



Safeguarding and Child Protection Policy

Monitoring And Evaluation

The Safeguarding Team in Glenbrook Nursery School will update this Policy and procedures in the light of any further guidance and legislation as necessary and review it annually. The Board of Governors will also monitor child protection activity and the implementation of the child protection policy on a regular basis through the provision of reports from the Designated Teacher.

On-going evaluation will ensure the effectiveness of the Policy.

Date Policy Reviewed:

Signed:

_____ (Designated Teacher)

_____ (Principal)

_____ (Chair of Board of Governors)

1. Child Protection Ethos

We in Glenbrook Nursery School have a responsibility for the pastoral care, general welfare and safety of the children in our care and we will carry out this duty by providing a caring, supportive and safe environment, where each child is valued for his or her unique talents and abilities, and in which all our young people can learn and develop to their full potential. All staff, teaching and non-teaching should be alert to the signs of possible abuse and should know the procedures to be followed. This Policy sets out guidance on the action, which is required where abuse or neglect of a child is suspected and outlines referral procedures within our school

2. Principles

The general principles, which underpin our work, are those set out in the UN Convention on the Rights of the Child and are enshrined in the Children (Northern Ireland) Order 1995, the Department of Education (Northern Ireland) guidance "Pastoral Care in Schools- Child Protection"(DENI Circular 99/10) and Safeguarding and Child Protection in Schools (updated September 2024)

The following principles form the basis of our Child Protection Policy.

- It is the children's right to feel safe at all times, to be heard, listened to and taken seriously.
- We have a pastoral responsibility towards the children in our care and should take all reasonable steps to ensure their welfare is safeguarded and their safety is preserved.
- In any incident the children's welfare must be paramount, this overrides all other considerations.
- A proper balance must be struck between protecting children and respecting the rights and needs of parents and families; but where there is conflict the children's interest must always come first.

3. Other Relevant Policies

The school has a duty to ensure that safeguarding permeates all activities and functions. This policy therefore complements and supports a range of other school policies including:

- Positive Behaviour Policy
- Addressing Bullying in School
- Use of Reasonable Force/Safe Handling
- Special Educational Needs
- Educational Visits
- First Aid and the Administration of Medicines
- Health and Safety Policy
- Use of Mobile Phones/Cameras
- Intimate Care
- Staff code of conduct

These policies are available to parents and any parent requiring a copy should contact the School Principal.

4. School Safeguarding Team

The following are members of the schools Safeguarding Team

- Designated Teacher / Principal – Mrs Rhonda Cameron
- Deputy Designated Teacher – Miss Lisa Collins
- Designated Governor for Child Protection – Mrs Edna McCormick
- Chair of the Board of Governors – Mrs Edna McCormick

5. Roles And Responsibilities

5.1 The Designated Teacher and Deputy Designated Teacher

The designated teacher and deputy designated teacher must:

- Avail of training so that they are aware of duties, responsibilities and role
- Organise training for all staff (whole school training)
- Lead in the development of the school's Child Protection Policy
- Act as a point of contact for staff and parents
- Assist in the drafting and issuing of the summary of our Child Protection arrangements for parents
- Make referrals to Social Services Gateway team or PSNI Central Referral Unit where appropriate
- Liaise with the EA's Designated Officers for Child Protection
- Maintain records of all child protection concerns
 - Provide written annual report to the Board of Governors regarding child protection

5.2 The Principal

The Principal must ensure that:

- That a designated teacher and deputy are appointed
- That all staff receive child protection training
- That all necessary referrals are taken forward in the appropriate manner
- That the Chair of the Board of Governors (and, when appropriate, the Board of Governors) is kept informed
- That child protection activities feature on the agenda of the Board of Governors meetings and termly updates & annual report are provided
- That the school child protection policy is reviewed annually and that parents and pupils receive a copy of this policy every year.
- That confidentiality is paramount. Information should only be passed to the entire Board of Governors on a need to know basis.

