

John Paul College Policy

CHILD PROTECTION POLICY**RATIONALE**

John Paul College is committed to providing an environment within our Catholic and Lasallian school, in which the safety, welfare and interests of all students is paramount. To this end, JPC recognises the necessity to:

1. Develop staff awareness of child abuse defined as:
"...the harming (whether physically, emotionally, sexually), ill-treatment, abuse, neglect, or deprivation of any child or young person."

Sect 2, Children, Young Person's and their Families Act 1989.

2. Provide a framework for response to disclosures or suspicions of abuse.

NB The focus of this policy is **child protection**. The broader area of child safety is covered within the following related policies:

- 0.1 Catholic Character
- 3.1 Staff Appointments
- 3.2 Staff Induction
- 3.3 Performance Management
- 3.10 Complaints Concerning Staff:
 - 3.10.1 Level 1
 - 3.10.2 Level 2
- 5.1 Health and Safety
- 5.2 Education Outside the Classroom (EOTC)
- 5.4 Pastoral Care, Behaviour and Relationship Management
 - 5.4.1 Pastoral Care
 - 5.4.3 Bullying
- 5.10 School Based Health Services
- 5.19 Cyberbullying

PURPOSE

The purposes of this policy are to:

1. Raise awareness of the importance of our role in maintaining the safety, welfare and interests of any child or young person we come into contact with through work.
2. Identify procedures for staff to follow should a suspected case of child abuse arise, by providing training, support and guidance to staff.
3. Identify the internal Designated Person for Child Protection, external agencies to be contacted, and the appropriate reporting procedures.

GUIDELINES

1. The internal Designated Person for child protection at John Paul College is the Head of Counselling. In this person's absence, the DP Student Management will take on this role.

All referrals to outside agencies including Oranga Tamariki (OT), Police and iCAMHS and contact with the parents/caregivers of the child following disclosures or suspicions of abuse must **only** be made by the internal Designated Person.

2. In response to suspicion or disclosure of abuse, procedures are in place for:

- Staff (Appendix 1)
- Referrers (Appendix 2)

These procedures cover the following situations:

- When parents/caregivers are suspected
- When a staff member is suspected
- When others are suspected
- When children/students engage in abusive or concerning sexual behaviour

3. Confidentiality is to be maintained through adherence to procedures for staff and referrers (Appendices as above). All information disclosed is not to be discussed with other staff members.

4. Types of child abuse:

- Physical abuse
- Emotional abuse
- Neglect
- Sexual abuse

(See Appendix 4 for definitions and indicators of abuse)

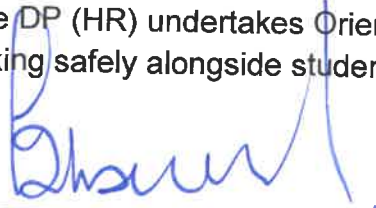
5. In accordance with the Vulnerable Children Act, 2014 (below) John Paul College is proactive in ensuring the safety of all students at JPC. (Refer JPC Policy 3.1)

Vulnerable Children Act, 2014, Section 31: Safety checks. These must include:

- *Confirmation of identity*
- *Risk assessment regarding safety to work with children*

Further to this end, the DP (HR) undertakes Orientation/Training with all new ancillary staff re. Working safely alongside students.

Ratified by Board



Signed for B.O.T Chair

27.08.2018

Date

Next Review

Signed for B.O.T

2021

Appendix 1

Staff Procedure: Disclosure or Suspicion of Abuse

The safety of the child is the priority. All disclosures or suspicions of abuse must be reported to the internal Designated Person for child protection.

During Disclosure

- Stay calm, be patient, **don't question extensively.**
- Keep voice low and gentle
- Thank the child for telling you and say you are there to help them
- Ask them who else knows
- **Do not** promise confidentiality.

"I'm really glad you've come to tell me. You've done the right thing. Now we're going to get some help for you."

Following Disclosure

- Find a safe time-out place for the child (eg. Counselling offices)
- Refer the disclosure to the internal Designated Person for child protection
- Complete a Record of Concern form (Appendix 3)

In responding to disclosures of abuse it is important that staff **DO NOT**:

- "Investigate" concerns of child abuse
- Question or alert the alleged offender
- Make decisions alone
- Contact the child or family without advice
- Pass on information unless advised to and in accordance with policy
- Take action without recording it – See Appendix 3: Record of Concern

Appendix 2

Referrer Procedure: Disclosure or Suspicion of Abuse

Following allegations of abuse by parents/caregivers/other family members and when students engage in abusive or concerning sexual behaviour

