

Child Protection
Policies and Procedures
Saint Conleth and Mary's Primary School
Newbridge
Co.Kildare

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Chapter 1

INTRODUCTION AND LEGAL FRAMEWORK

1.1 Introduction

1.1.1 Following discussions between the Department of Education and Science, the Health Services Executives and organisations representing school management, parents and teachers, the guidelines upon which this policy is based were drawn up.

1.1.2 The primary aim of this Policy is to give direction and guidance to school management authorities and school personnel in dealing with allegations/suspicious of child abuse. In addition, they also aim to provide sufficient information to school management authorities and school personnel to enable them to be alert to and to be aware of what to do in situations where child abuse may be a concern or suspicions

1.1.3 In all cases, the most important consideration to be taken into account is the protection of children. In this regard, these guidelines emphasise that the safety and wellbeing of children must be a priority. If school personnel have concerns that children with whom they have contact may be being abused the matter should be reported without delay to the Health Services Executive.

1.1.4 In the interests of the welfare and protection of children, it is incumbent on school authorities and teachers to adhere to these guidelines in dealing with allegations or suspicions of child abuse. All staff (teachers, special needs assistants, ancillary staff, secretarial, caretaking etc.) in this school will follow the recommendations for reporting concerns or disclosures as outlines in `Children First` and the Department of Education and Science document, `Child Protection, Guidelines and Procedures`.

1.2 Confidentiality

1.2.1 All information regarding concerns of possible child abuse should only be shared on a need to know basis in the interests of the child. The test is whether or not the person has any legitimate involvement or role in dealing with the issue.

1.2.2 However, giving information to those who need to have that information, for the protection of a child who may have been, or has been abused, is not a breach of confidentiality.

1.2.3 Any Designated Liaison Person (please see Chapter 2 Paragraph 2.2,) who is submitting a report to the Health Services Executive or An Garda Siochana should inform a parent/ guardian unless doing so is likely to endanger the child or place the child at further risk. A decision not to inform a parent/ guardian should be briefly recorded together with the reasons for not doing so.

1.2.4 It is not the responsibility of school staff to make enquiries of parents or guardians, and in some cases it could be counter-productive for them to do so. It is a matter for the Health Services Executive to investigate suspected abuse and determine what action to take, including informing An Garda Siochana.

1.2.5 In cases of emergency, where a child appears to be at immediate and serious risk, and it is not possible to make contact with the appropriate Health Services Executive, An Garda Siochana should be contacted immediately. Under no circumstances should a child be left in a dangerous situation pending Health Services Executive intervention.

1.3 Protection for Persons Reporting Child Abuse Act, 1998

1.3.1 The Protection for Persons Reporting Child Abuse Act, 1998 came into operation on 23rd January 1999. Its main provisions are:

- i. The provision of immunity from civil liability to any person who reports child abuse “reasonably and in good faith” to designated officers of Health Services Executive or any member of the Garda Siochana.
- ii. The provision of significant protections for employees who report child abuse. These protections cover all employees and all forms of discrimination up to, and including, dismissal.
- iii. The creation of a new offence of false reporting of child abuse where a person makes a report of child abuse. These protections cover all employees and all forms of discrimination up to, and including, dismissal.

1.4 Qualified privilege

1.4.1 While the legal protection outlined in 1.3 above only applies to reports made to the appropriate authorities (i.e. the Health Services Executives and An Garda Síochána), this legislation has not altered the situation in relation to common law qualified privilege which continues to apply as heretofore. Consequently, should a member of a Board of Management or school personnel furnish information with regard to suspicions of child abuse to the Designated Liaison person of the school or to the Chairperson of the Board of Management, such communication would be regarded under common law as having qualified privilege.

1.4.2 Qualified privilege arises where the person making the communication has a duty to do so, or a right, or interest to protect the child and where the communication is made to a person with a similar duty, right or interest. The person making the report, acting in loco parentis, would be expected to act in the child's best interests and in making the report would be regarded as acting in such a manner. Privilege can be displaced only where it can be established that the person making the report acted maliciously.