5.3 The Designated Governor for Child Protection

The Designated Governor will provide the child protection lead in order to advise the Governors on:

- The role of the designated teachers
- The content of child protection policies
- The content of a code of conduct for adults within the school
- The content of the termly updates and full Annual Designated Teachers Report
- Recruitment, selection and vetting of staff

5.4 The Chair of the Board of Governors

The Chair of the Board of Governors must:

- Ensure that a safeguarding ethos is maintained within the school environment
- Ensure that the school has a Child Protection Policy in place and that staff implement the policy
- Ensure that Governors undertake appropriate child protection and recruitment & selection training provided by the EA Child Protection Support Service for Schools, the EA Governor Support and Human Resource departments.
- Ensure that a Designated Governor for Child Protection is appointed Assume lead responsibility for managing any complaint/allegation against the School Principal
- Ensure that the Board of Governors receive termly updates and a full written annual report in relation to child protection activity

5.5 Other Members of School Staff

Staff in school see children over long periods and can notice physical, behavioural and emotional indicators and hear allegations of abuse.

Remember the 5 Rs: Receive, Reassure, Respond, Record and Refer

The member of staff must:

- refer concerns to the Designated/Deputy Teacher for Child Protection;
- listen to what is being said without displaying shock or disbelief and support the child
- act promptly
- make a concise written record of a child's disclosure using the actual words of the child (**Appendix 1**)
- Avail of whole school training and relevant other training regarding safeguarding children
- **Not** give children a guarantee of total confidentiality regarding their disclosures
- **Not** investigate
- **Not** ask leading questions

In addition staff should:

- Keep the Designated Teacher informed about poor attendance and punctuality, poor presentation, changed or unusual behaviour, deterioration in educational progress, discussions with parents about concerns relating to their child, concerns about pupil abuse or serious bullying, concerns about home conditions including disclosures of domestic violence.

5.6 Parents

Parents should play their part in Child Protection by:

- Providing school with photographs of adults who will be collecting their child
- telephoning the school on the morning of their child's absence so as the school is reassured as to the child's situation;
- informing the school whenever anyone, other than themselves, intends to pick up the child after school;
- letting the school know in advance if their child is going home to an address other than their own home;
- familiarising themselves with the School's Pastoral Care, Addressing Bullying, Positive Behaviour, Internet and Child Protection Policies;

- reporting to the office when they visit the school other than at drop off and collection times
- raising concerns they have in relation to their child with the school.

5.7 The Board of Governors

Board of Governors must ensure that:

- the school has a Child Protection Policy in place and that staff implement the policy
- relevant Child Protection training is kept up-to-date by at least one governor and a record kept of the same
- confidentiality is paramount. Information should only be passed to an entire Board of Governors on a need-to-know basis.

6. What Is Child Abuse?

6.1 Definition of Abuse

Child abuse occurs when a child is neglected, harmed or not provided with proper care. Children may be abused in many settings, in a family, in an institutional or community setting, by those known to them or more rarely, by a stranger. There are different types of abuse and a child may suffer more than one of them. The procedures outlined in this document are intended to safeguard children who are at risk of significant harm because of abuse or neglect by a parent, carer or other with a duty of care towards a child.

6.2 Types of Abuse

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

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

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

Sexual Abuse involves forcing or enticing a child to take part in sexual activities. The activities may involve physical contact, including penetrative or non-penetrative acts. They may include non-contact activities, such as involving children in looking at, or in

the production of, pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

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.

Domestic abuse is the 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. *(psni police.uk safety)*

** All the above definitions are from Co-operating to Safeguard Children and Young People in Northern Ireland (2017) Co-operating to Safeguard Children and Young People in Northern Ireland*

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.

