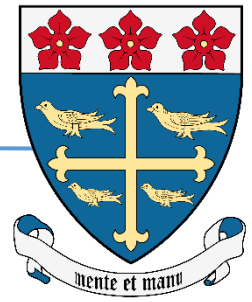


Queensferry High School

Child Protection Policy



Purpose & Principles

Queensferry High School recognise that children and young people have a right to be protected and be safe from harm from others. There is a strong, robust and proactive response from adults that reduces the risk of harm to children. Adults working with them know and understand the indicators that may suggest that a young person is suffering or is at risk of suffering harm. They take appropriate and necessary action in accordance with local procedures and statutory guidance.

We promise to:

- Get you the help you need, when you need it;
- Be seen by a professional such as a teacher, doctor or social worker to make sure you are alright and not put at any further risk
- Be listened to seriously, and professionals will use their power to help
- Be willing and able to discuss issues in private, and, if you want them to
- Be involved with, and helped to understand, decisions made about your life; and A 'Lead Professional' to help you.

Those helping you will:

- Share information to protect you;
- Minimise the disruption to other parts of your life;
- Work together effectively on your behalf;
- Be competent, confident, properly trained and supported, and;
- Rigorously monitor services to continually improve how and what is done to help you. (ref. Protecting Children and Young People; The Charter – www.scotland.gov.uk/childrenscharter)

get to know us/ speak with us/ listen to us/ take us seriously

involve us/ respect our privacy/ be responsible to us/ think about our lives as a whole/

think carefully about how you use information about us/ put us in touch with the right people/ use your power to help/ make things happen when they should/ help us be safe

We follow policy and procedures outlined in CEC Included, Engaged, Involved and the procedures set down in the Interagency Child Protection Procedures Edinburgh and the Lothians 2014 (these are based on the National Guidance for Child Protection in Scotland 2014, www.gov.scot/publications/national-guidance-child-protection-scotland/). This document states

that:

- All children and young people have the right to be cared for and protected from harm and abuse and to grow up in a safe environment in which their rights are respected and their needs are met. Children and young people should get the help they need, when they need it, and their welfare is always paramount.
- All education staff have important roles in protecting children from abuse and neglect and in identifying children who may be at risk of abuse.
- The protection and wellbeing of the child must remain at the heart of all considerations and decisions.

Key Definitions

Child abuse and neglect

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting, or by failing to act to prevent, significant harm to the child. Children may be abused in a family or in an institutional setting, by those known to them or, more rarely, by a stranger. Assessments will need to consider whether abuse has occurred or is likely to occur.

While it is not necessary to identify specific areas of concern when adding a child's name to the Child Protection Register. It is still helpful to consider and understand the different ways in which children can be abused. The following definitions show some of the ways in which abuse may be experienced by a child but are not exhaustive, as the individual circumstances of abuse will vary from child to child.

Physical abuse

Physical abuse is the causing of physical harm to a child or young person. Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning or suffocating. Physical harm may also be caused when a parent or carer feigns the symptoms of, or deliberately causes, ill health to a child they are looking after.

Emotional abuse

Emotional abuse is persistent emotional neglect or ill treatment that has severe and persistent adverse effects on a child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate or valued only insofar as they meet the needs of another person. It may involve the imposition of age - or developmentally - inappropriate expectations on a child. It may involve causing children to feel frightened or in danger, or exploiting or corrupting children. Some level of emotional abuse is present in all types of ill treatment of a child; it can also occur independently of other forms of abuse.

Sexual abuse

Sexual abuse is any act that involves the child in any activity for the sexual gratification of another person, whether or not it is claimed that the child either consented or assented. Sexual abuse involves forcing or enticing a child to take part in sexual activities, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative or non-penetrative acts. They may include non-contact activities, such as involving children in looking at, or in the production of indecent images or in watching sexual activities, using sexual language towards a child or encouraging children to behave in sexually inappropriate ways (see also section on child sexual exploitation).

