

RATIONALE

1. The safety and well-being of students is paramount.
2. We recognise the importance of early intervention and the principle of applying the least intrusive intervention necessary to protect vulnerable children.
3. Taita College has a responsibility to assist students to be safe and healthy.

GUIDELINES

1. All responses to child abuse will be in accordance with the principles and procedures outlined in the Children and Young Persons and Their Families Act 1989 and the Vulnerable Children's Act 2014.
2. Any reporting of suspected abuse should be handled in a culturally sensitive manner.
3. All staff (including contractors and volunteers) have a responsibility to discuss any child protection concerns, including suspected abuse or neglect, with a member of the senior leadership team or the Guidance Counsellor.
4. We have a commitment to open and transparent relationships, including being willing to share concerns about child safety issues with the family/whānau unless this would result in an escalation of risk.
5. We have a commitment to ensure that all staff are able to identify the signs and symptoms of potential abuse and neglect and are able to take appropriate action in response and will do so.
6. If a student discloses physical, sexual or emotional abuse the staff member should determine if the student's personal safety is at risk.
 - (a) If personal safety is at risk, the staff member must report their concern to the Guidance Counsellor or member of the senior leadership team. The staff member must also inform the student of their planned actions.
 - (b) If personal safety is not at immediate risk, the staff member should strongly advise the student to seek further help by contacting either the Guidance Counsellor, a member of the senior leadership team, or a suitable agency outside the school.
 - (c) Staff members should record their interactions with the student.
7. We are committed to maintaining and increasing staff awareness of how to prevent, recognise and respond to abuse through appropriate training. As part of their induction, new staff are made aware of the policy on child protection.
8. No referral shall be made without the knowledge of the student and the senior leadership team.
9. Historical allegations should be responded to in the same way as contemporary ones, with the same priority.
10. This document should be read in conjunction with the Child Protection Guidelines and Procedures.

OUTCOMES

1. All staff will be aware of the need to deal sensitively with issues of abuse.
2. Cases of abuse will be referred to the relevant authorities.
3. Staff will receive regular training in dealing with issues related to student safety.

Reviewer: Principal/Senior Leadership Team/Board of Trustees

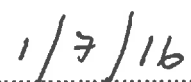
Review Group: Deans/Guidance Counsellor

Approved: June 2016

Next Review: June 2017


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Chairperson


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Principal


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Date

Definitions

- **Abuse** means the harming (whether physically, emotionally or sexually), ill-treatment, neglect or deprivation of any child.
- **Physical abuse** means any acts that may result in the physical harm of a child or young person. It can be, but is not limited to bruising, cutting, hitting, beating, biting, burning, causing abrasions, strangulation, suffocation, drowning, poisoning and fabricated or induced illness.
- **Sexual abuse** means any acts that involve forcing or enticing a child to take part in sexual activities, whether or not they are aware of what is happening. Sexual abuse can be, but is not limited to:
 - Contact abuse: Touching breasts, genital/anal fondling, masturbation, oral sex, penetrative or non-penetrative contact with the anus or genitals, encouraging the child to perform such acts on the perpetrator or another, involvement of the child in activities for the purposes of pornography or prostitution.
 - Non-contact abuse: Exhibitionism, voyeurism, exposure to pornographic or sexual imagery, inappropriate photography or depictions of sexual or suggestive behaviours or comments.
- **Emotional abuse** means any act or omission that results in adverse or impaired psychological, social, intellectual and emotional functioning or development. This can include:
 - Patterns of isolation, degradation, constant criticism or negative comparison to others. Isolating, corrupting, exploiting or terrorising a child can also be emotional abuse.
 - Exposure to family/whānau or intimate partner violence.
- **Neglect** means the persistent failure to meet a child's basic physical or psychological needs, leading to adverse or impaired physical or emotional functioning or development. Neglect is the most common form of abuse, and although the effects may not be as obvious as physical abuse, it is just as serious. Neglect can be:
 - Physical (not providing the necessities of life, like a warm place, food and clothing).
 - Emotional (not providing comfort, attention and love).
 - Neglectful supervision (leaving children without someone safe looking after them).
 - Medical neglect (not taking care of health needs).
 - Educational neglect (allowing chronic truancy, failure to enrol in education or inattention to education needs).
- **Child** means any child or young person aged under 17 years, and who is not married or in a civil union.
- **Child protection** means activities carried out to ensure that children are safe in cases where there is suspected abuse or neglect or the risk of abuse or neglect.
- **Designated person for child protection** means the manager/supervisor or designated person responsible for providing advice and support to staff where they have a concern about an individual child or who want advice about the child protection policy.
- **Disclosure** means information given to a staff member by the child, parent or caregiver or third party in relation to abuse or neglect.

Guidance for Identifying Possible Abuse or Neglect

- While there are different definitions and categories of abuse, the important thing is for staff to consider overall well-being and the risk of harm to the child. It is not so important to be able to define or categorise the type of abuse or neglect.