6.3 Signs and symptoms of abuse ~ Possible Indicators

Physical Abuse

Physical Indicators	Behavioural Indicators
Unexplained bruises – in various stages of healing – grip marks on arms; slap marks; human bite marks; welts; bald spots; unexplained/untreated burns; especially cigarette burns (glove like); unexplained fractures; lacerations; or abrasions; untreated injuries; bruising on both sides of the ear – symmetrical bruising should be treated with suspicion; injuries occurring in a time pattern e.g. every Monday	Self-destructive tendencies; aggressive to other children; behavioural extremes (withdrawn or aggressive); appears frightened or cowed in presence of adults; improbable excuses to explain injuries; chronic runaway; uncomfortable with physical contact; come to school early or stays last as if afraid to be at home; clothing inappropriate to weather – to hide part of body; violent themes in art work or stories

Emotional Abuse

Physical Indicators	Behavioural Indicators
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<p>Well below average in height and weight; “failing to thrive”; poor hair and skin; alopecia; swollen extremities i.e. icy cold and swollen hands and feet; recurrent diarrhoea, wetting and soiling; sudden speech disorders; signs of self-mutilation; signs of solvent abuse (e.g. mouth sores, smell of glue, drowsiness); extremes of physical, mental and emotional development (e.g. anorexia, vomiting, stooping).</p>	<p>Apathy and dejection; inappropriate emotional responses to painful situations; rocking/head banging; inability to play; indifference to separation from family indiscriminate attachment; reluctance for parental liaison; fear of new situation; chronic runaway; attention-seeking/needing behaviour; poor peer relationships.</p>
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Neglect

Physical Indicators	Behavioural Indicators
<p>Looks very thin, poorly and sad; constant hunger; lack of energy; untreated medical problems; special needs of child not being met; constant tiredness; inappropriate dress; poor hygiene; repeatedly unwashed; smelly; repeated accidents, especially burns.</p>	<p>Tired or listless (falls asleep in class); steals food; compulsive eating; begging from class friends; withdrawn; lacks concentration; misses school medicals; reports that no carer is at home; low self-esteem; persistent non-attendance at school; exposure to violence including unsuitable videos.</p>

Sexual Abuse

Physical Indicators	Behavioural Indicators
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<p>Bruises, scratches, bite marks or other injuries to breasts, buttocks, lower abdomen or thighs; bruises or bleeding in genital or anal areas; torn, stained or bloody underclothes; chronic ailments such as recurrent abdominal pains or headaches; difficulty in walking or sitting; frequent urinary infections; avoidance of lessons especially PE, games, showers; unexplained pregnancies where the identify of the father is vague; anorexia/gross over-eating.</p>	<p>What the child tells you; Withdrawn; chronic depression; excessive sexual precociousness; seductiveness; children having knowledge beyond their usual frame of reference e.g. young child who can describe details of adult sexuality; parent/child role reversal; over concerned for siblings; poor self-esteem; self-devaluation; lack of confidence; peer problems; lack of involvement; massive weight change; suicide attempts (especially adolescents); hysterical/angry outbursts; lack of emotional control; sudden school difficulties e.g. deterioration in school work or behaviour; inappropriate sex play; repeated attempts to run away from home; unusual or bizarre sexual themes in children's art work or stories; vulnerability to sexual and emotional exploitation; promiscuity; exposure to pornographic material.</p>
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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.

Specific Types of Abuse

FGM is a form of child abuse and, as such, teachers 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 newborn, 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.

Specific Types of Abuse

Where there is a concern that a child or young person may be at immediate risk of FGM this should be reported to the PSNI without delay. Contact can be made direct to the Sexual Referral Unit (based within the Public Protection Unit) at 028 9025 9299. Where there is a concern that a child or young person may be at risk of FGM, referral should be made to the relevant HSCT Gateway Team.

All staff should be aware of warning signs, appropriate response and signposting to further information and sources of help.

The EA CPSS can offer advice on all safeguarding and child protection issues. Contact details are included in the Contacts Section.