1.4.3 Furthermore, those reporting a child's disclosure are not regarded as making an allegation as a matter of charge, but simply carrying out their duty in good faith. They are not accusing or bringing a charge.

1.5 Freedom of Information Act, 1997

1.5.1 Any reports which are made to Health Services Executives may be subject to the provisions of the Freedom of Information Act, 1997, which enables member of the public to obtain access to personal information relating to them which is in the possession of public bodies. However, the Freedom of Information Act also provides that public bodies may refuse access to information obtained by them in confidence.

Chapter 2

RESPONSIBILITIES OF ALL SCHOOL PERSONNEL

2.1 General

2.11 There is an obligation on schools to aim to provide pupils with the highest possible standard of care in order to promote their well being and protect them from harm.

2.12 All school personnel are especially well placed to observe changes in behaviour, failure to develop or outward signs of abuse in children. In situations where school personnel suspect abuse, they should ensure that such concerns are reported in accordance with the procedures outlined in Chapter 3 of these guidelines.

2.2 Designated Liaison Person

2.2.1 All Boards of Management must designate a senior member of staff to have specific responsibility for child protection. This person will be the Designated Liaison Person for the school in all dealings with Health Services Executives, An Garda Síochána and other parties, in connection with allegations of abuse. Those other parties should be advised that they should conduct all matters pertaining to the processing or investigation of alleged child abuse through the Designated Liaison Person. It is expected that the Designated Liaison Person will normally be the Principal Teacher.

2.2.2 Where the Designated Liaison Person is unavailable for whatever reason, arrangements should be in place for another nominated member of staff to assume his/her responsibilities.

2.2.3 The Designated Liaison Person, or his/her deputy, should immediately inform the Chairperson of the Board of Management of the school that a report involving a pupil in the school has been submitted to the relevant Health Services Executive. The Board of Management of this school has appointed Sheila O'Neill, Principal, as the Designated Liaison Person (DLP) and Rita Nugent, as the deputy DLP.

2.3 How to recognise possible signs of abuse

- 2.3.1 Indicators of possible abuse are outlined in Chapter Three and Appendix One of the *Children First* guidelines. Teachers should familiarise themselves with the contents of those sections. No one indicator should be seen as conclusive in itself and may indicate conditions other than child abuse. It is important that all school personnel would consult the relevant sections of *Children First* where they have concerns regarding possible abuse. The Designated Liaison Person should be able to provide school personnel with a copy of *Children First*.
- 2.3.2 The *Children First* guidelines state that a Health Services Executive should always be notified where a person has a reasonable suspicion or reasonable grounds for concern that a child may have been or is being abused or at risk of abuse. The following examples are quoted as constituting reasonable grounds for concern:
- i) Specific information from the child that he/she was abused;
 - ii) An account by a person who saw the child being abused;
 - iii) Evidence, such as injury or behaviour, which is consistent with abuse and unlikely to be caused another way;
 - iv) An injury or behaviour which is consistent both with abuse and with an innocent explanation but where there are corroborative indicators supporting the concern that it is a case of abuse – e.g. a pattern of injuries, an implausible explanation, other indications of abuse, dysfunctional behaviour; and
 - v) Consistent evidence, over a period of time that a child is suffering from emotional or physical neglect.
- 2.3.3 A suspicion, which is not supported by any objective indication of abuse or neglect, would not constitute a reasonable suspicion or reasonable grounds for concern. However, if doubts persist, please consult Chapter 3 Paragraph 3.2.3 of these guidelines.

2.4 **Handling disclosures from children**

- 2.4.1 An abused child is likely to be under severe emotional stress and a staff member may be the only adult whom the child is prepared to trust. Great care should be taken not to damage that trust.
- 2.4.2 When information is offered in confidence, the member of staff will need tact and sensitivity in responding to the disclosure. The member of staff will need to reassure the child, and retain his or her trust, while explaining the need for action and the possible consequences, which will necessarily

Involve other adults being informed. It is important to tell the child that everything possible will be done to protect and support him/her, but not to make promises that cannot be kept e.g. promising not to tell anyone else.

2.4.3 While the basis for concern must be established as comprehensively as possible, the following advice is offered to school personnel to whom a child makes a disclosure of abuse.

