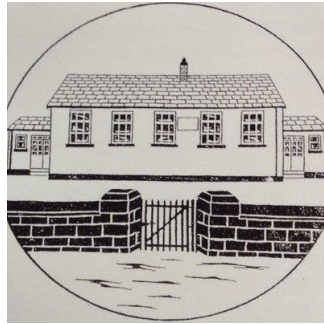


CREAVERY PRIMARY SCHOOL



**Keeping
children safe
is everyone's
responsibility**



SAFEGUARDING & CHILD PROTECTION POLICY

APPENDICES

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APPENDIX 1
CODE OF CONDUCT FOR ALL STAFF

'Code of Conduct'

Objective, Scope and Principles

This Code of Conduct, which applies to all staff and volunteers, is designed to give guidance on the standards of behaviour which should be observed. School staff and volunteers are role models, in a unique position of influence and trust and their behaviour should set a good example to all the pupils within the school.

It does not form part of any employee's contract of employment. It is merely for guidance and specific breaches of the Code must not be viewed as a disciplinary offence.

The protection and promotion of the welfare of children and young people is a responsibility for all members of staff, Teaching and Non-Teaching. In meeting this, staff should work towards a culture of mutual trust and respect in school through which the best interests of the children and young people entrusted to their care is paramount.

Naturally, implicit in this is the assumption that the conduct of school staff towards their pupil group must be above reproach. This holds true whatever the age, gender, or developmental maturity of the pupils, but clearly the younger the child, or the greater the degree of learning difficulties he/she has, the less likely it will be that he/she will be able to recognise and respond appropriately to an abuse by any member of staff or the trust that his/her position confers.

Adherence to the Code will reduce the risk of allegations being made. We will adapt and update the Code to meet our individual needs, and the contents have been agreed with both Teaching and Non-Teaching staff.

The Code of Conduct is not intended to detract from the enriching experiences children and young people gain from positive interaction with staff within our school. Rather, it is intended to assist our staff by drawing attention to the areas of risk for themselves and by offering guidance on conduct. The Code of Conduct is referred to in the school's child protection/pastoral care policy and is made known to parents via the school App and Website.

The Code cannot address every possible circumstance in which staff might find themselves, however it is intended that staff will be mindful of the Code which will raise awareness of issues and situations which can potentially arise. In all circumstances, employees' professional judgement will be exercised and for the vast majority of employees this Code of Conduct will serve only to confirm what has always been their safe practice.

The 'Code' is also intended to assist staff in respect of the complex issue of child abuse, by drawing attention to the areas of risk for staff and by offering guidance on prudent conduct. It is built on the premise that staff must always be mindful of the fact that they hold a position of trust, and that their behaviour towards the children and young people in their charge must be above reproach.

The 'Code of Conduct' which extends to staff, both Teaching and Non-Teaching, and volunteers includes:

- Setting an example;
- Relationships and attitudes;
- Private meetings with pupils;
- Physical contact with pupils/Restraint;
- Honesty and integrity;
- Conduct outside of work;
- E-Safety and internet use; and
- Confidentiality
- Intimate Care

Setting an Example

All staff and volunteers in schools set examples of behaviour and conduct which can be copied by pupils. Staff and volunteers should therefore, for example, avoid using inappropriate or offensive language at all times, and demonstrate high standards of conduct in order to encourage our pupils to do the same. All staff and volunteers should be familiar with all school policies and procedures and to comply with these so as to set a good example to pupils.

Staff and volunteers must always comply with statutory requirements in relation to such issues as discrimination, health and safety and data protection.

Relationships and Attitudes

All staff and volunteers should treat pupils with respect and dignity and not in a manner which demeans or undermines them, their parents or carers, or colleagues. Staff and volunteers should ensure that their relationships with pupils are appropriate to the age and maturity of their pupils. They should not demonstrate behaviours that may be perceived as sarcasm, making jokes at the expense of pupils, embarrassing or humiliating pupils, discriminating against or favouring pupils. Attitudes, demeanour and language all require thought to ensure that conduct does not give rise to comment or speculation. Relationships with pupils must be professional at all times and sexual relationships with current pupils are not permitted and may lead to criminal conviction.

Staff and volunteers may have less formal contact with pupils outside of school; perhaps through mutual membership of social groups, sporting organisations, or family connections. Staff and volunteers should not assume that the school would be aware of any such relationship and should therefore consider whether the school should be made aware of the connection.

Staff and volunteers should always behave in a professional manner, which within the context of this Code of Conduct includes such aspects as:

- acting in a fair, courteous and mature manner to pupils, colleagues and other stakeholders;
- co-operating and liaising with colleagues, as appropriate, to ensure pupils receive a coherent and comprehensive educational service;
- respect for school property;

- taking responsibility for the behaviour and conduct of pupils in the classroom and sharing such responsibility elsewhere on the premises;
- being familiar with communication channels and school procedures applicable to both pupils and staff and volunteers;
- respect for the rights and opinions of others.

Private Meetings with Pupils

It is recognised that there will be occasions when confidential interviews with individual pupils must take place. As far as possible, staff and volunteers should conduct interviews in a room with visual access or with an open door and ensure that another adult knows that the interview is taking place. Where possible, another pupil or (preferably) another adult should be present or nearby during the interview.

Physical Contact with Pupils (see also school 'Policy on the Use of Reasonable Force')

To avoid misinterpretations, and so far, as is practicable, staff and volunteers are advised not to make unnecessary physical contact with a pupil.

Staff and volunteers should therefore be cognisant of the guidance issued by the Department on the use of reasonable force (Circular 1999/09 and guidance document 'Towards a Model Policy in Schools on Use of Reasonable Force') which our own Policy on the Use of Reasonable Force emanates from.

Staff should not feel inhibited from responding to the needs of the child and offering comfort as a caring parent would provide. However, this should only occur when the child is in agreement.

Restraint (see also school 'Policy on the Use of Reasonable Force')

Staff should only use reasonable force and adhere to the school's 'Policy on the Use of Reasonable Force' when absolutely necessary:

- a. To prevent injury to the child, other children, themselves or another member of staff.
- b. To prevent damage to school property.
- c. To prevent the commission of an offence.
- d. The rights of a member of staff to use reasonable force to restrain a pupil applies on the premises of the school or elsewhere at a time when he/she has lawful control or charge of the pupil concerned.
- e. Staff should inform the Principal/ Associate Principal after any incident where reasonable force has been used and record the incident on the appropriate form (RF1) – see Use of Reasonable Force Policy.
- f. There should be a written account made of the incident in order to prevent any misunderstanding or misinterpretation. The account should include the names of those involved, when and where the incident took place, names of witnesses, a brief account of the steps taken to defuse the situation and the outcome of the incident.

Honesty and Integrity

All staff and volunteers are expected to maintain the highest standards of honesty and integrity in their work. This includes the handling and claiming of money and the use of school property and facilities. Gifts from suppliers or associates of the school (eg a supplier of materials) must be declared to the Principal/ Associate Principal. A record should be kept of all such gifts received. This requirement does not apply to “one off” token gifts from pupils or parents eg at Christmas or the end of the school year. Staff and volunteers should be mindful that gifts to individual pupils may be considered inappropriate and could be misinterpreted.

Conduct outside of Work

Staff and volunteers should not engage in conduct outside work which could damage the reputation and standing of the school or the staff/ volunteer’s own reputation or the reputation of other members of the school community.

Staff and volunteers may undertake work outside school, either paid or voluntary and should ensure it does not affect their work performance in the school.

Advice should be sought from the Principal/ Associate Principal when considering work outside the school.

E-Safety and Internet Use (see also Internet-Safety Policy)

A staff member or volunteer’s off-duty hours are their personal concern, but all staff and volunteers should exercise caution when using information technology and be fully aware of the risks to themselves and others. For school-based activities, advice is contained in the school’s Internet Safety Policy as follows:

- a. Staff and volunteers must exercise caution when using information technology and be aware of the risks to themselves and others. Regard should be given to the schools’ Internet Safety and ICT Acceptable Use Policy at all times.
- b. Staff and volunteers must not engage in inappropriate use of social network sites which may bring themselves, the school, school community or employer into disrepute. Staff should ensure that they adopt suitably high security settings on any personal profiles they may have.
- c. Staff should exercise caution in their use of all social media or any other web-based presence that they may have, including written content, videos or photographs, and views expressed either directly or by ‘liking’ certain pages or posts established by others.
- d. Contact with students should only be made via the use of school email accounts or telephone equipment when appropriate.
- e. Photographs/stills or video footage of students should only be taken using school equipment, for purposes authorised by the school. Any such use should always be transparent and only occur where parental consent has been given. The resultant files from such recording or taking of photographs must be stored in accordance with the school procedures.
- f. Teachers should supervise access to Internet resources (where reasonable) through the school’s fixed and mobile internet technology.
- g. Teachers will preview any recommended sites before use.
- h. Raw image searches are discouraged when working with pupils.

- i. If Internet research is set for homework, specific sites will be suggested that have previously been checked by the teacher. It is advised that parents re-check these sites and supervise this work. Parents will be advised to supervise any further research.

Personal Mobile Devices

The school allows staff to bring in personal mobile phones and devices for their own use. Under no circumstances does the school allow a member of staff to contact a pupil or parent/ carer using their personal device.

- a. The sending of inappropriate text messages between any member of staff is not recommended for obvious reasons.
- b. Permission must be sought before any image or sound recordings are made on these devices of any member of staff.
- c. Staff bringing personal devices into school must ensure there is no inappropriate or illegal content on the device.

Staff and volunteers should exercise particular caution in relation to making online associations/friendships with current pupils via social media and using texting/email facilities to communicate with them. It is preferable that any contact with pupils is made via the use of school email accounts or telephone equipment when necessary.

Photographic Images

- a. With the written consent of parents, on behalf of the pupils, the school permits the appropriate taking of images by staff and pupils with school equipment.
- b. Staff are not permitted to use personal digital equipment, such as mobile phones and cameras, to record images of pupils, this includes when on field trips. However, with the express permission of the Principal/ Associate Principal, images can be taken provided they are transferred immediately and solely to the school's network and deleted from the staff device.

Confidentiality

Staff and volunteers may have access to confidential information about pupils including highly sensitive or private information. It should **not** be shared with any person other than on a need-to-know basis. In circumstances where the pupil's identity does not need to be disclosed the information should be used anonymously.

There are some circumstances in which a member of staff or volunteer may be expected to share information about a pupil, for example when abuse is alleged or suspected. In such cases, individuals should pass information on without delay, but only to those with designated child protection responsibilities.

If a member of staff or volunteer is in any doubt about whether to share information or keep it confidential, he or she should seek guidance from a senior member of staff. Any media or legal enquiries should be passed to senior leadership (Principal/ Associate Principal or Senior teacher).

Staff and volunteers need to be aware that although it is important to listen to and support pupils, they must not promise confidentiality or request pupils to do the same under any circumstances. Additionally, concerns and allegations about adults should

be treated as confidential and passed to the Principal/ Associate Principal or a member of the Safeguarding Team without delay.

