educational visits, school trips and work experience to ensure our current safeguarding policies are adhered to and that appropriate staffing levels are in place.

**CONFIDENTIAL**

**NOTE OF CONCERN**

**Child Protection Record - Reports to Designated Teacher**

Name of Pupil:
Year Group:
Date, Time of Incident/Disclosure:
What happened?/What was reported?
Names of any other witnesses to incident/disclosure:
Action Taken At The Time: (e.g. disclosure received, recorded and reported to whom)

Written Report Passed To Designated Teacher:                      Yes:                      No:  If 'No' state reason:
Date And Time Of Report To The Designated Teacher:
<i>(This box for use by Designated Teacher)</i>  Recorded in Pupil's Child Protection File ?  Yes                      No  If 'No' state reason:

**Name of Staff Member Making the Report:** \_\_\_\_\_

**Signature of Staff Member:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of Designated Teacher:** \_\_\_\_\_ **Date:** \_\_\_\_\_