- Listen to the child
- Do not ask leading questions nor make suggestions to the child
- Offer reassurance but do not make promises
- Do not stop a child recalling significant events
- Do not over react
- Explain that further help may have to be sought
- Record the discussion accurately and retain the record

This information should then be reported to the Designated Liaison Person as outlined in Chapter 3 Paragraph 3.1.1 of these guidelines. The record of the discussion should be given to and retained by the Designated Liaison Person.

2.5 **Keeping track of records**

2.5.1 When child abuse is suspected, it is essential to have a record of all the information available. Staff should note carefully what they have observed and when they observed it. Signs of physical injury should be described in detail and, if appropriate, sketched. Any comment by the child concerned, or by any other person, about how an injury occurred should be recorded, preferably quoting words actually used, as soon as possible after the comment has been made. All records so created should be regarded as highly confidential and retained in a secure location by the Designated Liaison person.

2.5.2 It is possible that school personnel may subsequently be invited to attend a child protection conference by the appropriate Health Services Executive. Please consult Chapter 3 paragraph 3.4 of these guidelines for further information on child protection conferences.

Chapter 3

REPORTING OF CONCERNS AND ROLE OF HEALTH SERVICES EXECUTIVES

3.1 Action to be taken by school personnel

3.1.1 If a school employee receives an allegation or has a suspicion that a pupil is being abused the school employee should, in the first instance, report the matter to the Designated Liaison Person in that school. The need for confidentiality at all times, as previously referred to in Chapter 1 Paragraph 1.2 of these guidelines, should be borne in mind.

3.2 Action to be taken by Designated Liaison Person

3.2.1 If the school employee and the Designated Liaison Person are satisfied that there are reasonable grounds for the suspicion or allegation (see Chapter 2, Paragraphs 2.3.2 and 2.3.3, of these guidelines) the Designated Liaison Person should report the matter to the relevant Health Services Executive immediately. It may be useful to note:

- i. A report should be made to the Health Services Executive in person, by phone or in writing. Each health board area has a social worker on duty for a certain number of hours each day. The duty social worker is available to meet with or talk on the telephone, to persons wishing to report child protection concerns.
- ii. It is generally most helpful if persons wishing to report child abuse concerns make personal contact with the duty social worker. This will facilitate the social worker in gathering as much information as possible about the child and his or her parents/ carers.
- iii. In the event of an emergency, or the non-availability of Health Services Executive staff, the report should be made to An Garda Síochána. This may be done at any Garda Station. It is recommended that all reports should include as much as possible of the information sought in the Standard Reporting Form as outlined in Appendix 1 of these guidelines. Since all information requested might not be available to the person making a report, the forms should be completed as comprehensively as possible. When

such a report is being made to a Health Services Executive, the Chairperson of the Board of Management of the school should be informed. A decision on whether or not parents/guardians of the child also be informed should be taken in accordance with the information contained in Chapter 1 Paragraph 1.2.2 (page 5) of these guidelines.

3.2.2 In cases where school personnel have concerns about a child, but are not sure whether to report the matter to the appropriate Health Services Executive, they should seek appropriate advice. To do so, the Designated Liaison Person should consult the appropriate Health Services Executive staff. In consulting the appropriate Health Services Executive staff, the Designated Liaison Person should be explicit that he/she is requesting advice and consultation and that he/she is not making a report. It would not be envisaged at this informal stage that the Designated Liaison Person would have to give identifying details as are required when a report is being made. If a Health Services Executive advises that a referral should be made, the Designated Liaison Person should act on that advice.

3.2.3 If following the discussion outlined in 3.2.2 above, the Designated Liaison Person decides that the concerns of the school employee should not be referred to the relevant Health Services Executive, the school employee should be given a clear statement, in writing, as to the reasons why action is not being taken. The school employee should be advised that, if he/she remains concerned about the situation, he/she is free to consult with or report to the Health Services Executive. Again, the Standard Reporting Form at Appendix 1 of these guidelines should be used. Any such report would be covered by the Protection for Persons Reporting Child Abuse Act, 1998.