Neglect

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. It may involve a parent or carer failing to provide adequate food, shelter and clothing, to protect a child from physical harm or danger, or to ensure access to appropriate medical care or treatment. It may also include neglect of, or failure to respond to, a child's basic emotional needs. Neglect may also result in the child being diagnosed as suffering from 'non-organic failure to thrive', where they have significantly failed to reach normal weight and growth or development milestones and where physical and genetic reasons have been medically eliminated. In its extreme form children can be at serious risk from the effects of malnutrition, lack of nurturing and stimulation. This can lead to serious long-term effects such as greater susceptibility to serious childhood illnesses and reduction in potential stature. With young children in particular, the consequences may be life-threatening within a relatively short period of time

Child Protection

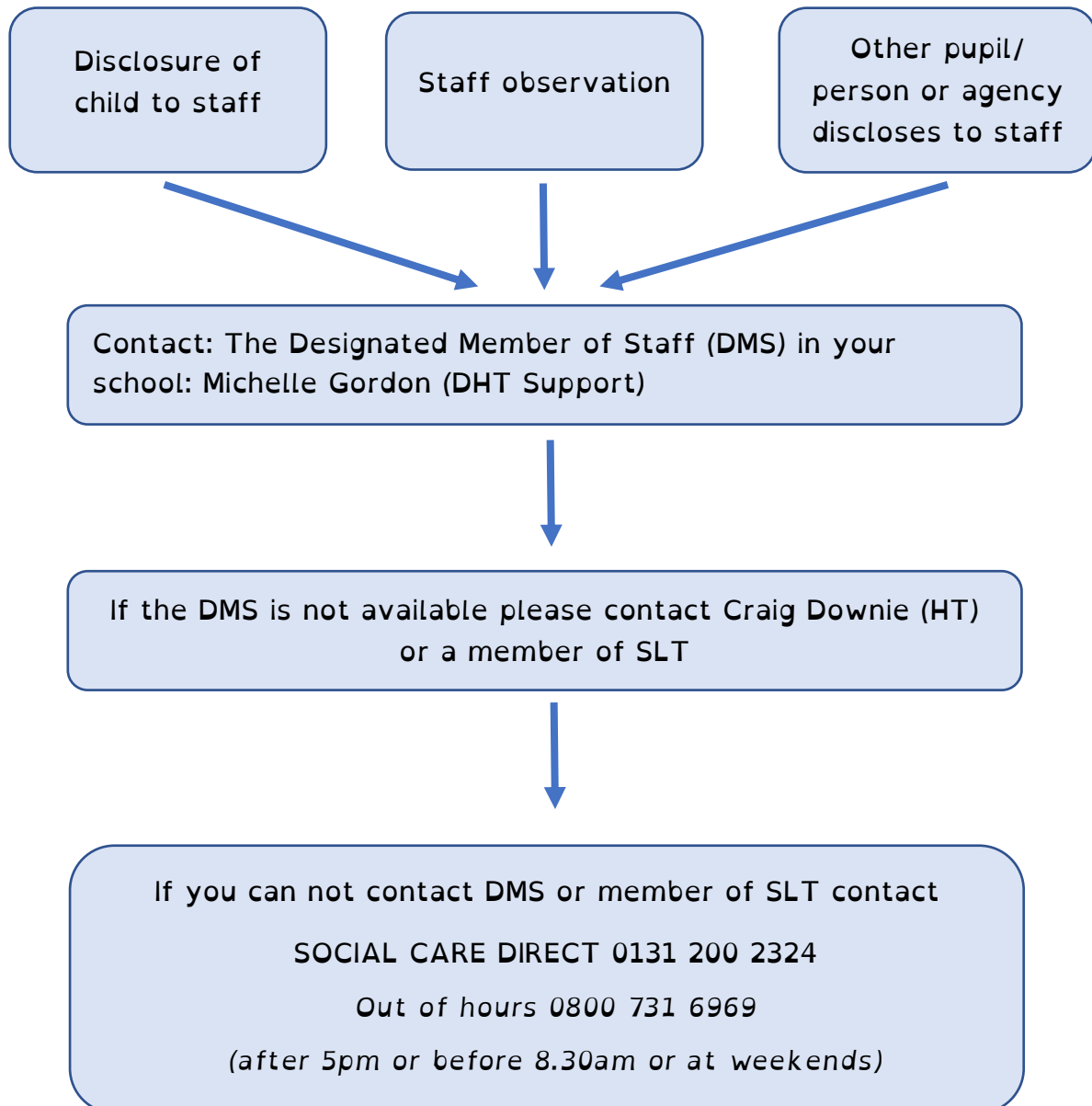
Child protection means protecting a child from child abuse or neglect. Abuse or neglect need not have taken place; it is sufficient for a risk assessment to have identified a *likelihood* or *risk* of significant harm from abuse or neglect. Equally, in instances where a child may have been abused or neglected but the risk of future abuse has not been identified, the child and their family may require support and recovery services but not a Child Protection Plan. In such cases, an investigation may still be necessary to determine whether a criminal investigation is needed and to inform an assessment that a Child Protection Plan is not required.