Handling Conversations of a Sensitive Nature

Staff should:

- a. Listen and accept information.
- b. Take notes, explaining to the child why you are doing so.
- c. Reassure the child.
- d. Not make promises about the future.
- e. Refer the conversation to the Safeguarding Team.

Intimate Care and SEN – see also Intimate Care Policy

You may be required to provide intimate care for children who have special educational needs. The following guidelines must be followed:

- a. Ensure permission has been obtained from parents to change children. If possible, ensure that you are accompanied by another staff member. Members of staff will sign and date the 'Intimate Care Record Sheet'.
- b. Encourage children, where possible, to change their own clothes, while talking them through the process.
- c. Ensure as much privacy is afforded to the child as possible.

Intimate Care & other Pupils

It may be necessary for staff to do things of a personal nature for younger children and indeed older children in their care. Children may be upset and need reassurance after a toileting accident and need to have their clothes changed. To fail to do these things for any child would be negligent. In order to safeguard the child and protect staff, the following procedures will be adhered to at all times:

- a. Children will be encouraged to adjust clothing, etc. themselves when using the toilet.
- b. When taking a child to the toilet, the adult will inform another member of staff who if possible, should accompany them.
- c. Children who wet their clothes after a toileting accident will be given clean replacements and encouraged to change themselves as much as possible.
- d. If a child soils themselves, their previously given contacts will be telephoned in the order of preference given, to request that they are changed by a parent or another adult who has the parents' consent to clean and change the child.
- e. In all toileting accidents, the child's parent/s will be informed by preferably the Class Teacher or the Classroom Assistant /School Secretary.

Conclusion

It would be impossible and inappropriate to lay down hard and fast rules to cover all the circumstances in which staff interrelate with children and young people, or where opportunities for their conduct to be misconstrued might occur. It is therefore important that staff exercise judgement and seek advice if unsure about a situation. If employees have any doubts about the guidance outlined in this booklet, or how they

should act in particular circumstances, they should consult with the Principal/ Associate Principal or a representative of their professional association.

From time to time, it is prudent for all staff to reappraise their teaching styles, relationships with children/young people and their manner and approach to individual children/young people, to ensure that they give no grounds for doubt about their intentions. In all circumstances teachers' professional judgement will be exercised and for the vast majority of teachers this Code of Conduct confirms what has always been best practice.

Date Ratified by BoG: _____

Review Date: _____

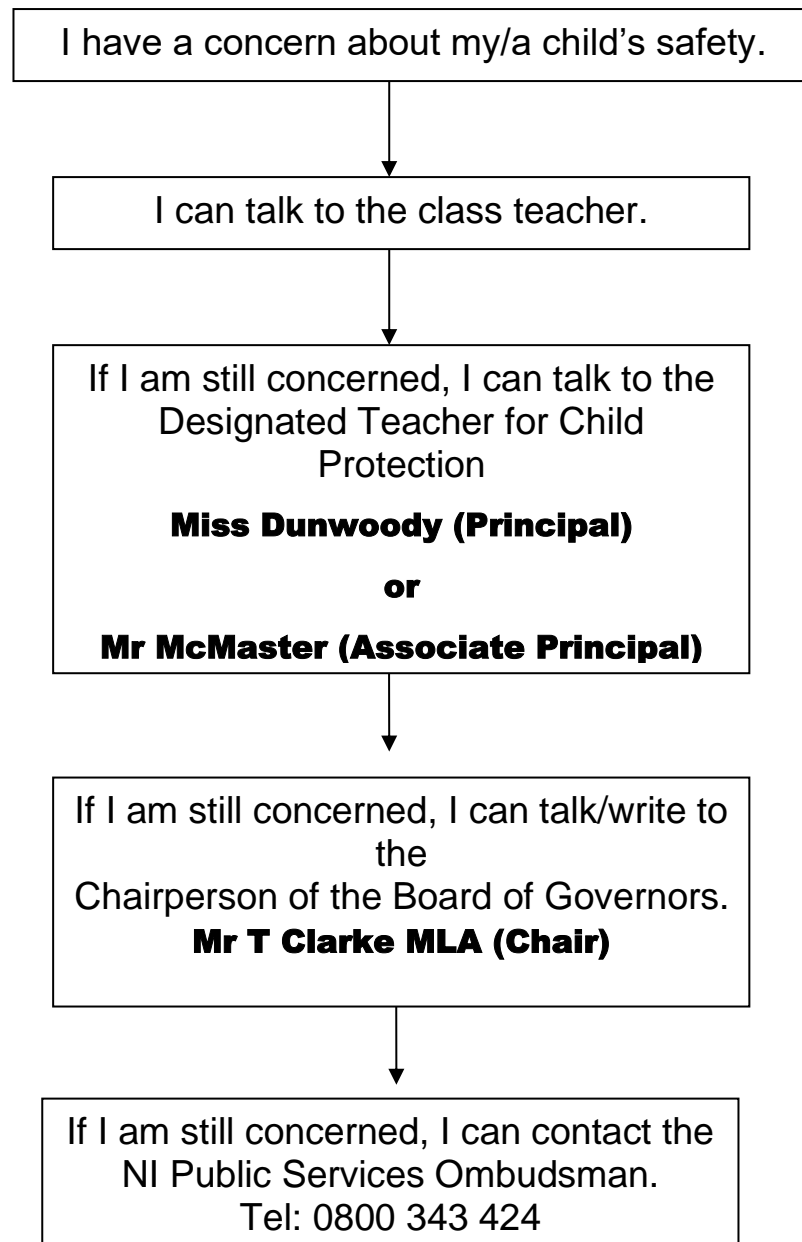
APPENDIX 2
CODE OF CONDUCT (VISITORS)

All visitors must:

1. Report immediately to the School Office
2. Read the Code of Conduct and sign the Visitors' book.
3. Wear a 'Visitor' Badge – clearly visible.
4. Wait until you can be escorted to a work area or the person to be visited.
5. Knock the door before entering an office/classroom and explain the reason for your visit.
6. Never be alone with a child.
7. Never initiate a conversation with a child.
8. Never have physical contact with a child.
9. Never swear on the premises.
10. Never smoke on the premises.
11. Never bring nuts or foods containing nuts of any kind onto the premises.
12. Take precautions to ensure that any equipment you may have with you is safely and securely stored so pupils do not have access.
13. Report any incidents immediately to:
 - Designated Teachers – Miss L Dunwoody or Mr T McMaster
 - Deputy Designated Teachers – Mrs J Brown or Mrs P Davison

APPENDIX 3

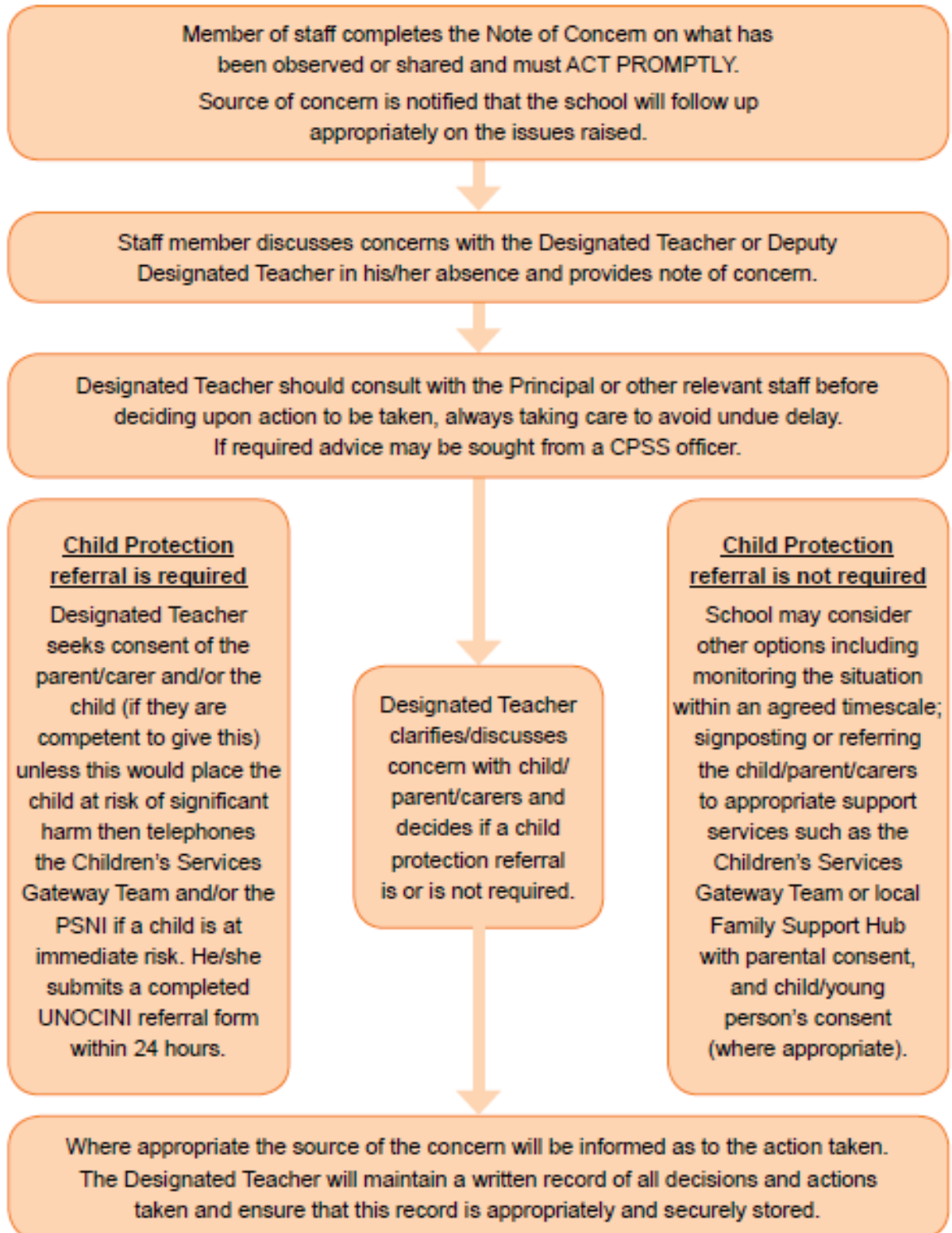
Procedure for Parents who wish to raise a Child Protection Concern



**At any time, a parent can talk to a social worker at the Gateway Team (Northern Trust) Tel: 0300 1234 333
or the
PSNI Central Referral Unit (CRU) – Tel: 101
Email: cru@psni.police.uk**