3.2.4 A list of Health Services Executive contact addresses and phone numbers is contained at Appendix 2 of these guidelines. It is essential that at all times the matter be treated in the strictest confidence and not discussed except among the parties mentioned above.

3.3 Role of Health Services Executives

3.3.1 Health Services Executives were established under the Health Act, 1970. With the passing of the Child Care Act, 1991, Health Services Executives were given a range of statutory responsibilities in the area of child welfare, family support, child protection and child care.

3.3.2 The responsibility given to Health Services Executives to protect children is contained in Sections 3(1) and 3(2) (a) of the Child Care Act, 1991, where it is stated that:

3(1) It shall be a function of every Health Services Executive to promote the welfare of children in its area who are not receiving adequate care and protection;

3(2) in the performance of this function a Health Services Executive shall:

(a) Take such steps as it considers requisite to identify children who are not receiving adequate care and protection and co-ordinate information from all relevant sources relating to children in its are;

(b) Having regard to the rights and duties of parents, whether under the Constitution or otherwise-

i. Regard the welfare of the child as the first and paramount consideration, and

ii. In so far as is practicable, give due consideration, having regard to his age and understanding, to the wishes of the child; and

iii. Have regard to the principle that is generally in the best interests of a child to be brought up in his own family.

Once an allegation of child abuse has been reported to a Health Services Executive, it is then a matter for that Health Service Executive to decide upon the action, if any, which is necessitated by that report. In some cases, the response of the Health Services Executive will be to call a child protection conference.

3.4 Child protection and conferences

3.4.1 The child protection conference is an essential mechanism for Health Services Executives in the effective operation of the child protection services under the Child Care Act, 1991. It is a forum for the co-ordination of information from all relevant sources, including where necessary, school employees. The child protection conference plays a pivotal role in making recommendations and planning for the welfare of children who may be at serious risk.

- 3.4.2** A request from a Health Services Executive for a school employee to attend a child protection conference should be made to the Designated Liaison Person who should consult with the Chairperson of the Board of Management of the school. The Chairperson of the Board of Management may, through the Designated Liaison Person, request the appropriate authorities to clarify why the attendance of the school employee at the child protection conference is considered necessary will be met by the Department of Education and Science in respect of teachers required to attend a child protection conference during school hours. A letter, from the relevant Health Services Executive, confirming the attendance of the teacher at the child protection conference should be submitted to the Department together with the application for payment of the substitute.
- 3.4.3** It would be normal for a person attending a child protection conference to provide a report to the conference. A sample pro-forma for a school employee's report to a child protection conference is attached at Appendix 3. It should be noted that this is a sample form and different Health Services Executives may supply alternative type forms. However, it is expected that the type of information that is requested by this sample form will be similar to the type of information required by all Health Service Executives.
- 3.4.4** The *Children First* guidelines state that professionals should always be informed when children and/or parents/guardians are going to be present at child protection conferences. Accordingly, any school personnel who may have a concern about parent/guardian involvement should contact the chairperson of the child protection conference in advance for guidance.
- 3.4.5** The recommendations of the child protection conference are concerned with the future planning for the child and family. The conference may recommend that particular agencies provide resources and services to the family. Participants may provide undertakings regarding actions that they agree to take. The recommendations may include the Health Services Executive seeking legal advice with respect to an application for a Court Order to protect the child. Further information on the protocol for child protection conferences is contained in Appendix 6 of *Children First* (Page 149)
- 3.4.6** The school employee may be requested to keep the child's behaviour under closer observation, in a manner that is not inconsistent with the school employee's existing duties to his class as a whole. This may include

observing the child's behaviour, peer interactions, school progress or informal conversations.

- 3.4.7** In all cases, individuals who refer or discuss their concerns about the care and protection of children with health Services Executive staff should be informed of the likely steps to be taken by the professionals involved. Wherever appropriate and within the normal limits of confidentiality, Health Services Executive staff have a responsibility to inform persons reporting alleged child abuse and other involved professionals about the outcome of any enquiry or investigation into that reported concern.