- Staff should feel empowered to act on suspected abuse and neglect, even when the symptoms or patterns of symptoms are subtle, while avoiding adhering to stereotypes and making assumptions.
- It is normal for staff to feel uncertain. The important thing is that they can recognise when something is wrong, especially if they notice a pattern, or several signs that make them concerned.
- Staff also need to be aware of the indicators of potential neglect. The indicators may include:
 - Physical signs, eg looking rough and uncared for, dirty, without appropriate clothing, underweight.
 - Developmental delays, eg small for their age, cognitive delays, falling behind in school, poor speech and social skills.
 - Emotional abuse/neglect, eg sleep problems, low self-esteem, obsessive behaviour, inability to cope in social situations, sadness/loneliness and evidence of self-harm.
 - Behavioural concerns, eg disengagement/ neediness, eating disorders/substance abuse, aggression.
 - Neglectful supervision, eg out and about unsupervised, left alone, no safe home to return to.
 - Medical neglect, eg skin disorders or other untreated medical issues.
- Every situation is different and it is important to consider all available information about the child and their environment before reaching conclusions. For example, behavioural concerns may be the result of life events, such as divorce, accidental injury or a bereavement. Staff should talk to the Guidance Counsellor or senior leadership team if they have concerns.

Guidance on Responding to Suspected Abuse or Neglect

Once a referral has been made to the Guidance Counsellor or senior leadership team, the following action should be taken:

- Responding to a child in immediate danger - referral to the Police.
- Responding to a child when the child discloses abuse or when there are concerns about abuse or neglect - a phone call to the Child, Youth and Family National Contact Centre to discuss appropriate next steps.
- Responding to more general concerns about the well-being of a child, where referral to the statutory agencies (Child, Youth and Family or the Police) is not appropriate - eg referral to a family/whānau support agency in the community, such as Social Workers in Schools, Strengthening Families or Whānau Ora is more appropriate.
- Responding to a child when the child discloses abuse:
 - Listen to the child. Disclosures by children are often subtle and need to be handled with particular care, including an awareness of the child's cultural identity and how that affects interpretation of their behaviour and language.
 - Reassure the child. Let the child know that they are not in trouble and have done the right thing.
 - Ask open ended prompts - eg "What happened next?" Do not interview the child (in other words, do not ask questions beyond open prompts for the child to continue). Do not make promises that cannot be kept, eg "I will keep you safe now."
 - If the child is visibly distressed, provide appropriate reassurance and re-engage in appropriate activities under supervision until they are able to participate in ordinary activities.

- If the child is not in immediate danger, re-involve the child in ordinary activities and explain what you are going to do next.
- If the child is in immediate danger contact the Police immediately.
- As soon as possible, formally record the disclosure. Record word for word what the child said, as well as the date, time and who was present.
- Where a concern about a child does not amount to suspicion of abuse or neglect, it could be harmful to the well-being of the child and their family/whānau to make a notification to the statutory agencies. Instead, try to partner with other agencies the school knows and trusts to identify and address the needs of the child.

Confidentiality and Information Sharing

- The Privacy Act 1993, and the Children, Young Persons, and Their Families Act 1989 (CYPF Act) allow information to be shared to keep children safe when abuse or suspected abuse is reported or investigated.
- Under Sections 15 & 16 of the CYPF Act, any person who believes that a child has been, or is likely to be harmed physically, emotionally or sexually, or ill-treated, abused, neglected or deprived may report the matter to Child, Youth and Family or the Police and, provided the report is made in good faith, no civil, criminal or disciplinary proceedings may be brought against them.

Professional Development and Safe Practice

- Designated persons for child protection should have sufficient knowledge to provide guidance and expertise across the organisation.
- Frontline staff should have the skills necessary to recognise and respond to suspected abuse and neglect.
- Staff should be informed about the content of the Child Protection Guidelines and Procedures and the Child Abuse Guidelines and Procedures as part of their orientation. Skills needed to implement the policy should be included in performance management and professional development programmes.
- Expectations for staff should promote professionalism in working with children, clearly establish roles and expectations of adult behaviour with children and encourage staff to keep their professional and personal lives separate.
- Good child-safe practices include:
 - Wherever possible an open door policy for all spaces should be used - excluding toilets.
 - Visitors should be monitored at all times by staff, and volunteers and outside instructors should be monitored by staff.
 - If activities require one to one physical contact (ie classes in swimming, gymnastics etc) parents and caregivers should be advised.
 - Ensure staff members are aware of appropriate procedures when giving assistance to students with special needs.
 - Staff should avoid being alone when transporting a child, unless an emergency requires it.
- Additional resources that might be useful can be found at:
 - <http://www.cyf.govt.nz/documents/about-us/publications/27713-working-together-3-0-45ppi.pdf>
 - <http://www.health.govt.nz/our-work/preventative-health-wellness/family-violence/family-violence-guidelines>
 - <https://www.health.govt.nz/system/files/documents/pages/child-abuse-neglect-policy.pdf>