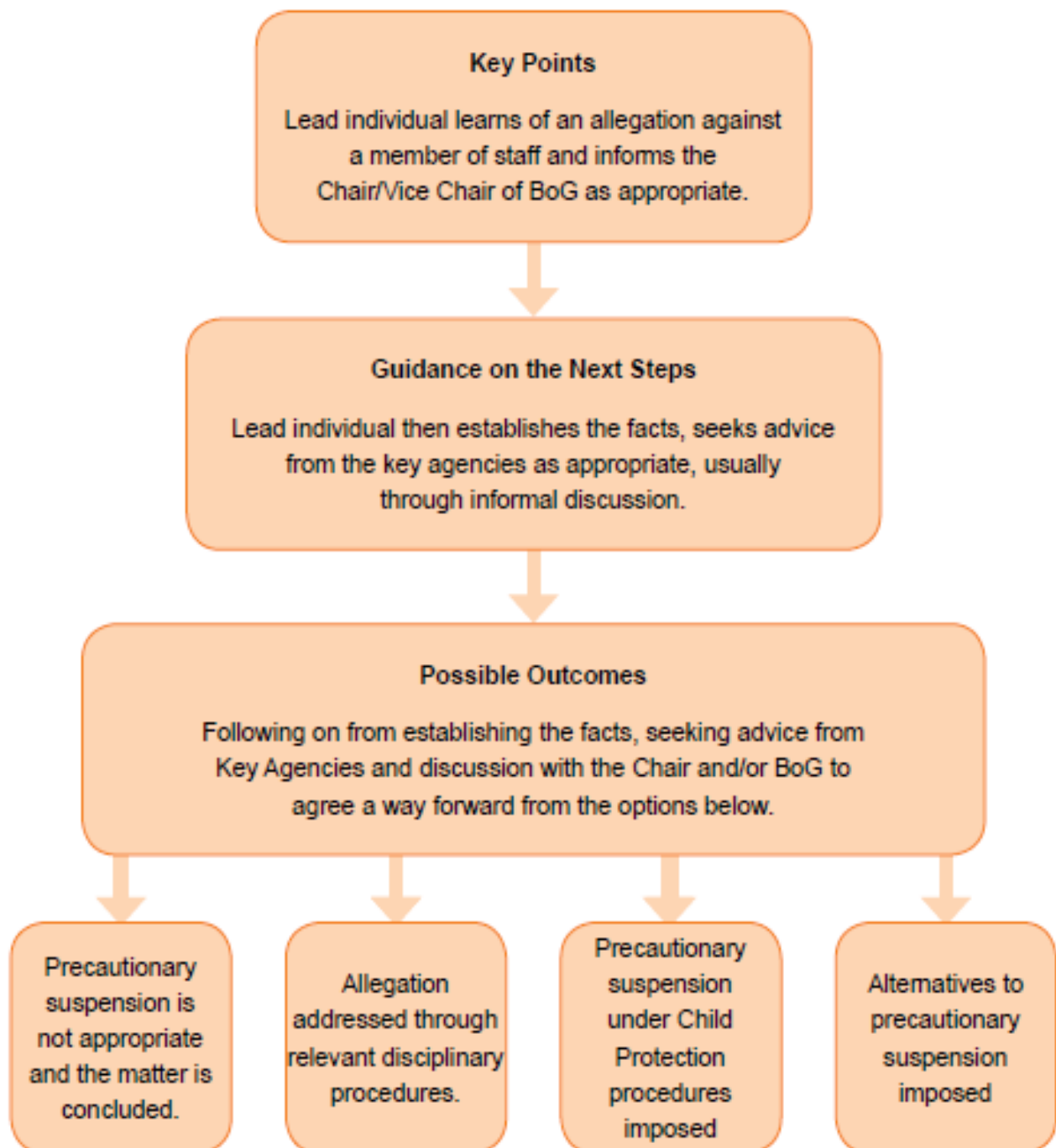
APPENDIX 4

Procedure where the School has concerns, or has been given information, about possible abuse by someone other than a member of staff^{7,8}



APPENDIX 5

Dealing with Allegations of Abuse Against a Member of Staff^{9,10}



APPENDIX 6

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 about Domestic Abuse Sharing with Schools, etc Regulations (NI) 2022 can be found by following the link to: <https://www.legislation.gov.uk>

APPENDIX 7

OUT OF SCHOOL ACTIVITIES/SCHOOL VISIT - SAMPLE

Consent Form

School Name: _____

Date: _____

I consent to my son/daughter* _____ (Name in full)

taking part in the educational visit to be held on _____

I confirm to the best of my knowledge that he/she* is medically fit to participate.

Please give details of:

1. Any current medical condition

2. Post Medical Condition (e.g. following a medical procedure or illness)

3. Any medication being taken

4. Any other relevant information which may affect his/her participation in the visit
(including allergy or dietary requirements)

5. Emergency contact numbers:

+	i) Name (parent)	_____	Work:	_____
			Mobile:	_____
	ii) Name (parent)	_____	Work:	_____
			Mobile:	_____
	iii) Name (next of kin)	_____	Work:	_____
			Mobile:	_____ <input type="checkbox"/>

I accept the established code of conduct for the educational visit and agree to the arrangements relating to my son/daughter returning home from the visit due to unforeseen circumstances.

I agree to my son/daughter receiving emergency medical treatment, including anesthetic/blood transfusion, as considered necessary, by the medical authorities present. I understand the extent and limitations of the insurance cover provided.

Signed _____ (Parent/Guardian) Date _____

The information on this form is requested for the purpose of organising an educational visit. The information is covered by the provisions of the Data Protection Act, 1998. Your signature to the form is deemed to be an authorisation by you to allow the school to process and retain the information for the purpose(s) stated.

APPENDIX 8
CREAVERY PRIMARY SCHOOL
GDPR Consent Form for Use of Photographs & Digital Images

Dear Parent,

The use of photographs & digital/video images plays an important part in school activities. Pupils and members of staff may use digital technology to record evidence of activities in lessons in and out of school. These images may then be used in presentations in subsequent lessons.

We believe that celebrating the achievement of children in school is an important part of their learning experience and personal development. Taking photographs/videos of pupils for internal display and displaying pupil work enables us to celebrate individual and group successes as a school community.

Images may also be used to showcase work or celebrate success through their use in classroom and corridor displays, publication in newsletters, on the school website, Facebook pages, the school app and occasionally in the public media.

Creavery P.S. will comply with the General Data Protection Regulation (GDPR) and will not take or publish images of pupils unless explicit consent has been provided by parents. We are also acutely aware of the importance of e-safety in today's society and children's full names will not be published externally with their photographs, but may be published internally (for example, on display with their work).

N.B. Parents/carers are welcome to take videos and digital images of their children at school events (eg. Sports Day, Christmas Celebration, school drama productions etc.) for their own personal use. To respect everyone's privacy and in some cases protection, these images **should not be published/made publicly available on social networking sites, nor should parents/carers comment on any activities involving other pupils in the digital/video images.**

By signing below, you are providing consent for Creavery Primary School to use both hard-copy and digital images (including video) in accordance with how you have completed the tables below in:

- all school publications, on the School App, Website, and on school social media pages;
- in newspapers as approved by the school;
- in videos made by the school or in class for school assemblies/projects etc.

Please read below & tick your preferences before signing and dating the bottom of the form. Please return this form to the school office before <DATE>.

I provide specific consent for photographs or digital images of my child to be used as follows:

Use	Yes	No
Using your child's photograph in printed publications by Creavery P.S. This will include the school prospectus, promotional brochures and advertisements etc.		
Using your child's photograph and video footage on our official School App & Website and on our official school's partnership apps & websites e.g. Shared Education, P.T.A. etc.		
Using your child's photograph and video footage on our official Facebook pages (inc. P.T.A.)		
Using your child's photo for publication in approved newspapers		
Using photographs and videos of your child within school, and displaying these publicly within the school, as part of the curriculum, assemblies and in class		
Using videos of your children to share good practice with professionals from other schools		
Pupil's Name:	Parent Signature:	Date:

This consent form covers consent for the duration of your child's time at the school. If your circumstances change, the onus is on you to inform the school. Once your child leaves the school, photographs and videos may be archived within the school but will not be published without renewed consent.

Yours sincerely



Associate Principal - T R McMaster B.Ed. MBE

APPENDIX 9
Acceptable Use Agreement
for
Staff, Governors & Visitors

ICT and the related technologies such as email, the internet and mobile devices are an expected part of our daily working life in school. This policy is designed to ensure that all members of staff are aware of their professional responsibilities when using any form of ICT. All members of staff are expected to sign this policy and adhere at all times to its contents. Any concerns or clarification should be discussed with the school's UICT/ E-Safety Co-ordinator (**Miss C Welsh**) and/or Principal/Associate Principal.

- I will only use the school's email / Internet / Intranet / Learning Platform and any related technologies for professional purposes or for uses deemed 'reasonable' by the Principal/Associate Principal or Governing Body.
- I will comply with the ICT system security and **not** disclose any usernames and/or passwords to anyone else (**including other staff members or pupils**) that have been provided to me by the school or other related authorities.
- I will ensure that all electronic communications with pupils and staff are compatible with my professional role.
- I will not give out my own personal details, such as mobile phone number and personal email address, to pupils without the prior permission of the Principal/Associate Principal or Governing Body.
- I will only use the approved, secure (C2K) email system(s) for any school business.
- I will ensure that personal data (such as data held on SIMS) is kept secure and is used appropriately, whether in school, taken off the school premises or accessed remotely. Personal data can only be taken out of school or accessed remotely when authorised by the Principal/Associate Principal or Governing Body.
- I will not browse, download, upload or distribute any material that could be considered offensive, illegal or discriminatory.
- Images of pupils and/ or staff will only be taken, stored and used for professional purposes in line with school policy and with written consent of the parent, carer or staff member. Images will not be distributed outside the school network without the permission of the parent/ carer, member of staff or Principal/Associate Principal.

- I understand that all my use of the Internet and other related technologies can be monitored and logged and can be made available, on request, to the Principal/Associate Principal. The C2K system tracks all Internet use and records the sites visited. The system also logs emails and messages sent and received by individual users.
- I will respect copyright and intellectual property rights.
- I will ensure that my online activity, both in school and outside school, will not bring my professional role into disrepute.
- I will support and promote the school's e-Safety policy and help pupils to be safe and responsible in their use of ICT and related technologies.
- I will supervise pupils when they are accessing the Internet. I will check websites before allowing pupils to use them to ensure there is no unsuitable content and that material is age appropriate.
- I will not leave any computer 'logged on' with my personal details whereby others may have access to my e-mail account or the internet with 'staff enabled' internet rights.
- I will report deliberate/accidental access to inappropriate materials or any other breaches of the school code of practice immediately to the Principal/Associate Principal / UICT Co-ordinator.
- I will make pupils aware of the rules for the safe and effective use of the Internet. These will be displayed in the classroom and discussed with pupils.
- I will adhere to the school's 'Social Networking Policy.'
- I will not use the school systems for commercial transactions unless deemed 'reasonable' by the Principal/Associate Principal or Governing Body.

User Agreement/Signature:

I agree to follow this Code of Conduct and to support the safe use of ICT throughout the school.

Staff Name:

Signature..... Date.....