Chapter 4

ALLEGATIONS OR SUSPICIONS OF CHILD ABUSE BY SCHOOL EMPLOYEES

4.1 Introduction

4.1.1 This Chapter is intended to provide guidance to Borads of Management in situations where an allegation of abuse is made against a school employee. The most important consideration to be taken into account by a Board of Management is the protection of children, and their safety and well-being must be a priority. However, because of the involvement of school employees, the Board of Management has duties in respect of them as well. The guidelines are offered to assist Boards of Management in having due regard to the rights and interests of the children under their care and those of the employee against whom an allegation is made.

4.1.2 As employers, Boards of Management should note that legal advice should always be sought in these cases as circumstances can vary from one case to another and it is not possible in these guidelines to address every scenario.

4.1.3 It is important to note that there are two procedures to be followed:

- i. the reporting procedure in respect of the allegation;
- ii. the procedure for dealing with the employee.

In general the same person should not have responsibility for dealing with the reporting issue and employment issue. In the case of primary schools, the Designated Liaison Person is responsible for reporting the matter to the appropriate Health Services Executive while the Chairperson of the Board of Management, acting in consultation with his/her Board, is responsible for addressing the employment issues. However, where the allegation of abuse is against the Designated Liaison Person, the Chairperson of the Board of Management will assume the responsibility for reporting the matter to the Health Services Executive.

4.1.4 The primary aim of Boards of Management is to protect the children within the school to whom they have a duty of care. However, school employees may be subject to erroneous or malicious allegations. Therefore

Any allegation of abuse should be dealt with sensitively and the employee fairly treated. This includes the right not to be judged in advance of a full and fair enquiry.

4.2 Reporting procedure

4.2.1 Where an allegation of abuse is made against a school employee, the Designated Liaison Person within the school should immediately act in accordance with the procedures outlined in Chapter 3 Paragraph 3.2 of these guidelines. A written statement of the allegation (parents/ guardians may make a statement on behalf of the child). The ability of the Health Services Executive or the Board of Management to assess suspicions or allegations of abuse will depend on the amount and quality of information conveyed to them. Whether or not the matter is being reported to the appropriate Health Services Executive, the designated Liaison Person should always inform the Chairperson of the Board of Management of the allegation.

4.2.2 School employees, other than the Designated Liaison Person, who receive allegations of abuse against another school employee, should report the matter without delay to the Designated Liaison Person as outlined in Chapter 3, Paragraph 3.1.1 of these guidelines. The Designated Liaison Person should then follow the prescribed procedures as laid out in Chapter 3.2 of these guidelines.

4.2.3 School employees who form suspicions regarding the conduct of another school employee should consult with the Designated Liaison Person. The Designated Liaison Person may wish to consult with the appropriate Health Services Executive. If the Designated Liaison Person and the school employee are satisfied that there are reasonable grounds for the suspicion, the Designated Liaison Person should report the matter to the relevant Health Services Executive immediately. The Designated Liaison Person should also report the matter to the chairperson of the Board of Management, who should proceed in accordance with the procedures outlined in Chapter 4.3 below. Chapter 3, Paragraph 3.2 of these guidelines should be read in full, in conjunction with this paragraph.

4.3 Action to be taken by Chairperson

4.3.1 When a Chairperson of a Board of Management becomes aware of an allegation of abuse against a school employee, the Chairperson should privately inform the employee of the following:

- i) the fact that an allegation has been made against him/her;

- ii) the nature of the allegation
- i) whether or not the matter has been reported to the appropriate Health Services the Designated Liaison Person;

4.3.2 The employee should be given a copy of the written allegation, and any other relevant documentation. The employee should be requested to respond to the allegation in writing to the Board of Management within a specified period of time. The employee should be told that his/her explanation to the Board of Management would also have to be passed on to the health board.

4.3.3 At this stage, it should be remembered that the first priority should be to ensure that no child is exposed to unnecessary risk. The Chairperson of the Board of Management should as a matter of urgency take any necessary protective measures. These measures should be proportionate to the level of risk and should not unreasonably penalise the employee, financially or otherwise, unless necessary to protect children.