There are also circumstances where, although abuse has taken place, formal child protection procedures are not required. For example, the child's family may take protective action by removing the child from the source of risk. Children who are abused by strangers would not necessarily require a Child Protection Plan unless the abuse occurred in circumstances resulting from a failure in familial responsibility. For example, if a young child is abused by a stranger, a Child Protection Plan may be required only if the family were in some way responsible for the abuse occurring in the first instance or were unable to adequately protect the child in the future without the support of a Child Protection Plan.

Procedures

Flow chart for managing a child protection concern.

Source of Information:



Action:

Initial responses by staff to a child:



LISTEN



REASSURE

- Do not guarantee confidentiality
- Take the allegation seriously
- Be receptive and reasoning
- Establish and record the facts, using open-ended questions; never introduce personal experiences of abuse or those of other children. Make sure this information is signed and dated on a [Wellbeing Concern Form](#)
- Share your concerns with the designated member of staff ASAP on the same day do not wait until the end of the day
- Do not assume someone already knows
- The child must be told the information will be passed on, never promise to keep the disclosure confidential.

Remember:

- ❖ Children who are traumatised may experience a range of feelings, such as sadness, anger, anxiety or depression.
- ❖ Affirm whatever feelings the child has and avoid telling the child how they feel. Don't ask 'why' questions.
- ❖ Avoid being judgemental about information supplied by the child.

Ask open-ended questions to gain basic information

- | | |
|------------------------|----------------------------------|
| ✓ What happened? | X Did somebody hit you? |
| ✓ When did it happen? | X Did it happen last night? |
| ✓ Where did it happen? | X Did he come into your bedroom? |
| ✓ Who did it? | X Was it your mum? |

Action by DMS:

The DMS will contact Social Care Direct on 0131 200 2327

Allegations against staff

Occasionally, an allegation of abuse may be made against a member of staff. To minimise risk, it is important that all staff are aware of the ways in which inappropriate behaviour/ abuse may be manifested. The list is neither definitive nor exhaustive or is meant to suggest that all actions below are in themselves abusive; they must be seen in the context of interaction with the child and the intention of staff. They are meant to aid and advise staff in minimising risk and to encourage good practice:

Physical Abuse

- Any form of physical assault including the attempt to:
- Kick
- Punch
- Slap
- Shake
- Throw a missile

Sexual Abuse

- Abuse of position of trust.
- Any form of sexual assault
- Possession of indecent or abusive photographs or images of children
- Showing indecent or pornographic material to children
- Suggestive remarks or gestures
- Inappropriate touching or behaviour towards a child
- Grooming

Emotional Abuse & Neglect

- Racist or homophobic behaviour or language, or failing to address this in others
- Isolation e.g. locking a child in a room
- Persistent sarcasm or belittling
- Threats
- Bullying children or failing to address it in others
- Inappropriate Punishments
- Creating a climate of fear
- Failing to prevent a child from physical danger
- Overprotection or the prevention of socialisation

Safe Working Practices

- All staff are expected to behave in a manner consistent with the schools Code of Conduct
- A relationship between an adult and child or young person cannot be a relationship between equals. There is a potential for exploitation and harm of vulnerable children.
- Adults have a responsibility to ensure that an unequal balance of power is not used for personal advantage or gratification
- All staff are expected to behave in a manner that maintains appropriate professional boundaries and to avoid behaviour which might be misinterpreted by others

Inter-agency procedures for the protection of girls and women at risk of female genital mutilation (FGM)

GIRFEC Principles and Practice - Linked to our Inclusion Policy – Staged Interventions