Full Name.....
(Printed)

Position.....

Updated –September 2025

APPENDIX 10

ACCESS TO THE INTERNET (PUPILS)

CREAVERY P.S.



Using the Internet P3-P7 Pupil Agreement

I promise that I will use the Internet sensibly and will not use it for the following purposes:

1. Searching, viewing and/or retrieving materials that are not related to my work in school.
2. Playing computer games or using interactive chat sites unless the teacher has asked me to do so.
3. Publishing, sharing or giving out personal information about a user (such as home address, e mail address, phone number, etc.)
4. Any activity that breaks a school code.
5. Using another user's password.
6. Use of obscene, racist or offensive language.
7. Insulting or bullying other people on-line.
8. Subscribing to any services or ordering any goods.

I know that my teachers can look at the sites I have visited, and messages sent or received and if I don't use it properly my internet privileges will be suspended.

I know that if something inappropriate happens while I'm using the Internet such as someone that I don't know asking me for my name and address I need to tell an adult immediately.

Pupil's Name: _____

Pupil's Signature: _____

Parent/Guardian's Signature: _____

Date: _____

ACCESS TO THE INTERNET (P3-P7 PUPIL & PARENT AGREEMENT)

<Date>

Dear Parent/Guardian,

ICT, including the internet, email and mobile technologies etc. has become an important part of learning in our school. We expect all children to be safe and responsible when using any form of ICT.

The next Safer Internet Day (SID) will take place on 10th February 2026, with a theme of “**Smart tech, safe choices – Exploring the Safe and Responsible use of AI**”. You can support us in this future initiative by visiting <https://saferinternet.org.uk/safer-internet-day/safer-internet-day-2026> alongside your child(ren).

Please read and discuss our own e-Safety rules (Pupil Agreement attached) with your child and return the slip below as well as the signed ‘Pupil Agreement’ to school on or before <date>. If you have any concerns or would like some explanation, please contact the ICT/e-Safety Co-ordinator, Miss Welsh, or the Principal (028-9446 6915).

I would also ask you to read the enclosed Internet Policy of Creavery Primary School and the advice that has been given within it. You will realise that your child will be able to access telecommunications networks throughout the world using the Internet. You will understand that this access is designed and intended as an educational tool to enhance learning and teaching and that your child will receive instruction in the appropriate use of this resource.

Please realise that the internet contains material that is sometimes inappropriate for school purposes and by signing the agreement you support Creavery Primary School, in explaining to your child that they are responsible for not intentionally accessing such material. Please acknowledge that unacceptable use of the Internet may result in the temporary suspension or withdrawal of privileges and that you will not hold Creavery Primary School accountable for unsuitable materials acquired by him/her through Internet usage at school.

Yours sincerely



*T.R. McMaster MBE B.Ed
Associate Principal*

✕.....
Creavery Primary School - Acceptable Use Agreement

Parent/Guardian signature

We have discussed this document and (child’s name) agrees to follow the e-Safety rules and to support the safe use of ICT at Creavery Primary School.

Parent/Carer Signature :

Class Date

APPENDIX 11
Creavery P.S.
Request for School to Administer Medication

Form 2

Request by Parent for School to Administer Medication.

Form 2 for parents to complete if they wish the school to administer medication

The school will not give your child medicine unless you complete and sign this form, and the Principal/Associate Principal has agreed that school staff can administer the medication

Details of Pupil

Surname:

Forename(s)

Address:

M/F: _____

Date of Birth: _____

Class/Form: _____

Condition or illness:

Medication

Name/ Type of medication (as described on the container)

For how long will your child take this medication:

Date dispensed: _____

Full direction for use:

Dosage and method:

Timing: _____

Special precautions:

Side effects:

Self-administration:

Yes/No

Procedures to take in an Emergency:

Contact Details

Name:

Daytime Telephone No:

Relationship to Pupil:

Address:

I understand that I must deliver the medicine personally to (agreed member of staff) and accept that this is a service which the school is not obliged to undertake.

Date: _____ Signature(s):

Relationship to pupil:

Form 3

School's Agreement to Administer Medication.

Form 3 for schools to complete and send to parent if they agree to administer medication to a named child.

I agree that ***(name of child)*** will receive ***(quantity and name of medicine)*** every day at ***(time medicine to be administered e.g. lunchtime or afternoon break)***. ***(Name of child)*** will be given/ supervised whilst he/she take their medication by ***(name of member of staff)***. This arrangement will continue until ***(either end date of course of medicine or until instructed by parents)***.

Date: _____

Signed: _____ (The Principal/Named
Member of Staff

APPENDIX 12

**CHANGING PROCEDURES FOR CHILDREN WITH SPECIAL
EDUCATIONAL NEEDS**

Parental consent for Intimate Care

I have read the school's policy on intimate care and give permission for a member of staff or vetted volunteer to deal with my child/children whenever necessary. I understand that intimate care can include:

- Toileting
- Feeding
- Oral care
- Washing
- Changing clothes
- First aid and medical assistance
- Supervision of a child involved in intimate self-care

Names of children for whom my permission is given:

Parent's Signature _____

Date _____

Creavery Primary School

Informing Parents Intimate Care Has Taken Place

Dear _____

Today your child _____ required intimate care. This was carried out in accordance with our school policy, i.e. in the presence of a witness and with respect for the privacy, needs and wishes of the child. When given appropriate attention, the child then continued happily with the school day.

Please talk to your child about the incident and contact school if you have any concerns.

Parent/Carer: _____

Witness: _____

Date: _____

Please wash and return any change of clothing.

Comments:

Creavery Primary School
Informing Parents Intimate Care Has Taken Place
Due to a Fall in School

Dear _____

Today your child _____ required intimate care due to a fall in school. This was carried out in accordance with our school policy, i.e. in the presence of a witness and with respect for the privacy, needs and wishes of the child.

Comments regarding care given _____

Please talk to your child about the incident and contact school if you have any concerns.

Parent/Carer: _____

Witness: _____

Date: _____

Parent please sign:

I acknowledge care given to my child

Signed _____

APPENDIX 13

GUIDELINES FOR VOLUNTEERS

Volunteers have an important and beneficial role in supporting the work of teachers and other support staff in Creavery Primary School and in contributing, by their efforts and initiative, to the life of the school.

It is essential however, that appropriate steps are taken, through screening and selection arrangements, to ensure that children are not placed at risk through allowing the unsupervised and unmanaged access of unsuitable adults to the school.

Who is a Volunteer?

A volunteer is an individual who, subject to the satisfactory procedures below, either

1. Assumes unpaid duties in a school on a regular basis, on more than two occasions
2. Is engaged by the school to accompany or assist in school visits or trips; or to undertake coaching in sports/ music activities.

Formal arrangements as to selection and vetting should not be required for volunteers who are involved outside school hours and who do not have unsupervised contact with pupils. These would include fund raisers, people using school premises for meetings, etc.

Use of Volunteers

There are three main categories into which the use of volunteers might be grouped and to which guidance will apply:

- During school hours involving direct contact with pupils
- Outside school hours involving direct contact with pupils
- During school hours but not usually involving direct contact with pupils

Recruiting and Selecting Volunteers

The school may canvass for volunteers or people may come forward to offer assistance at their own initiative. In many cases potential volunteers may already be known to the school. Others may come forward from the local community. Engagement of volunteers is only undertaken with agreement of the Board of Governors.

Initial Appraisal

As a minimum requirement all potential volunteers are asked to provide the following information:

- personal details
- qualifications and previous work with children
- a declaration that they have never been convicted of a criminal offence or been the subject of a Caution or of a Bound-over Order
- a declaration as to whether they have been investigated by Social Services for child protection

- agree to a criminal record check being carried out
- provide the name of two referees who are not family members or members of staff in the school
- attend an interview with the school Principal with proof of identity
- Undergo an annual criminal record check through Access NI (via Education Authority)
- Child protection form

No individual will be admitted to the school as a volunteer until these basic steps have been completed and the results assessed.

Accepting Volunteers

Where the previous procedures have been followed as appropriate and the school is satisfied that:

- the volunteer is a suitable person to have contact with the children and has the character, skills and experience to support the work of the school in a voluntary capacity;
- well defined and worthwhile activities have been identified for the volunteer to undertake and he/she is competent to undertake them;

The school will notify the individual that he/she has been accepted for voluntary duties in the school

The use of Volunteers

These are the fundamental principles observed when using volunteers:

- the purpose of the volunteer is to assist staff, whether teaching or non-teaching. They are not used as substitutes either to cover activities normally undertaken by paid staff who are absent, or to release such staff to undertake other duties:
- volunteers only work under the supervision and guidance of paid staff and these arrangements should be such as to minimise the opportunities for direct, unsupervised, access to children;
- volunteers are not placed in a position of sole responsibility for the security of children, premises or equipment;
- volunteers should understand the tasks they are to undertake and receive appropriate training to enable them to perform these;
- volunteers are only allocated duties after consultation and agreement with the teacher or other member of staff with whom the volunteer will be closely involved. Teachers are not to be placed under any pressure to accept a volunteer in their classroom;
- volunteers are not afforded access to records or other information relating to staff or pupils. An exception might be made where a child has a medical or other condition of which all those working with the pupil should be made aware, and where agreement of the parent has been sought.

Health and Safety Insurance

Volunteers are owed a duty of care under the requirements of Health and Safety Legislation. Creavery Primary School therefore ensures that volunteers are treated no less favourably than paid employees in terms of Creavery Primary Schools' obligations under the legislation.

Duration

Creavery Primary School places a time limit on the period of the volunteer's service. This is done where the work earmarked for the volunteer is likely to be completed within a specific period. Where a volunteer's involvement is likely to be long term, the school advises the volunteer that he/she will be subject to a trial period, during which the Principal monitors the volunteer's effectiveness in contributing to the life and work of the school.

Information and Training

The school ensures that the volunteer receives such information, guidance, preparation and where necessary, training to enable him/her to perform tasks effectively. As a minimum, volunteers are briefed on:

- the policy of the school and the management authority in relation to pastoral care and child protection, including its positive behaviour policy, including rewards and sanctions, and the extent of the volunteer's authority within it and its child protection procedures
- Creavery Primary School's Health and Safety Policy

Arrangements are made for the volunteer to have a formal line of communication to the Principal for reporting issues of concern or the welfare of the children in the school.

School Security

Creavery Primary School has drawn on the advice from the guidance Document "Security and Personal Safety in Schools" (October 2018) to establish arrangements for the admission and supervision of volunteers on school premises. Particular attention is drawn to:

- The volunteer registering at the beginning of each visit and signing out on departure.

CREAVERY PRIMARY SCHOOL APPRAISAL OF POTENTIAL VOLUNTEERS

Anyone wishing to support the Staff and pupils of Creavery Primary School as a Volunteer should complete this form and forward it to the Associate Principal/Principal for consideration by the Board of Governors

PERSONAL DETAILS:

Title (*Mr. Mrs. Ms. Miss etc.*) _____

Full Name _____

Date of Birth _____

Address

Post Code _____

Contact Telephone
Number(s) _____

What link(s) do you have with Creavery Primary School?