4.3.4 If, in the Chairperson's opinion, the nature of the allegation warrants immediate action, the chairperson, on behalf of the Board of Management, should direct that the employee absent him/herself from the school with immediate effect. Where the Chairperson is unsure as to whether the nature of the allegations warrant the absence of the employee from the school while the matter is being investigated, s/he Executive and/or An Garda Síochána for advice as to the action that those authorities would consider necessary. Following those consultations, the Chairperson should have due regard for the advice offered.

4.3.5 Any absence by a school employee would be regarded as administrative leave of absence with pay and not a suspension. Such a leave of absence would not imply any degree of guilt on the part of the school employee. Where such a leave of absence is invoked, the Department of Education and Sciences should be contacted with regard to:

- i) Formal approval for the paid leave of absence of the school employee;
- and
- ii) Departmental sanction for the employment of a substitute teacher.

4.4 Further follow-up required

4.4.1 Whether or not the employee is absent from the school on administrative leave, it is necessary for the Chairperson to inform the Board of Management immediately of the matter. The Chairperson should convene an immediate meeting of the board for this purpose and inform the Board members of the nature of the allegations, the action taken in respect of same and the outcome of any consultations with the Health Services Executive and/or an Garda Síochána. Members of the Board of Management should be reminded of their serious responsibilities to maintain strict confidentiality about all matters relating to the issue. The principle of due process and natural justice should be adhered to by the Board

4.4.2 It should be noted that, in certain situations, it might not be possible for the Board of Management to reach any definitive conclusions as to whether the alleged abuse actually occurred. Such a situation could occur where the allegations of abuse relate to the past employment of the school employee and where these allegations are being investigated by either the Health Services Executive or An Garda Síochána. In such situations it may not prove possible for a Board of Management to conduct any proper enquiry into the allegations. In these cases the Chairperson of the Board of Management by those authorities. If a decision is taken that the school employee should take administrative leave of absence, the department of Education and Science should be immediately informed.

4.4.3 However, where the alleged abuse has taken place within the school, or relates to the abuse of pupils of the school employees outside of school time, the Board if Management should convene a further meeting. At this meeting the Board should consider in detail the allegations which have been made against the school employee and the source of those allegations, the advice of the Health services Executives and/or An Garda Síochána in relation to the allegations and the written response of the employee to the allegations.

4.4.4 At this meeting the person/agency who is alleging abuse by the school employee should be offered an opportunity to present his/her case to the board and may be accompanied by another person in doing so. Parents/ guardians may act on behalf of a child. Likewise the employee should be afforded an opportunity to make a presentation of his/her case to the board and may also be accompanied by another person.

4.4.5 Having followed the procedures outlined above, and having satisfied itself that it has sufficient information to hand for it to make a determination in relation to the allegation, the Board should then make a decision on the action, if any, it considers necessary to take in respect of the employee. The department of Education and Science should be informed of the outcome where the school employee had been absent on administrative leave.

4.5 Feedback from Health Services Executives

4.5.1 The *Children First* guidelines an onus on Health Services Executives to ensure that arrangements are put in place to provide feedback to employers in regard to the progress of a child abuse investigation regarding and employee. It is clearly stated in those guidelines that efforts should be made to investigate complaints against employees promptly bearing in mind the serious implications for an innocent employee. Health Services Executives should pass on reports and records to the employer and the employee in question where appropriate. This will assist the employer in reaching a decision as to the action to be taken in the longer term concerning the employee. Employers should always be notified of the outcome of investigations. It is the responsibility of the Chairperson of the Board of Management to maintain close contact with the Health Services Executives to ensure tat the health Services Executives act promptly in cases of alleged abuse involving school employees.

Chapter 5

PEER ABUSE AND BULLYING

5.1 introduction

5.1.1 It is important that sexualised behaviour between children is not ignored and, as appropriate, certain cases should be referred to the Health Services Executive. However, it is also very important that the different types of behaviour. The *Children First* guidelines (chapter 11) outline four different categories of behaviour, which warrant attention and it is important that all school personnel would consult Chapter 11 of *Children First* where they have concerns regarding possible abuse.

5.1.2 In a situation where child abuse is alleged to have been carried out by another child, the reporting procedures outlined in Chapter 3 of these guidelines should be followed.