- Respond immediately
- Inform DP(SM)
- Speak with person referring the student then with the student
- Clarify information using student's own words to avoid leading questions
- Record what was said
- Consult with OT: ph 0508 EDASSIST (0508 33277478)
- Record formally
 - Full information about the student
 - All concerns, discussions, professionals involved
- Report to OT
- Notify Principal
- Further professional notifications as required or as advised by OT
- Notify supervisor

Following allegations of abuse by staff member

- Respond immediately
- Inform DP(SM)
- Speak with the person referring the student then with the student
- Clarify information using student's own words to avoid leading questions
- Record what was said
- Notify Principal
- Principal to initiate internal investigation into allegation according to Policy 3.10.2 (Level 2: Formal Complaints on Competency, Conduct and Discipline)

Appendix 3

Record of Concern

Record of Concern			
Name		Form	
Date			
Time			
Notes	(Give student's actual words as much as possible)		
Action taken	Referred (Circle when actioned)		
Signed		Date	
Name			
Position			

Appendix 4

Definitions and Indicators of Abuse

(Source: Child Matters, 2014)

Physical Abuse Is...

- Strangulation or suffocation
- Poisoning
- Burning or scalding
- Or causing:
 - Bruises and welts
 - Cuts and abrasions
 - Fractures or sprains
 - Abdominal injuries
 - Head injuries
 - Internal injuries

Or otherwise causing
physical harm to a child.

Behavioural Indicators

- Aggressive, destructive
- Mistrust of adults
- Anxious and jittery
- Vacant or frozen stare
- Low self-worth
- Passive and compliant
- Inappropriately dressed
- Relationship difficulties
- General anti-social behaviour eg theft, drug-running

Emotional Abuse Is...

Emotional abuse is any act or omission that results in impaired psychological, social, intellectual and/or emotional functioning and development of a child or young person.

- Continued criticism, threat, humiliation, accusations, inappropriate expectations, rejection, isolation or oppression.
- Exposure to family violence
- Exposure or involvement in anti-social and/or illegal activities
- Negative impact of care-givers mental or emotional condition
- Negative impact of substance abuse in the home
- Deprivation of affection
- Excessive or no responsibility

General Indicators of Abuse

In children

- Difficulty developing normal relationships
- Slow development
- Regression
- Apathy, depression, habitually frightened and nervous
- Habit disorders – sucking, biting, rocking
- Markedly low self-esteem
- Very clingy and possessive
- Overly compliant and apologetic
- Aggressive behaviour
- Angry.
- Socially deviant behaviour
 - Stealing or destroying property
 - Gossiping maliciously
 - Running away
 - Suicide threats
- Stunted growth, failure to thrive
- Bizarre behaviours / psychoneurotic reactions
 - Hypochondria
 - Obsessive Compulsive Disorder

In Family

- Demonstrate clear dislike of child
- Appear emotionally remote
- Lack of warm strong bonds
- Parent/s in abusive/violent relationship
- Not meeting children's needs
- Inconsistent parenting or environment

Neglect Is...

Neglect is any act or omission that results in impaired physical functioning, injury, and/or development of a child or young person.

It may include but is not restricted to

- Physical neglect
- Neglectful supervision
- Medical neglect
- Abandonment
- Refusal to assume parental responsibility
- Emotional neglect
- Educational neglect

Key Indicators of Neglect

- Poor health
- Poor hygiene
- Evidence of poor skin care
- Eating disorder
- Frequent A&E attendance
- Stealing, hoarding food, hunger
- Withdrawal from and mistrust of adults
- Anger and aggressive behaviour
- Delayed development – poor learning skills
- Apathy and withdrawal, unsmiling
- Irritability
- Anti-social behaviour

Factors That May Give Rise to Neglect

- Parental inadequacy
- One parent's abandonment of home
- Poverty
- Relationship problems
- Poor housing
- Parental pre-occupation
- Addictions

Sexual Abuse Is...

Sexual abuse is any act or acts that result in the sexual exploitation of a child or young person, whether consensual or not.

It may include, but is not limited to

- Contact and/or non-contact abuse
- Exhibitionism (Flashing)
- Voyeurism (Peeping Tom)
- Suggestive behaviour or comments
- Exposure to pornographic material
- Genital/anal fondling
- Oral sex
- Penetration of vagina or anus
- Encouraging child to perform such acts
- Involvement in pornography or sexual exploitation

Indicators of Sexual Abuse

Physical Signs

- Discomfort
- Bruises
- Clothing – too much, too little, hidden, bloodied, stained
- Unusual odour / discharges
- Sexually transmitted infections

Behavioural Signs

- Changes in behaviour
- Sexualised behaviour
- Advanced sexual knowledge
- Promiscuity
- Crying, sadness, withdrawal, sensitivity around sexual innuendo
- Fears, phobias, anxiety
- Feeling unlovable/unloved
- Regression
- Learning difficulties