EXPERIENCE:

Please indicate any **qualifications** you may have and **any previous work with children**.

Qualifications:

Previous work with children:

Please **turn over** to complete the section relating to **CHILD PROTECTION**.

Child Protection:

Have you at any time been convicted of a criminal offence or been the subject of a caution or of a Bound-Over Order? YES/NO

Have you ever been investigated by Social Services for Child Protection? YES/NO

Would you agree to a criminal record check being carried out? YES/NO

NB While acting as a volunteer you would be required to undergo a criminal record check through Access NI (via Education Authority)

INTERVIEW:

An interview with the Principal or Associate Principal will be arranged. To this you must bring **proof of your identity** (e.g. passport, driving licence).

Please provide names and contact details of **two referees** who should not be family or members of the Staff in Creavery Primary School.

REFEREE 1	REFEREE 2
Name _____	Name _____
Address _____	Address _____
_____	_____
_____	_____

Signed: _____

Date: _____

Thank you for your interest in volunteering at Creavery Primary School

Volunteer

Confidentiality Agreement

I _____ understand that in my role, as a volunteer in Creavery Primary School, I must adhere to the school's Child Protection Policy and Procedures.

I agree that:

- If anything is disclosed to me, I will report it immediately to Mr T McMaster, Associate Principal, Mrs P Davison or Mrs J Brown Deputy Designated Teachers.
- I will avoid putting myself in a position of being left on my own with any individual child.
- I will respect every child's right to confidentiality and not discuss any child with whom I come into contact.

Signed _____ Date _____

APPENDIX 14
Child Protection Record – ‘Note of Concern’

CONFIDENTIAL

NOTE OF CONCERN (Child Protection)

Name of Pupil:
Year Group:
Date, time of incident/disclosure:
Circumstances of incident/disclosure:
Nature of description of concern (Use ‘Body Map Template’ if necessary):
Parties involved, including any witnesses to an event and what was said or done and by whom.

Action taken at time:
Details of any advice sought, from whom and when:
Any further action taken:
Written report passed to Designated/ Deputy Designated Teacher. If 'No' state reason. <div style="float: right; margin-top: 10px;"> <input style="border: 1px solid black; padding: 2px 10px;" type="checkbox"/> Yes <input style="border: 1px solid black; padding: 2px 10px;" type="checkbox"/> No </div>
Date and time of report to the Designated Teacher
Written note from staff member placed on pupil's Child Protection file. If 'No' state reason. <div style="float: right; margin-top: 10px;"> <input style="border: 1px solid black; padding: 2px 10px;" type="checkbox"/> Yes <input style="border: 1px solid black; padding: 2px 10px;" type="checkbox"/> No </div>

Name of member of staff making report

Signature of staff member..... Date:

Signature of Designated Teacher:Date:

Body maps

Name

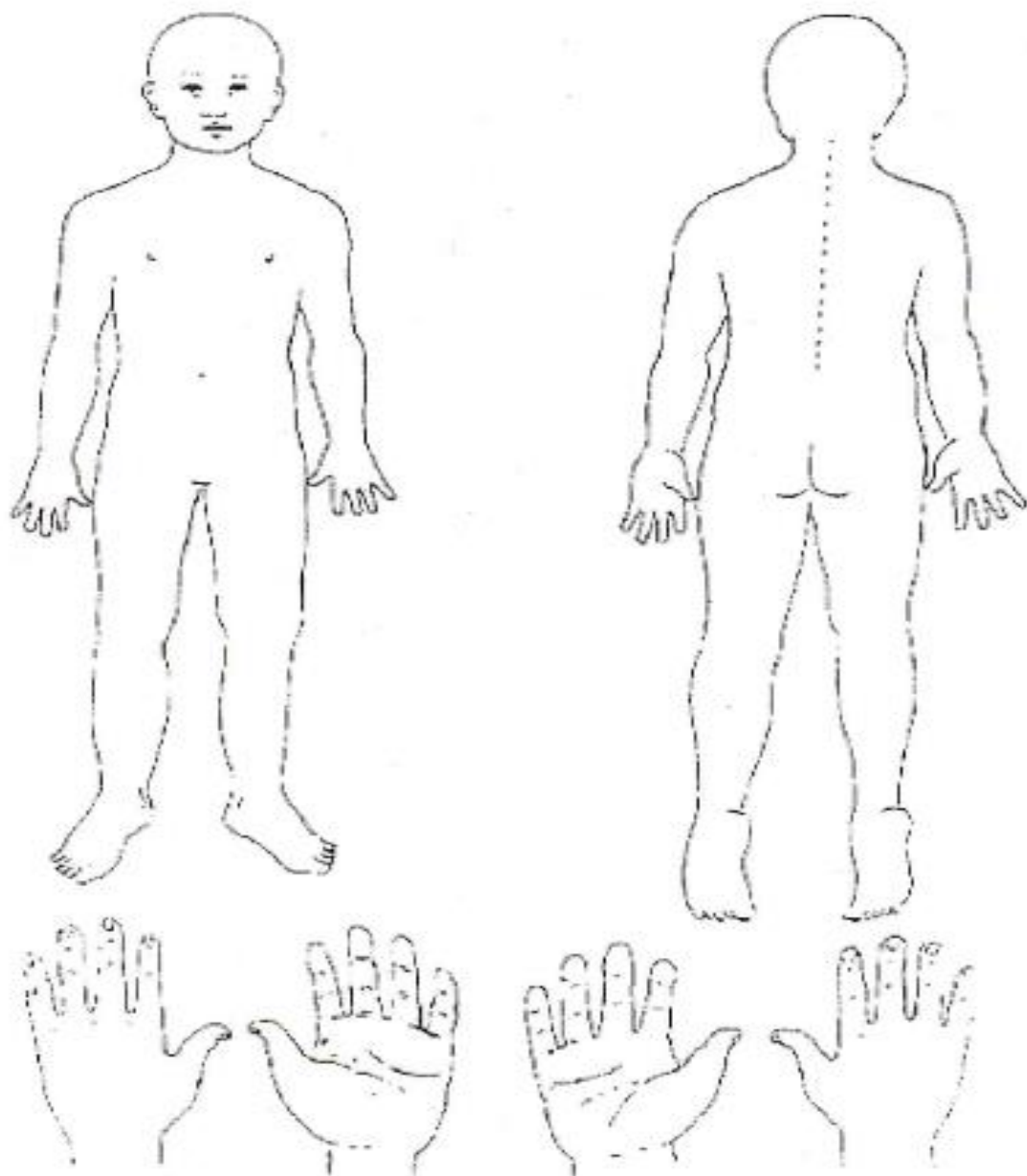
Date of birth



Body maps

Name

Date of birth



Signature

Date

APPENDIX 15

Types of Abuse and Physical/Behavioural Indicators

Signs and Symptoms of Child Abuse

This section contains information for all professionals working with children and families and is not an exhaustive list. The following pages provide guidance only and should not be used as a checklist.

The first indication that a child is being abused may not necessarily be the presence of a severe injury. Concerns may become apparent in a number of ways e.g.

- by bruises or marks on a child's body
- by remarks made by a child, his parents or friends
- by overhearing conversation by the child, or his parents
- by observing that the child is either being made a scapegoat by or has a poor relationship/bond with his parents.
- by a child having sexual knowledge or exhibiting sexualised behaviour which is unusual given his age and/or level of understanding.
- by a child not thriving or developing at a rate which one would expect for his age and stage of development.
- by the observation of a child's behaviour and changes in his behaviour.
- by indications that the family is under stress and needs support in caring for their children.
- by repeat visits to a general practitioner or hospital.

There may be a series of events which in themselves do not necessarily cause concern but are significant, if viewed together. Initially the incident may not seem serious, but it should be remembered that prompt help to a family under stress may prevent minor abuse escalating into something more serious.

It is important to remember that abused children do not necessarily show fear or anxiety and may appear to have established a sound relationship with their abuser(s). Staff should familiarise themselves on 'attachment theory' and its implications for assessing the bond between parents and their children.

Suspicious should be raised by e.g.

- discrepancy between an injury and the explanation
- conflicting explanation, or no explanation, for an injury
- delay in seeking treatment for any health problem
- injuries of different ages
- history of previous concerns or injuries
- faltering growth (failure to thrive)
- parents show little, or no, concern about the child's condition or show little warmth or empathy with the child
- evidence of domestic violence
- parents with mental health difficulties, particularly of a psychotic nature
- evidence of parental substance abuse

Signs and symptoms are indicators and simply highlight the need for further investigation and assessment.

Parental Response to Allegations of Child Abuse Which Raise Concern

Parents' responses to allegations of abuse of their child are very varied. The following types of response are of concern:

- there may be an unequivocal denial of abuse and possible non-compliance with enquiries.
- parents may over-react, either aggressively or defensively, to a suggestion that they may be responsible for harm to their child.
- there may be reluctance to give information, or the explanation given may be incompatible with the harm caused to the child, or explanations may change over time.
- parents may display a lack of awareness that the child has suffered harm, or that their actions, or the actions of others, may have caused harm.
- parents may seek to minimise the severity of the abuse or not accept that their actions constitute abuse.
- parents may fail to engage with professionals.
- blame or responsibility for the harm may be inappropriately placed on the child or an unnamed third party.
- parents may seek help on matters unrelated to the abuse or its causes (this may be to deflect attention away from the child and his injuries).
- the parents and/or child may go missing.

PHYSICAL ABUSE

Children receive bumps and bruises as a result of the rough and tumble of normal play. Most children will have bruises or other injuries, therefore, from time to time. These will be accidental and can be easily explained.

It is not necessary to establish intent to cause harm to the child to conclude that the child has been subject to abuse. Physical abuse can occur through acts of both commission and/or omission.

Insignificant but repeated injuries, however minor, may be symptomatic of a family in crisis and, if no action is taken, the child may be further injured. All injuries should be noted and collated in the child's records and analysed to assess if the child requires to be safeguarded.

If on initial examination the injury is not felt to be compatible with the explanation given or suggest abuse it should be discussed with a senior paediatrician.

A small number of children suffer from rare conditions, e.g. haemophilia or brittle bone disease, which makes them susceptible to bruising and fractures. It is important to remain aware, however, that in such children some injuries may have a non-accidental cause. A "clotting screen" only excludes the common conditions which may cause spontaneous bleeding. If the history suggests a bleeding disorder, referral to a haematologist will be required.

RECOGNITION OF PHYSICAL ABUSE

a) Bruises + Soft Tissue Injuries

Common sites for accidental bruising depend on the developmental stage of the child.

They include:

- forehead
- crown of head
- bony spinal protuberances
- elbows and below
- hips
- hands
- shins

Less common sites for accidental bruising include:

- Eyes
- Ears
- Cheeks
- Mouth
- Neck
- Shoulders
- Chest
- Upper and Inner Arms
- Stomach
- Genitals
- Upper and Inner Thighs
- Lower Back and Buttocks
- Upper Lip and Frenulum
- Back of the Hands.