Further Information

Multi-Agency Practice Guidelines are available on the DFP website at: www.finance-ni.gov.uk/publications/multi-agency-practice-guidelines-female-genitalmutilation

Tackling FGM in the UK: Intercollegiate recommendations for identifying, recording and reporting

External links which may be helpful:

The NSPCC has a FGM helpline. The helpline is open 24/7 and can be called if you're worried a child is at risk of, or has had, FGM. The helpline is free and anonymous.

Phone: 0800 028 3550 Email: fgmhelp@nspcc.org.uk

ACSONI (African and Caribbean Support Northern Ireland) can also offer support and advice on FGM, including links with the local community.

Phone: 028 9043 4090 Email: info@acsoni.org

Forced Marriage

A Forced Marriage is a marriage conducted without the valid consent of one or both parties and where duress is a factor. Forced Marriage is a criminal offence in Northern Ireland, and where an agency, organisation or practitioner has knowledge or suspicion of a forced marriage in relation to a child or young person, they should contact the PSNI immediately.

Department of Health, Social Services and Public Safety publication 'Co-operating to Safeguard Children and Young People in Northern Ireland' (March 2016)

Specific Types of Abuse

There is a clear distinction between a forced marriage and an arranged marriage. In arranged marriages, the families of both spouses take a leading role in arranging the marriage but the choice whether or not to accept the arrangement remains with the prospective spouses. In forced marriages, one or both spouses do not (or, in the case of some adults with support needs, cannot) consent to the marriage and duress is involved. Duress can include physical, psychological, financial, sexual and emotional pressure.

7. Procedures for making complaints in relation to child abuse

7.1 How a Parent can make a Complaint

At Glenbrook Nursery School we aim to work closely with the parents/guardians in supporting all aspects of the child's development and well-being. Any concerns a parent may have will be taken seriously and dealt with in a professional manner. If a parent has a concern they can talk to the Designated or Deputy Designated teacher for child protection. If they are still concerned they may talk to the Chair of the Board of Governors. At any time a parent may talk to a social worker in the local Gateway team or to the PSNI Central Referral Unit. Details of who to contact are shown in the flowchart in **Appendix 2**.

7.2 Where the school has concerns or has been given information about possible abuse by someone other than a member of the school staff including volunteers

Where staff become aware of concerns or are approached by a child they should not investigate – this is a matter for Social Services – but should report these concerns immediately to the designated teacher and full notes should be made. These notes or records should be factual, objective and include what was seen, said, heard or reported. They should include details of the place and time and who was present and should be given to the designated teacher. The person who reports the incident must treat the matter in confidence.

The designated teacher will decide whether in the best interest of the child the matter needs to be referred to Social Services. If there are concerns that the child may be at risk, the school is obliged to make a referral. Unless there are concerns that a parent may be the possible abuser, the parent will be informed immediately. The designated teacher may consult with the EA's Designated Officer for Child Protection or Social Services Gateway Team before a referral is made. During consultation with the Designated Officer the child's details will be shared. No decision to refer a case to Social Services will be made without the fullest consideration and on appropriate advice. The safety of the child is our prime priority.

Where there are concerns about possible abuse and a referral needs to be made the designated teacher will telephone Social Services Gateway Team. He/she will also

notify the EA Designated Officer for Child Protection. A UNOCINI (Understanding the Needs of Children in Northern Ireland) referral form will also be completed and forwarded to the Gateway team with a copy sent to the EA Designated Officer for Child Protection.

If the Principal has concerns that a child may be at immediate risk from a volunteer, the services of the volunteer will be terminated immediately.

This procedure with names and contact numbers is shown in **Appendix 3**.

7.3 Where a complaint has been made about possible abuse by a member of the school's staff

If a complaint about possible child abuse is made against a member of staff, the Principal (or Designated teacher if he/she is not available) must be informed immediately. The above procedures will apply (unless the complaint is about the Principal/Designated teacher)

If a complaint is made against the Principal the Designated Teacher will inform the Chairperson of The Board of Governors who will ensure that necessary action is taken.