5.1.3 Sexualised behaviour may also be indicative of a situation that requires assessment by the Health Services Executive. Children who are abusive towards other children require comprehensive assessment and therapeutic intervention by skilled child care professionals. It is known that some adult abusers begin abusing during childhood and adolescence, that significant numbers will have suffered abuse themselves and that the abuse is likely to become progressively more serious. Early referral and intervention is therefore essential.

5.2 Sexual abuse by children and young people

5.2.1 In cases where school personnel have concerns about a child, but are not sure whether to report the matter to the appropriate Health Services Executive, They should seek appropriate advice. To do so, the Designated Liaison Person should consult the appropriate Health Services Executive staff. In consulting the appropriate Health Services Executive staff, the Designated Liaison Person should be explicit that he/she is requesting advice and consultation and that he/she is not making a report. It would not be envisaged at this informal stage that the Designated Liaison Person would have to give identifying details as is required when a report is being made.

5.2.2 In cases where children are abusive towards other children, it is the responsibility of the relevant Health Services Executive to establish appropriate treatment programmes to cater for children who engage in abusive behaviour against other children

5.2.3 Schools should also make appropriate arrangements to minimise possibility of any abusive behaviour re-occurring within the school. Schools should also provide assurances to parents/ guardians of the abuse victim that the school will take all reasonable measures to ensure the safety of their children involved in the incident with a view to addressing the matter. Separate meetings should be arranged for parents of the involved children.

5.3 Bullying

5.3.1 Bullying can be defined as repeated aggression be it verbal, psychological or physical which is conducted by an individual or group against others. It is behaviour that is intentionally aggravating and intimidating and occurs mainly among children in social environments such as schools. It includes behaviour, such as teasing, taunting, threatening, hitting, exclusion, or extortion by one or more pupils against a victim. The more extreme forms of bullying behaviour, when they are perpetrated by adults rather than children, would be regarded as physical or emotional abuse. However, other major forms of child abuse such as neglect and sexual abuse are not normally comprehended by the term bullying.

5.3.2 It is recognised that bullying in schools is in increasing problem. School management authorities are responsible, in the first instance, for dealing with bullying in school and should exercise this responsibility having regard to the *Guidelines on Countering Bullying Behaviour in Primary and Post-Primary Schools* which were issued in 1993. It is imperative that Boards of Management have a policy in place to deal with bullying and that teachers are aware of this policy and of procedural guidelines to deal with bullying which are included in the school's code of behaviour and discipline. In situations where the incident is serious and where the behaviour is regarded as potentially abusive, the school should consult the relevant Health Services Executive with a view to drawing up an appropriate response.

Chapter 16

PREVENTION

6.1 The Stay Safe Programme is the primary resource used in this school to provide education for children on abuse prevention. The programme is taught as part of the schools' SPHE curriculum under the strand unit Safety and Protection (Personal Safety).

On enrolment of their child parents will be informed that the Stay Safe programme is in use in the school.

The formal lessons of the programme will be taught in the entirety every second year in accordance with the SPHE two-year cycle plan

Staff will make every effort to ensure that the messages of the programme are reinforced whenever possible.

CHAPTER 7

SPECIFIC AREAS OF CONCERN

The staff and board of management of this school have identified the following as areas of specific concern in relation to child protection. Following discussion and consultation the staff and board of management have agreed that the following practises be adopted.

7.1.1 Arrival, Dismissal and Absences during the School Day.

There is a policy of collective responsibility for supervision in the school from 9.10 a.m. until 2.50 p.m. In the interests of safety and protection children and parents should not enter or exit through the staff Car Park. Children attending the School go to class in single file when the morning bell rings and leave the school building in an orderly fashion when dismissed in the afternoon.

- a) Have a note or appointment card.
- b) Must be signed out in the 'early leaving' copy by an authorised adult.

Children may not leave the school unaccompanied under any circumstances during the day. Parents/ Guardians/ may not make arrangements to meet the child at the gate, parents/ guardians must come into the building and personally 'sign out' the child.

7.1.2 Illness

Should a child become ill in school during the day:

The secretary or a member of staff will phone the parent/ guardian to take the child home.