Non-accidental bruises may be:

- frequent
- patterned, e.g. finger and thumb marks
- in unusual positions, (note developmental level and activity of the child).

Research on aging of bruises (from photographs) has shown that it is impossible to accurately age bruises although it can be concluded that a bruise with a yellow colour is more than 18 hours old. Tender or swollen bruises are more likely to be fresh. It is not possible to conclude definitely that bruises of different colours were sustained at different times.

The following should give rise to concern e.g.

- bruising in a non-mobile child, in the absence of an adequate explanation,
- bruises other than at the common sites of accidental injury for a child of that developmental stage,
- facial bruising, particularly around the eyes, cheeks, mouth or ears, especially in very young children,
- soft tissue bruising, on e.g. cheeks, arms and inner surface of thighs, with no adequate explanation,
- a torn upper lip frenulum (skin which joins the lip and gum),

- patterned bruising e.g. linear or outline bruising, hand marks (due to grab, slap or pinch may be petechial), strap marks particularly on the buttocks or back,
- ligature marks caused by tying up or strangulation.

Most falls or accidents produce one bruise on a single surface, usually a bony protuberance. A child who falls downstairs would generally only have one or two bruises. Children usually fall forwards and therefore bruising is most usually found on the front of the body. In addition, there may be marks on their hands if they have tried to break their fall.

Bruising may be difficult to see on a dark-skinned child. Mongolian blue spots are natural pigmentation to the skin, which may be mistaken for bruising. These purplish-blue skin markings are most commonly found on the backs of children whose parents are darker skinned.

b) Eye Injuries

Injuries which should give cause for concern:

- black eyes can occur from any direct injury, both accidental and non-accidental. Determining how the injury occurred is vital, therefore; bilateral "black eyes" can occur accidentally as a result of blood tracking from a very hard blow to the central forehead (Injury should be evident on mid-forehead, bridge of nose). It is rare for both eyes to be bruised separately, accidentally however and at the same time.
- sub conjunctival haemorrhage
- retinal haemorrhage.

c) Burns and Scalds

Accidental scalds often:

- are on the upper part of the body
- are on a convex (curved) surface
- are irregular
- are superficial
- leave a recognisable pattern.

It can be difficult to distinguish between accidental and non-accidental burns. Any burn or scald with a clear outline should be regarded with suspicion e.g.

- circular burns
- linear burns
- burns of uniform depth over a large area
- friction burns
- scalds that have a line which could indicate immersion or poured liquid
- splash marks
- old scars indicating previous burns or scalds.

When a child presents with a burn or scald it is important to remember:

- a responsible adult checks the temperature of the bath before a child gets into it,
- a child is unlikely to sit down voluntarily in too hot water and cannot accidentally scald his bottom without also scalding his feet,

- "doughnut" shaped burns to the buttocks often indicate that a child has been held down in hot water, with the buttocks held against the water container e.g. bath, sink etc.
- a child getting into too hot water of its own accord will struggle to get out and there are likely to be splash marks,
- small round burns may be cigarette burns but can often be confused with skin conditions. Where there is doubt, a medical/dermatology opinion should be sought.

d) Fractures

The potential for a fracture should be considered if there is pain, swelling and discoloration over a bone or joint or a child is not using a limb, especially in younger children. The majority of fractures normally cause pain, and it is very difficult for a parent to be unaware that a child has been hurt.

The most common non-accidental fractures are to the long bones in the arms and legs and to the ribs. The following should give cause for concern and further investigation may be necessary:

- a history of previous skeletal injuries which may suggest abuse
- skeletal injuries at different stages of healing
- evidence of previous fractures which were left untreated.

e) Scars

Children may have scars from previous injuries. Particular note should be taken if there is a large number of scars of different ages, or of unusual shapes or large scars from burns or lacerations that have not received medical treatment.

f) Bites

Bites are always non-accidental in origin; they can be caused by animals or human beings (adult/child); a dental surgeon with forensic experience may be needed to secure detailed evidence in such cases.

g) Other Types of Physical Injuries

- poisoning, either through acts of omission or commission
- ingestion of other damaging substances, e.g. bleach
- administration of drugs to children where they are not medically indicated or prescribed
- female genital mutilation, which is an offence, regardless of cultural reasons
- unexplained neurological signs and symptoms, e.g. subdural haematoma

h) Fabricated or Induced Illness

Fabricated or induced illness, previously known as Munchausen's Syndrome by Proxy, is a condition where a child suffers harm through the deliberate action of the main carer, in most cases the mother, but which is attributed to another medical cause.

It is important not to confuse this deliberate activity with the behaviour and actions of over-anxious parents who constantly seek advice from doctors, health visitors and other health professionals about their child's wellbeing.

There is a need to exercise caution about attributing a child's illness, in the absence of a medical diagnosis, to deliberate activity on the part of a parent or carer to a fabricated or induced illness, as stated in the Court of Appeal judgement in the case of Angela Cannings. (*R v Cannings (2004) EWCA Criml (19 January 2004)*).

The following behaviours exhibited by parents can be associated with fabricated or induced illness:

- deliberately inducing symptoms in children by administering medication or other substances, or by means of intentional suffocation.
- interfering with treatments by over-dosing, not administering them or interfering with medical equipment such as infusion lines or not complying with professional advice, resulting in significant harm.
- claiming the child has symptoms which may be unverifiable unless observed directly, such as pain, frequency of passing urine, vomiting or fits.
- exaggerating symptoms, causing professionals to undertake investigations and treatments which may be invasive, unnecessary and, therefore, are harmful and possibly dangerous.
- obtaining specialist treatments or equipment for children who do not require them.
- alleging psychological illness in a child.

There are a number of presentations in which fabricated or induced illness may be a possibility. These are:

- failure to thrive/growth faltering (sometimes through deliberate withholding of food.)
- fabrication of medical symptoms especially where there is no independent witness
- convulsions.
- pyrexia (high temperature).
- cyanotic episode (reported blue tinge to the skin due to lack of oxygen).
- apnoea (stops breathing).
- allergies
- asthmatic attacks
- unexplained bleeding (especially anal or genital or bleeding from the ears)
- frequent unsubstantiated allegations of sexual abuse, especially when accompanied by demands for medical examinations
- frequent 'accidental' overdoses.

Concerns may arise when:

- reported symptoms and signs found on examinations are not explained by any medical condition from which the child may be suffering.
- physical examination and results of medical investigations do not explain reported symptoms and signs.
- there is an inexplicably poor response to prescribed medication and other treatment.
- new symptoms are reported on resolution of previous ones.
- reported symptoms and/or clinical signs do not occur when the carers are absent

- over time the child is repeatedly presented to health professionals with a range of signs and symptoms.
- the child's normal, daily life activities are being curtailed beyond that which might be expected for any medical disorder or disability from which the child is known to suffer.

It is important to note that the child may also have an illness that has been diagnosed and needs regular treatment. This may make the diagnosis of fabricated or induced illness difficult, as the presenting symptoms may be similar to those of the diagnosed illness.

SEXUAL ABUSE

Most child victims are sexually abused by someone they know, either a family member or someone well known to them or their family. In recent years there has been an increasing recognition that both male and female children and older children are sexually abused to a greater extent than had previously been realised.

There are no 'typical' sexually abusing families. Children who have been sexually abused are likely to have been put under considerable pressure not to reveal what has been happening to them. Sexual abuse is damaging to children, both in the short and long term.

Both boys and girls of all ages are abused, and the abuse may continue for many years before it is disclosed. Abusers may be both male and female.

It is important to note that children and young people may also abuse other children sexually.

Children disclosing sexual abuse have the right to be listened to and to have their allegations taken seriously. Research shows it is rare for children to invent allegations of sexual abuse and that in fact they are more likely to claim they are not being abused when they are.

It is important that the indicators listed below are assessed in terms of significance and in the context of the child's life, before concluding that the child is, or has been, sexually abused.

Some indicators take on a greater, or lesser, importance depending upon the child's age

Recognition of Sexual Abuse

Sexual abuse often presents in an obscure way. Whilst some child victims have obvious genital injuries, a sexually transmitted infection or are pregnant, relatively few children are so easily diagnosed. The majority of children subjected to sexual abuse, even when penetration has occurred, have on medical examination no evidence of the abuse having occurred.

The following indicators of sexual abuse may be observed in a child. There may be occasions when no symptoms are present, but it is still thought that a child may be, or has been, sexually abused. Suspicions increase where several features are present together.

The following list is not exhaustive and should not be used as a check list.

Possible physical indicators in the primary school aged child include:

- bruises, scratches, bite marks or other injuries to buttocks, lower abdomen or thighs
- itching, soreness, discharge or unexplained bleeding
- physical damage to genital area or mouth
- signs of sexually transmitted infections
- pain on urination
- semen in vagina, anus, external genitalia
- difficulty in walking or sitting
- torn, stained or bloody underclothes or evidence of clothing having been removed and replaced
- psychosomatic symptoms such as recurrent abdominal pain or headache.

Possible behavioural indicators include:

- heightened genital awareness - touching, looking, verbal references to genitals, interest in other children's or adults' genitals.
- using objects for masturbation - dolls, toys with phallic-like projections.
- rubbing genital area on an adult - wanting to smell genital area of an adult, asking adult to touch or smell their genitals.
- simulated sexual activity with another child e.g. replaying the sexually abusive event or wanting to touch other children, etc.
- simulated sexual activity with dolls, cuddly toys.
- fear of being alone with adult persons of a specific sex, especially that of the suspected abuser.
- self-mutilation e.g. picking at sores, sticking sharp objects in the vagina, head banging etc.
- social isolation - the child plays alone and withdraws into a private world.
- inappropriate displays of affections between parent and child who behave more like lovers.
- child takes over 'the mothering role' in the family whether or not the mother is present.
- poor peer group relationships and inability to make friends.
- inability to concentrate, learning difficulties or a sudden drop in school performance.
- reluctance to participate in physical activity or to change clothes for physical education, games or swimming.
- unusual or bizarre sexual themes in child's artwork or stories.
- frequent absences from school that are justified by one parent only, apparently without regard for its implications for the child's school performance.
- unusual reluctance or fear of going home after school.

EMOTIONAL ABUSE

Emotional abuse is as damaging as other, visible, forms of abuse in terms of its impact on the child. There is increasing evidence of the adverse long-term consequences for children's development where they have been subject to emotional abuse. Emotional abuse has an impact on a child's physical health, mental health, behaviour and self-esteem.

Emotional abuse may take the form of under-protection, and/or over-protection, of the child, which has a significant negative impact on a child's development.

The parents' physical care of the child, and his environment, may appear to meet the child's needs, but it is important to remain aware of the interactions and relationship which occur between the child and his parents to determine if they are nurturing and appropriate.