Where the matter is referred to Social Services the member of staff may be removed from duties involving direct contact with pupils (and may be suspended from duty as a precautionary measure pending investigation by the appropriate authorities). The Chairman of the Board of Governors will be informed immediately. Child protection procedures as outlined in Appendix will be followed in keeping with current Department of Education guidance.

This procedure with names and contact numbers is shown in **Appendix 4**.

The following are guidelines for use by staff should a child disclose concerns of a child protection nature.

Do:	Do not:
<ul style="list-style-type: none"> ❖ Listen to what the child says ❖ Assure the child they are not at fault ❖ Explain to the child that you cannot keep it a secret ❖ Document exactly what the child says using his/her exact words ❖ Remember not to promise the child confidentiality ❖ Stay calm ❖ Listen ❖ Accept ❖ Reassure ❖ Explain what you are going to do ❖ Record accurately ❖ Seek support for yourself 	<ul style="list-style-type: none"> ❖ Ask leading questions. ❖ Put words into the child's mouth. ❖ Ignore the child's behaviour. ❖ Remove any clothing. ❖ Panic ❖ Promise to keep secrets ❖ Ask leading questions ❖ Make the child repeat the story unnecessarily ❖ Delay ❖ Start to investigate ❖ Do Nothing

8. Attendance at Child Protection Case Conferences and Core Group Meetings

The Designated Teacher/Deputy Designated Teacher or Principal may be invited to attend an initial and review Child Protection Case Conferences and/or core group meetings convened by the Health & Social Care Trust. They will provide a written report which will be compiled following consultation with relevant staff. Feedback will be given to staff under the 'need to know' principle on a case-by-case basis. Children whose names are on the Child Protection register will be monitored and supported in accordance with the child protection plan.

9. Confidentiality And Information Sharing

Information given to members of staff about possible child abuse cannot be held "in confidence". In the interests of the child, staff have a responsibility to share relevant information about the protection of children with other professionals particularly the investigative agencies. Where abuse is suspected schools have a legal duty to refer

to the Statutory Agencies. In keeping with the principle of confidentiality, the sharing of information with school staff will be on a 'need to know' basis.

10. Record Keeping

All child protection records, information and confidential notes are kept in separate files in a locked safe. These records are kept separate from any other file that is held on the child or young person and are only accessible by the Designated Teacher and the Deputy Designated Teacher.

Should a child transfer to another school whilst there are current child protection concerns we will share these concerns with the Designated Teacher in the receiving school.

The principles of the requirements of legislation, in particular, the Children (Northern Ireland) Order 1995 and the Data Protection Act 2018 and guidance in DE Circular 2020/07 underpin our record keeping procedures.

11. Vetting Procedures

All staff paid or unpaid who are appointed to positions in the School are vetted in accordance with relevant legislation and Departmental guidance. An Access NI Enhanced disclosure certificate is required.

12. Code of Conduct for all Staff Paid Or Unpaid

All actions concerning children and young people must uphold the best interests of the young person as a primary consideration. Staff must always be mindful of the fact that they hold a position of trust, and that their behaviour towards the child and young people in their charge must be above reproach.

The school's code of conduct is available on request.

13. Staff Training

Glenbrook Nursery School is committed to in-service training for its entire staff. Each member of staff will receive general training on policy and procedures with some members of staff receiving more specialist training in line with their roles and responsibilities. All staff will receive basic child protection awareness training and annual refresher training. The Principal/Designated Teacher/Deputy Designated Teacher, Chair of the Board of Governors and Designated Governor for Child Protection will also attend relevant child protection training courses provided by the Child Protection Support service for Schools. When new staff or volunteers start at the school they are briefed on the school's Child Protection Policy and Code of Conduct and given copies of these policies.

14. The Preventative Curriculum

In the classroom, regular discussion/talking time sessions, as part of a small group, whole class or individual basis, are used as a means of encouraging children to raise social and emotional concerns in a safe environment and to build self-confidence, respect and sensitivity among classmates.