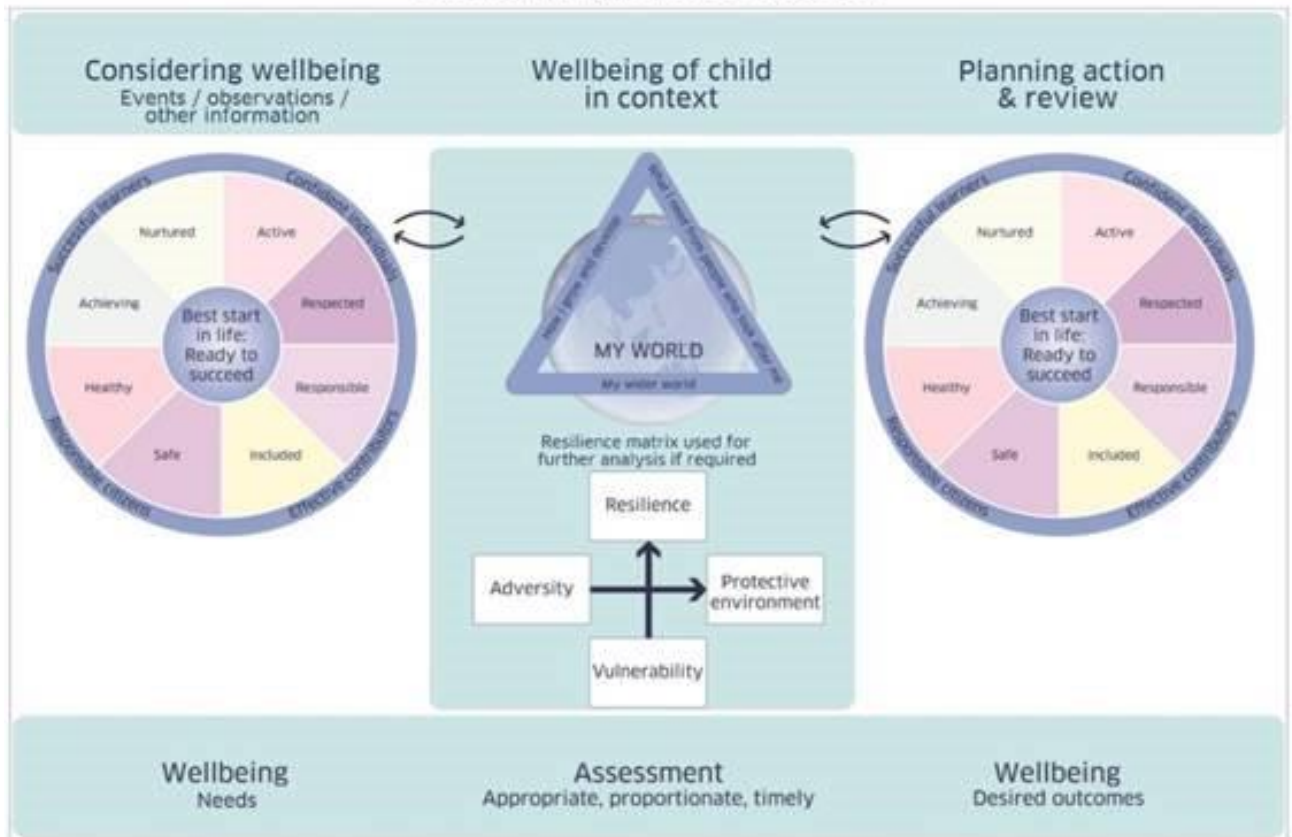
- The right support at the right time by the right people
- Child-focused – keeping the young person and their family at the centre of decision making and supports available to them
- Understanding of the wellbeing of the young person in their context
- Early Intervention
- Joined-up working – the team around the child working together to coordinate a plan to meet specific needs to improve the young person's wellbeing



Safe	Protected from abuse, neglect or harm at home, at school and in the community.
Healthy	Having the highest attainable standards of physical and mental health, access to suitable healthcare, and support in learning to make healthy, safe choices.
Achieving	Being supported and guided in learning and in the development of skills, confidence and self-esteem, at home, in school and in the community.
Nurtured	Having a nurturing place to live in a family setting, with additional help if needed, or where not possible, in a suitable care setting.
Active	Having opportunities to take part in activities such as play, recreation and sport, which contribute to healthy growth and development, at home, in school and in the community.
Respected	Having the opportunity, along with parents and carers, to be heard and involved in decisions that affect them.
Responsible	Having opportunities and encouragement to play active and responsible roles at home, in school and in the community, and where necessary, having appropriate guidance and supervision, and being involved in decisions that affect them.
Included	Having help to overcome social, educational, physical and economic inequalities, and being accepted as part of the community in which they live and learn.

GIRFEC Practice

National practice model



- Concerns raised – early intervention through Wellbeing Concern Forms/ Learning Referrals and Observations
- Assessment of Need is started by the Lead Professional
- Named Person is: Craig Down (Headteacher)
- Once the Assessment of Need is completed a decision will be made:
 - Within School Young Persons Planning Meeting – with Pathway 1 and 2 Supports
 - OR
 - Multi Agency Young Person Planning Meeting

[UNCRC: the foundation of Getting it right for every child - gov.scot \(www.gov.scot\)](http://www.gov.scot)

Adverse Childhood Experiences (ACEs) and Trauma

Growing up with adverse childhood experiences (ACEs) – such as abuse, neglect, community violence, homelessness or growing up in a household where adults are experiencing mental health issues or harmful alcohol or drug use – can have a long-lasting effect on people's lives.