An emotionally abused child may be subject to constant criticism and being made a scapegoat, the continuous withholding of approval and affection, severe discipline or a total lack of appropriate boundaries and control. A child may be used to fulfil a parent's emotional needs.

The potential of emotional abuse should always be considered in referrals where instances of domestic violence have been reported.

Recognition of Emotional Abuse

Whilst emotional abuse can occur in the absence of other types of abuse, it is important to recognise that it does often co-exist with them, to a greater or lesser extent.

Child Behaviours associated with Emotional Abuse

Some of the symptoms and signs seen in children who are emotionally abused are presented below. It is the degree and persistence of such symptoms that should result in the consideration of emotional abuse as a possibility. Importantly, it should be remembered that whilst these symptoms may suggest emotional abuse, they are not necessarily pathognomonic of this since they often can be seen in other conditions.

Possible behaviours that may indicate emotional abuse include:

- serious emotional reactions, characterised by withdrawal, anxiety, social and home fears etc.
- marked behavioural and conduct difficulties, e.g. opposition and aggression, stealing, running away, promiscuity, lying.
- persistent relationship difficulties, e.g. extreme clinginess, intense separation reaction.
- physical problems such as repeated illnesses, severe eating problems, severe toileting problem.
- extremes of self-stimulatory behaviours, e.g. head banging, comfort seeking, masturbation etc.
- very low self-esteem, often unable to accept praise or to trust and lack of self-pride.
- lack of any sense of pleasure in achievement, over-serious or apathetic.
- over anxiety, e.g. constantly checking or overanxious to please.
- developmental delay in young children, and failure to reach potential in learning.

Parental Behaviour Associated with Emotional Abuse

Behaviour shown by parents which, if persistent, may indicate emotionally abusive behaviour includes:

- extreme emotions and behaviours towards their child including criticism, negativity, rejecting attitudes, hostility etc.
- fostering extreme dependency in the child
- harsh disciplining, inconsistent disciplining and the use of emotional sanctions such as withdrawal of love
- expectations and demands which are not appropriate for the developmental stage of the child, e.g. too high or too low
- exposure of the child to family violence and abuse
- inconsistent and unpredictable responses to the child
- contradictory, confusing or misleading messages in communicating with the child
- serious physical or psychiatric illness of a parent where the emotional needs of the child are not capable of being considered and/or appropriately met
- induction of the child into bizarre parental belief systems
- break-down in parental relationship with chronic, bitter conflict over contact or residence arrangements for the child
- major and repeated familial change, e.g. separations and reconstitution of families and/or changes of address
- making a child a scapegoat within the family

NEGLECT

Neglect and failure to thrive/growth faltering for non-organic reasons requires medical diagnosis. Non-organic failure to thrive is where there is a poor growth for which no medical cause is found, especially when there is a dramatic improvement in growth on a nutritional diet away from the parent's care. Failure to thrive tends to be associated with young children but neglect can also cause difficulties for older children.

There is a tendency to associate neglect with poverty and social disadvantage. Persistent neglect over long periods of time is likely to have causes other than poverty, however. There has to be a distinction made between financial poverty and emotional poverty.

There are a number of types of neglect that can occur separately or together, for example:

- medical neglect
- educational neglect
- simulative neglect
- environmental neglect
- failure to provide adequate supervision and a safe environment.

Recognition of Neglect

Neglect is a chronic, persistent problem. The concerns about the parents not providing "good enough" care for their child will develop over time. It is the accumulation of such concerns which will trigger the need to invoke the Child Protection Process. In cases of neglect, it is important that details about the standard of care of the child are recorded and there is regular inter-agency sharing of this information.

It is important to remember that the degree of neglect can fluctuate, sometimes rapidly, therefore ongoing inter-agency assessment and monitoring is essential.

The assessment of neglect should take account of the child's age and stage of development, whether the neglect is severe in nature and whether it is resulting in, or likely to result in, significant impairment to the child's health and development.

The following areas should be considered when assessing whether the quality of care a child receives constitutes neglect.

Child

Health presentation indicators include:

- non-organic failure to thrive (growth faltering)
- poor weight gain (improvement when away from the care of the parents)
- poor height gain
- unmet medical needs
- untreated head lice/other infestations
- frequent attendance at 'accident and emergency' and/or frequent hospital admissions
- tired or depressed child, including a child who is anaemic or has rickets
- poor hygiene
- poor or inappropriate clothing for the time of year
- abnormal eating behaviour (bingeing or hoarding).

Emotional and behavioural development indicators include:

- developmental delay/special needs
- presents as being under-stimulated
- abnormal reaction to separation/ or attachment, disorder
- over-active and/or aggressive
- soiling and/or wetting
- repeated running away from home
- substance misuse
- offending behaviour, including stealing food .

Family and social relationship indicators include:

- high criticism/low warmth
- excluded by family
- sibling violence
- isolated child
- attachment disorders and /or seeking comfort from strangers
- left unattended/or to care for other children
- left to wander alone day or night
- constantly late to school/late being collected
- not wanting to go home from school or refusing to go to school
- poor attendance at school
- frequent name changes and/or change of address or parental figures within the home.
- management of a child with a disability who is not attaining the level of functioning which is commensurate with the disability.

Consideration should be given as to whether a child and adolescent mental health assessment is required. Have all children in the family been seen and their views explored and documented?

Parents

Lack of emotional warmth indicators include:

- unrealistic expectations of child
- inability to consider or put child's needs first
- name calling/degrading remarks
- lack of appropriate affection for the child
- violence within the home from which the child is not shielded
- partner resenting non-biological child and hostile in attitude towards him
- failure to provide basic care for the child.

Lack of stability indicators include:

- frequent changes of partners
- poor family support/inappropriate support
- lack of consistent relationships
- frequent moves of home
- enforced unemployment
- drug, alcohol or substance dependency
- financial pressures/debt
- absence of local support networks, neighbours etc.

Issues relating to providing guidance and setting boundaries indicators include:

- poor boundary setting
- inconsistent attitudes and reactions, especially to child's behaviour
- continuously failing appointments
- refusing offers of help and services
- failure to seek or use advice and/or help offered appropriately
- seeks to mislead professionals by providing inaccurate or confusing information
- failure to provide safe environment.

Social Presentation:

- aggressive/threatening behaviour towards professionals and volunteers
- disguised compliance
- low self-esteem
- lack of self-care.
-

Health:

- mental ill health
- substance misuse
- learning difficulties
- (post-natal) depression
- history of parental child abuse or poor parenting
- physical health.

Home and Environmental Conditions:

The following home and environmental conditions should be considered:

- poor housing conditions
- overcrowding
- lack of water, heating, sanitation
- no access to washing machine
- piles of dirty washing
- little or no adequate clean bedding/furniture
- little or no food in cupboards
- human and/or animal excrement
- uncared for animals
- referrals to environmental health
- unsafe environment
- rural isolation.

Impediments to ongoing assessment and appropriate multidisciplinary support:

- failure to see the child
- no ease of access to whole house
- fear of violence and aggression
- failure to seek support and advice or consultation, as appropriate, from line manager
- failure to record concern and initial impact
- inability to retain objectivity
- unwitting collusion with family
- failure to see beyond conditions in the home
- child's view is lost
- geographical stereotyping
- minimising concern
- poor networking amongst professionals
- inability to see what is/is not acceptable
- familiarity breeding contempt; and
- failure to make connections with information available from other services.
(Hammersmith & Fulham Inter-Agency Procedures 2002)

When staff become aware of any of the above features they should review the case with their line manager.

Children with Disability

In recognising child abuse, all professionals should be aware that children with a disability can be particularly vulnerable to abuse, **Appendix 17**. They may need a high degree of physical care; they may have less access to protection and there may be a reluctance on the part of professionals to consider the possibility of abuse.

Recognition of Abuse of Children with Disability

Recognition of abuse can be difficult in that:

- symptoms and signs may be confused
- the child may not recognise the behaviour as abusive

- the child may have communication difficulties and be unable to disclose abuse
- there may be a dependency on several adults for intimate care
- there is a reluctance to accept that children with disabilities may be abused.

Children with disability will usually display the same symptoms and signs of abuse as other children. These may be incorrectly attributed, however, to the child's disability.

Risk Factors Associated with Child Abuse

A number of factors may increase the likelihood of abuse to a child. The following list is not exhaustive and does not preclude the possibility of abuse in families where none of these factors are evident.

Child

- poor bonding due to neo-natal problems
- attachment interfered with by multiple caring arrangements
- a 'difficult' child
- a child under five years is considered to be most vulnerable
- a child's name or sibling's names previously on the Child Protection Register
- a child with feeding/sleeping difficulties
- birth defects/chronic illness/developmental delay.

Parents

- both young and immature (i.e. aged 20 years and under) at birth of the child
- parental history of deprivation and/or abuse
- slow jealousy and rivalry with the child
- expect the child to meet their needs
- unrealistic expectations/rigid ideas about child development
- history of mental illness in one or both parents
- history of domestic violence
- drug and alcohol misuse in one or both parents
- frequent changes of carers
- history of aggressive behaviour by either parent
- unplanned pregnancy
- unrealistic expectations of themselves as parents.

Home and Environmental Conditions:

- unemployment
- no income/poverty
- poor housing or overcrowded housing
- social isolation and no supportive family
- the family moves frequently
- debt
- large family

Child Abuse in Other Specific Circumstances

Bullying

Bullying is not defined as a category of abuse within the Area Child Protection Committees' Regional Policy and Procedures (2005). The policy does however state that the damage inflicted by bullying behaviour can frequently be underestimated. It can cause considerable distress to children and at the extreme cause them significant harm (including self-harm).

The procedure for referral and investigation of abuse may therefore be implemented in certain circumstances such as when anti-bullying procedures have failed to be effective; the bullying behaviour is persistent and severe resulting in the target of the bullying suffering/likely to suffer significant harm; there are concerns that the bullying behaviour is indicative of the child exhibiting this behaviour suffering/likely to suffer significant harm or where concerns exist in relation to the parents/carer's capacity to meet the needs of the child (either the target or the child exhibiting this behaviour).

Children Who Sexually Abuse Others or Display Sexually Harmful Behaviour

When abuse of a child is alleged to have been carried out by another child, the procedures outlined in the section on **Procedures for Reporting Suspected or Disclosed Child Abuse** of this policy will be followed. It is important in such situations to distinguish between behaviours which are experimental in nature and those that are exploitative and harmful. Advice and support will be sought in such circumstances from the Education Authority's Designated Officer for Child Protection and where appropriate a referral made to the statutory agencies. In all such cases a risk assessment will be undertaken and an individual support and safety plan identified. Appropriate services will also be provided for the children involved. The above guidance follows DE Circular 2016/05 subject Children Who Display Harmful Sexualized Behaviour.