Throughout the school year child protection issues are addressed through class circle time and there is a permanent child protection notice board in the main corridor and relevant information in each resource area, which provides advice and displays child helpline numbers. A flow diagram of how a parent may make a complaint is also on display. An enlarged flow diagram for a teacher allegation is in staff room.

Other initiatives which address child protection and safety issues:

- Throughout the year we talk about the roles of community members are explored and investigated - Police Officers, Health Visitors, Midwives, Nurses, Doctors, Fire fighters etc.

Our pupils participate in activities that will promote their understanding of their own and other people's safety eg road safety, safety when playing and safety in the home.

15. 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 contact 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.](#)



CHILD PROTECTION

Contact names and numbers

NAME	DESIGNATION	TELEPHONE NUMBER
Rhonda Cameron	Designated teacher for Child Protection	School 02891 819629
Lisa Collins	Deputy designated Teacher for Child Protection	School 02891 819629
Edna McCormick	Chairperson Board of Governors	c/o School 02891 819629
Designated Officers for Child Protection		028 95 985590
South Eastern Health & Social Care Trust Gateway Service		0300 100 0300
Emergency Duty Service(Out of hours)		02890 565444
P.S.N.I		cru@psni.police.uk Tel: 101

Appendix 1



Child Protection Incident Report

Child's Name: _____ **DOB** _____ **Class** _____

Details of Incident/Disclosure*

Name of Person completing the report: _____

Designation: _____

Signature: _____

Date: _____

*** Record actual words used by the child/young person**

Appendix 2

How a Parent can raise a concern relating to child protection

I have a concern about my/a child's safety



I can talk to the class teacher



If I am still concerned, I can talk to the Designated Teacher for Child Protection, Mrs Rhonda Cameron

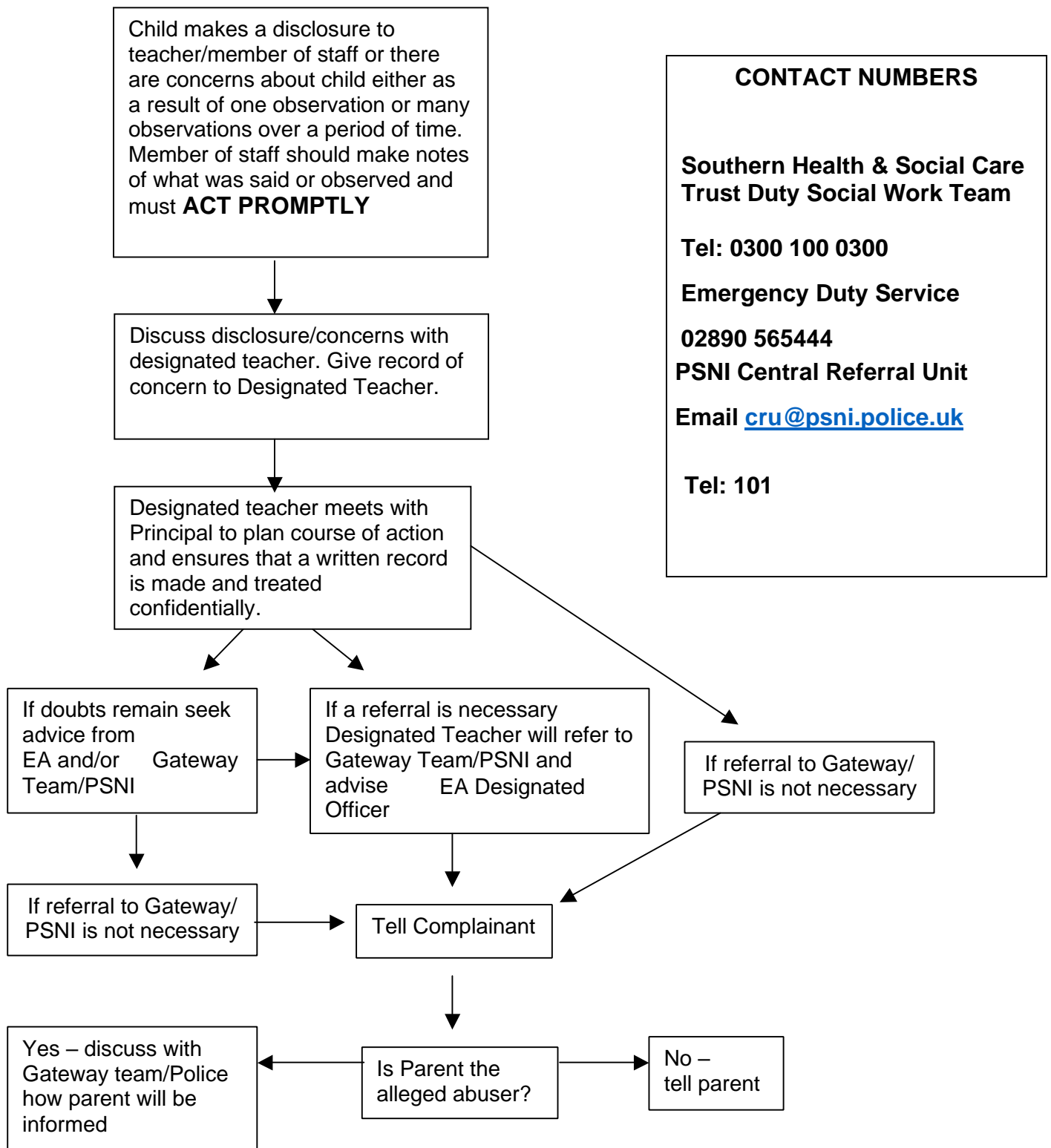
If I am still concerned, I can talk/write to the Chair of the Board of Governors, Mrs Edna McCormick