If we fail to contact parents the child remains in school unless seriously ill, in which case the child will be taken straight to hospital (sanction for this is sought at time of enrolment). If it is considered necessary an ambulance may be called and the child will be accompanied to hospital.

7.2 Accidents

While every precaution will be taken under our Health and Safety Statement to ensure the safety of children, we realise that accidents will happen. Accidents will be noted in our Incident Book and will be filed in the Secretary's office.

7.3 Attendance

Our school attendance will be monitored as per our attendance policy. With regards to child protection we will pay particular attention to trends in non-attendance. We will also monitor non-attendance in correlation with signs of neglect/ physical/ emotional abuse.

7.4 Behaviour

Children are encouraged at all time to play co-operatively and inappropriate behaviour will be addressed under our Code of Behaviour will be addressed under our Code of Behaviour. If an incident occurs which we consider to be of a sexualised nature we will notify the DLP who will record it and respond to it appropriately.

7.5 Children travelling in staff cars

Members of the school staff will not carry a lone child in their cars at any time.

7.6 Communication

Every effort will be made to enhance pupil-teacher communication. If pupils have concerns they will be listened to sympathetically. The SPHE/ Oral Language/ RE programmes allow for open pupil –teacher relationship. If teachers have to communicate with pupils on a one-to-one basis, they are requested to leave the classroom door open.

7.7 Induction of Staff

The DLP will be responsible for informing all new teachers and ancillary staff of the Child Protection Guidelines and Procedures, Des, 3002 and Children First Guidelines, 1999. The DLP will give a copy of the child Protection Guidelines and Procedures, Chapters 3 &4 and Appendix 1 of Children First and this Child Protection Policy to all new staff. All new teachers are expected to teach the designated SPHE objectives for their class. Sinead Treacy is responsible for the mentoring of new teachers and will be responsible for supporting new teachers as they implement the SPHE objectives. Ms. Treacy is also responsible for ensuring that new teachers know how to fill in the roll book correctly and informing the teacher of record keeping procedures within the school.

7.8 Supervision

The school's supervision policy will be followed by all staff to ensure that there is comprehensive supervision of children at all breaks and arrival and dismissal. A rota will be displayed to cover sos and lunchtime breaks. See Supervision Policy for agreed rules around break-times and procedures around teacher absences.

7.9 swimming

Children from 2nd to 6th Class will be brought by bus to the swimming pool. If a child requires assistance for a particular reason, an SNA will be allocated, if possible, from within the school resources.

7.10 Visibility

Teachers will ensure that children are visible in the school play ground. Children will not be allowed to spend time in classrooms, toilets or sheds or other areas where they would not be under adult supervision. They are not to leave the school playground or to engage with adults who are outside of the school playground.

7.11 Visitors

Teachers on playground duty will be aware of visitors Entering the school playground and will ascertain their intentions. They will be supervised in the discharge of the business.

7.12 Guest Speakers/Visiting Teachers

Teachers will remain with the class at all times when a visiting teacher or guest speaker is engaging with the pupils.

7.13 Toileting/ Intimate Care/ Toileting Accidents

In situations where a pupil has toileting/intimate care needs a meeting will be held with the parent , teacher, SNA and, if appropriate, the child, after enrolment to discuss the issue and procedures to be followed.

7.14 One-to one Teaching

Where teachers are teaching children individually they may only do so in classrooms that have a clear glass panel in the door.

7.15 Recruitment and Selection of Staff

The Board of Saint Conleth and Mary's fully endorses arrangements for the vetting of teaching and non-teaching staff as outlined in Circular 0094/2006 by the D.E.S.

7.16 Photographs

On admission to the school. Parents/ Guardians are requested to sign a permission note for photographs of their children to be taken. Photographs by outside agencies (i.e. Press Photographers etc.) are taken under the supervision of a staff member.

7.17 Internet Use

Internet use is considered a school resource and a privilege. Procedures are outlined in our Acceptable Use Policy

7.18 Substance Use

Saint Conleth and Mary's acknowledge that that the school has an important role in terms of education, prevention, support and handling substance abuse related incidents. Our approach is outlined in our Substance Use Policy.

Adopted this 28th day of November 2013

Emmett McConville

Chairperson

Board of Management