Child Sexual Exploitation

'Child sexual exploitation is a form of sexual abuse where children are sexually exploited for money, power or status. It can involve violent, humiliating and degrading sexual assaults. In some cases, young people are persuaded or forced into exchanging sexual activity for money, drugs, gifts, affection or status. Consent cannot be given, even where a child may believe they are voluntarily engaging in sexual activity with the person who is exploiting them. Child sexual exploitation doesn't always involve physical contact and can happen online. A significant number of children who are victims of sexual exploitation go missing from home, care and education at some point.' (*Co-operating To Safeguard Children and Young People in Northern Ireland 2016*)

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;
- Requesting the morning after pill upon return;
- Truancy from school;
- Inappropriate sexualised behaviour for age;
- Physical symptoms or infections e.g. bruising, bite marks, sexually transmitted 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 secretiveness 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 misuse.

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.

Indecent Photographs

The offence of taking indecent pictures of children under 18 years can apply in a situation where a pupil has taken an indecent picture using a mobile phone of others under 18 years of age. It is also an offence to distribute, possess with intent to distribute or show such photographs to others. In such circumstances the PSNI and Social Services will be contacted. The school also has an Acceptable Use of Mobile and Digital Devices Policy which has/have been circulated to parents and pupils and which is available from the school.

Young Person whose Behaviour places him/her at Risk of Significant Harm

A child whose own behaviours e.g. self-harming behaviour, leaving school without permission, etc. places him/her at risk of significant harm, may not necessarily constitute abuse as defined in Area Child Protection Committees' Regional Policy and Procedures (2005). The decision to initiate child protection procedures is a matter for professional judgement and each case will be considered individually with advice sought from the Education Authority's Designated Officer for Child Protection. The criminal aspects of such cases will be dealt with by the PSNI.

Domestic Violence and Abuse

Is defined as 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.' **Appendix 6 (Stopping Domestic and Sexual Violence and Abuse in Northern Ireland A Seven Year Strategy: March 2016)**

Sexual Violence and Abuse

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

Please note that coercive, exploitative and harmful behaviour includes taking advantage of an individual's incapacity to give informed consent. ***(Stopping Domestic and Sexual Violence and Abuse in Northern Ireland A Seven Year Strategy: March 2016)***

A child may live in a family where there is domestic abuse. In any case involving domestic abuse the PSNI will contact the school so that accommodation to the child's can be made, in order to help assess the child/young person's needs and to ensure that he/she is receives appropriate support.

APPENDIX 16

Specific Types of Abuse

Grooming of a child or young person is always abusive and/or exploitative. It often involves perpetrator(s) gaining the trust of the child or young person or, in some cases, the trust of the family, friends or community, and/or making an emotional connection with the victim to facilitate abuse before the abuse begins. This may involve providing money, gifts, drugs and/or alcohol or more basic needs such as food, accommodation or clothing to develop the child's/young person's loyalty to and dependence upon the person(s) doing the grooming. The person(s) carrying out the abuse may differ from those involved in grooming which led to it, although this is not always the case. Grooming is often associated with Child Sexual Exploitation (CSE) but can be a precursor to other forms of abuse. Grooming may occur face to face, online and/or through social media, the latter making it more difficult to detect and identify.

Adults may misuse online settings e.g. chat rooms, social and gaming environments and other forms of digital communications, to try and establish contact with children and young people or to share information with other perpetrators, which creates a particular problem because this can occur in real time and there is no permanent record of the interaction or discussion held, or information shared. Those working or volunteering with children or young people should be alert to signs that may indicate grooming and take early action in line with their child protection and safeguarding policies and procedures to enable preventative action to be taken, if possible, before harm occurs. Practitioners should be aware that those involved in grooming may themselves be children or young people and may be acting under the coercion or influence of adults. Such young people must be considered victims of those holding power over them. Careful consideration should always be given to any punitive approach or 'criminalising' young people who may, themselves, still be victims and/or acting under duress, control, threat, the fear of, or actual violence. In consultation with the PSNI and where necessary the PPS, HSC professionals must consider whether children used to groom others should be considered a child in need or requiring protection from significant harm

If the staff or volunteers in Creavery Primary School become aware of signs that may indicate grooming, they will take early action and follow the school's child protection policies and procedures. The HSCT and PSNI should be involved as early as possible to ensure any evidence that may assist prosecution is not lost and to enable a disruption plan to reduce the victim's contact with the perpetrator(s) and reduce the perpetrator(s) control over the victim to be put in place without delay.

Child Sexual Exploitation (CSE) is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/ or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

Any child under the age of eighteen, male or female, can be a victim of CSE. Although younger children can experience CSE, the average age at which concerns are first identified is 12-15 years of age.

CSE can be perpetrated by adults or by young people's peers, on an individual or group basis, or a combination of both, and can be perpetrated by females as well as males. While children

in care are known to experience disproportionate risk of CSE, **the majority of CSE victims are living at home.**

Statutory Responsibilities

CSE is a form of child abuse and, as such, any member of staff suspecting that CSE is occurring will follow the school's child protection policy and procedures, including reporting to the appropriate agencies.

Domestic and Sexual Abuse

The NI Domestic and Sexual Abuse strategy 2024 - 2031 defines domestic and sexual violence and abuse as follows: -

Domestic Abuse is:

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

Sexual Abuse is:

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

If it comes to the attention of school staff or volunteers that domestic and /or sexual violence and abuse, is or may be, affecting a child this will be passed on to the Designated/Deputy Designated Teacher who has an obligation to share the information with the Social Services Gateway Team.

Female Genital Mutilation (FGM) is a form of child abuse and violence against women and girls. FGM comprises all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons. The procedure is also referred to as 'cutting', 'female circumcision' and 'initiation'. The practice is medically unnecessary, extremely painful and has serious health consequences, both at the time when the mutilation is carried out and in later life. FGM is a form of child abuse and, as such, teachers have a statutory duty to report cases, including suspicion, to the appropriate agencies, through agreed established procedures set out in our school policy. Where there is a concern that a child may be at immediate risk of FGM this should be reported to the PSNI without delay. Contact can be made directly 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.

Forced Marriage is a marriage conducted without the valid consent of one or both parties and where duress is a factor. Duress can include physical, psychological, financial, sexual and emotional pressure. Forced marriage is a criminal offence in Northern Ireland and if in Creavery Primary School we have knowledge or suspicion of a forced marriage in relation to a child or young person we will contact the PSNI immediately.

Children Who Display Harmful Sexual Behaviour

Learning about sex and sexual behaviour is a normal part of a child's development. It will help them as they grow up, and as they start to make decisions about relationships. As a school we support children, through the Personal Development element of the curriculum, to develop their understanding of relationships and sexuality and the responsibilities of healthy relationships. Teachers are often therefore in a good position to consider if behaviour is within the normal continuum or otherwise.

It must also be borne in mind that sexually harmful behaviour is primarily a child protection concern. There may remain issues to be addressed through the school's positive behaviour policy, but it is important to always apply principles that remain child centred.

It is important to distinguish between different sexual behaviours - these can be defined as normal, inappropriate, problematic, abusive or violent. Healthy sexual behaviour will generally have no need for intervention; however, consideration may be required as to appropriateness within a school setting.

Problematic sexual behaviour requires some level of intervention, depending on the activity and level of concern. If the behaviour is considered to be more serious advice from the EA CPSS should be sought.

Harmful sexual behaviour is an umbrella term for sexual behaviours which are of concern and have or are likely to cause harm to the individual themselves or to others. It is important to distinguish between different sexual behaviours - these can be defined as normal, inappropriate, problematic, abusive or violent.

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

Inappropriate sexual behaviour requires some level of intervention, depending on the activity and level of concern. For example, a one-off incident may simply require liaising with parents on setting clear direction that the behaviour is unacceptable, explaining boundaries and providing information and education. However, if the behaviour is considered to be more serious, perhaps because there are a number of aspects of concern, advice from the EA Child Protection Support Service (CPSS) may be required. The CPSS will advise if contact with PSNI or Social Services is required.

Problematic, abusive and violent sexual behaviours are of significant concern and guidance on the management of the pupils within the school and referral to other agencies such as the PSNI or Social Services will be sought from CPSS.

We will also take guidance from DE Circular 2022/02 to address concerns about harmful sexualised behaviour displayed by children.

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, making comments on social media posts, 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 enjoy the educational, social and economic benefits of the online world, and that they are empowered to do this safely, knowledgeably and without fear.

The Strategy recognises that the ever-changing and fast-growing online environment presents both extensive educational benefits as well as 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://www.safeguardingni.org)

We in Creavery Primary School have a responsibility to ensure that there is a reduced risk of pupils accessing harmful and inappropriate digital content and will be vigilant 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.

Sharing Nudes and Semi-Nudes

Sharing nudes and semi-nudes is a term used to describe the sending or posting of naked or partially naked images, videos or livestreams online by young people under the age of 18. This could be via text, email, social media and gaming platforms, chat apps or forums. Sharing nudes is sometimes called 'sexting', however this term is often used by young people to talk about sharing sexual messages and not imagery.

Sharing nudes and semi-nudes between individuals in a relationship

As adults we can question the wisdom of this, but the reality is that children consider this to be normal and often the result of a child'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. Clearly 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 and in these cases you should contact local PSNI on 101 for advice and guidance. 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 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 child from seeking help if they feel entrapped by the misuse of sexual images. Advice should be sought from CPSS

Sharing an Inappropriate Image with an Intent to Cause Distress

If a child has been affected by inappropriate images or links on the internet it is important that you do not forward it to anyone else. Please remember that schools are not required to investigate incidents. It is an offence under the Criminal Justice and Courts Act 2015 (Criminal Justice and Courts Act 2015) to share an inappropriate image of another person without the individual's consent - see Articles 33-35 of the Act for more detail. By contacting the PSNI you could help prevent further distribution of the image and further such incidents and contain the damage it can cause. If a child 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 should be followed. For further information see:

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 17

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.

Gender Identity Issues and Sexual Orientation

Schools should strive to provide a happy environment where all young people feel safe and secure. All pupils have the right to learn in a safe and secure environment, to be treated with respect and dignity, and not to be treated any less favourably due to their actual or perceived sexual orientation. DE requires all grant-aided schools to develop their own policy on how they will address Relationships and Sexuality Education (RSE) within the curriculum. It is via this policy that schools are expected to cover issues relating to relationships and sexuality, including those affecting LGB&T children and young people.

As a staff working with young people from the LGBTQ+ community we will support them to appropriately access information and support on healthy relationships and to report any concerns or risks of abuse or exploitation.

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 and school trips to ensure our current safeguarding policies are adhered to and that appropriate staffing levels are in place.

KEY CONTACT NUMBERS

EA CHILD PROTECTION SUPPORT SERVICE

Tel: 028-95985590

GATEWAY TEAM REFERRAL

Oriel House, 2-8 Castle Street, Antrim

BT41 4JE

Tel: 028 94424459

NORTHERN HEALTH & SOCIAL CARE TRUST

Bush House, 45 Bush Road, Antrim,

BT41 2QB

Tel: 028-94424655

PSNI

Central Referral Unit (CRU) – for child sexual & physical abuse allegations.

Tel: 028- 90259299