At any time, a parent can talk to a social worker at the
Gateway Team Tel: 0300 100 0300/ Emergency Duty Service 02890 565444
or the
PSNI Central Referral Unit Email cru@psni.police.uk
Tel: 101

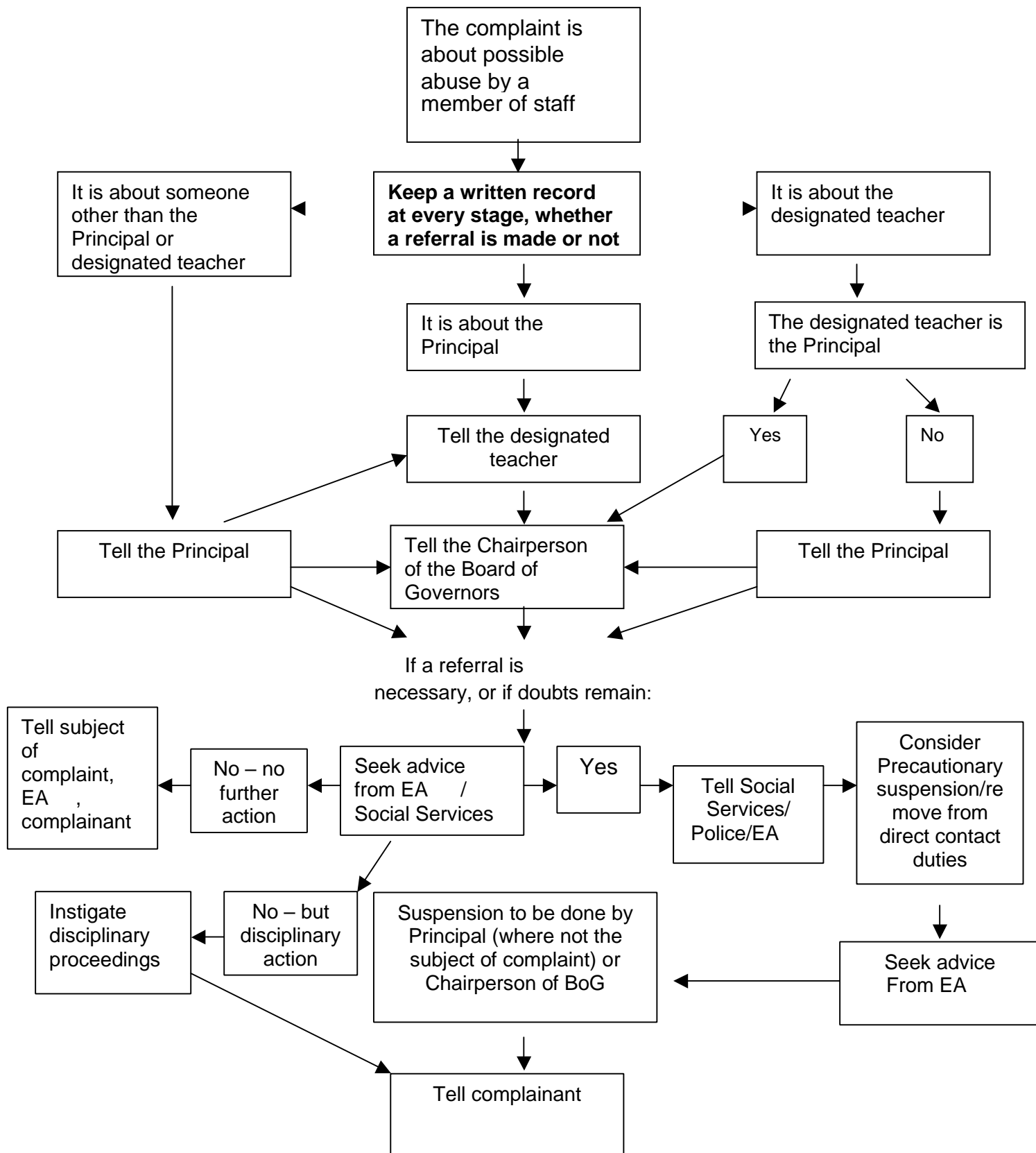
Appendix 3

Procedure where the School has concerns, or has been given information about possible abuse by someone other than a member of staff.



Appendix 4

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



Appendix 5 – Procedures for dropping off children to school

1. Parents must ensure that their child's health and safety is paramount while waiting to enter the school or classroom.
2. Children must be left to the designated door of the school/classroom by an adult and passed directly to a member of staff.
3. Parents should wait until their child is acknowledged by a staff member and brought into the school or classroom before leaving.

Appendix 6 – Procedures for collection of children from school

1. Parents will be asked to complete an All About Me form in August stipulating who can collect their child from school and if possible, on which day with their contact details. They will also be asked for photos of those persons who can collect their child from school to help staff to recognise them at the front door or at the classroom door. It is the responsibility of the Parents to provide these. This will be discussed at the Parent induction evening and the 1 to 1 induction meeting with their child's teacher in August.
2. Parents are required to inform staff if someone different is collecting a child from school either verbally (face to face) or in writing. A photo would also be appreciated or a description.
3. If staff have not been informed in person or in writing and someone has phoned the school with information about who is collecting a child, then we ask for adequate notice so that this information can be verified. Please be aware we may phone one or both parents, or the person who is supposed to be collecting the child that day to verify the person collecting is legitimate.
4. Please be aware that the staff reserve the right to refuse the handover of a child if the person collecting is unknown, if there is a safeguarding issue or if staff are not happy with how the person collecting the child is presenting themselves e.g. if staff feel their behaviour is questionable or they may be under the influence of drink or drugs.
5. If staff are expecting one person to collect a child and a different person arrives then the staff will verify in a phone call that it is alright to hand that child over.
6. The child's safety is paramount at all times.
7. Parents/Carers should collect their child from the classroom door and once a member of staff has handed the child over, then it is the responsibility of the person collecting to keep the child safe.