

**ACORN INTEGRATED PRIMARY
SCHOOL
NURSERY & PLAYGROUP**

**PASTORAL CARE
POLICY**

September 2010 updated June 2016

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Acorn Integrated Primary School
Pastoral care

Through its pastoral care arrangements and provision, a school demonstrates its continuing concern for the personal and social development of all of its pupils, regardless of their age or ability, as individuals and as secure, successful and fully participating members of the school and its wider community.

Pastoral care is, perhaps, at its most effective when it is all-pervasive and fully integrated into the school's daily routines, its curriculum and its extra-curricular activities. This approach is often adopted in primary schools and is the approach we are following in Acorn. Aspects of pastoral care, however, such as drug education, health education and relationships & sexuality education, can be taught as discrete topics.

The purpose of this pack is to outline our pastoral care arrangements throughout the school and to include a copy of the following items;

- Child Protection policy
- Anti-Bullying policy
- Behaviour policy and Fair Rules
- Acorn's Code of Conduct
- The Listening Box
- Medication Arrangements

The school's Pastoral Care Co-ordinator is Mrs A Rolloos and any queries should be addressed to her in the first instance.

SCHOOL ETHOS

Our ethos reflects the promotion of moral, intellectual, personal and social development of the children in Acorn. We aim to provide an environment where children feel secure, free from emotional and physical harm, and able to discuss their interests or voice their concerns, confident that they will receive a sympathetic and supportive response. We endeavour to inform and reassure parents that their children are being educated in a safe and caring atmosphere, as outlined in our school aims. We know that a good ethos does not come about by chance, but rather it is achieved by the whole school community promoting and facilitating an atmosphere of care and respect within the formal and informal life of the school.

We aim to contribute effectively to the pastoral care of our pupils by;

- having good relationships between staff, both teachers and ancillary together, who feel valued and work well together as an effective team keeping the pupils' interests and welfare as our main focus;
- establishing good relationships between teachers and pupils, both in and out of the classroom;
- informing parents of pastoral care arrangements and ensuring there is confidence in these;
- having clear lines of communication and flexible relationships with external support agencies, including social services;
- building pupils' self-esteem and self confidence through the promotion of positive behaviour and giving opportunities to develop independence of thought and expression;
- teaching children to work with each other, regardless of religious or political beliefs, therefore growing to value and respect the contributions and views of others.
- developing our use of positive behaviour management to establish high standards of behaviour, while having an effective discipline policy in place, implemented consistently, which pupils regard as fair.

PROVISION

At Acorn, we recognise the importance of the pastoral dimension throughout the education of our children, and make provision for it through our pastoral care arrangements, which incorporate anti-bullying strategies and child protection policies. We have in place a Pastoral Care Co-ordinator, namely Mrs Anna Rolloos, and she liaises with rest of the Senior Management Team to ensure appropriate provision.

Complementary to this system of pastoral care, we are currently in the process of establishing a pastoral care curriculum within the areas of Health Education and Religious Education. However, much of our pastoral care is integrated into our daily routines and assemblies, areas of the curriculum and extra-curricular activities.

We believe that, as a team, we are fully committed to creating an environment of care and trust which ensures the emotional and physical welfare of our children as well as their academic progress. Our staff is well informed of the potential dangers to children from issues such as child abuse, smoking and bullying and to this end, we are implementing requirements and recommendations from DENI.

We aim to provide a range of opportunities where children can gain insight into a range of important areas, including health education and social skills to help them cope with existing challenges and prepare them for the future. We liaise effectively with outside agencies that are able to support us in this area.

We expect high standards of behaviour and implement a range of positive behaviour strategies to help children achieve this. We liaise frequently with parents to develop a partnership approach to learning and behaviour. We aim to be firm, fair, compassionate and consistent in our approach. The achievements of all children, in or out of school, are recognised, valued and celebrated by the school and in this way we feel the pupils' self-esteem is greatly enhanced.

The pupils' involvement in the collation of the Record of Achievement adds a positive dimension to the development of self-esteem. Each teacher keeps a ROA folder to this effect which is passed on from year to year. Children can contribute to this by bringing in any awards they have achieved outside school to be added to their folder e.g. swimming, Irish dancing, art competitions etc.

MANAGEMENT ARRANGEMENTS

A good pastoral care system requires effective management arrangements. The Principal, Senior Management Team and the Board of Governors ensure that the resources available, both human and material, are used efficiently to the benefit of the pupils. They also try to ensure that the contributions of individual members of staff are valued, relationships among staff are harmonious and that morale is high. To this end, Mrs Sharon McIlmail has been appointed Link Teacher with supervisory staff.

We are aware that not all aspects of pastoral care provision are quantifiably measurable. Therefore, we benefit from monitoring and evaluating the effectiveness of our provision in the following ways;

- ensuring our policy and practice receives strong support from staff, pupils and parents as we intend it to;
- monitoring provision by methods such as classroom visits, discussions and assessment of written work to ascertain pupils' level of awareness and capability;
- developing ways to find out attitudes of parents and their concerns.

We then aim to use this information to subsequently develop and modify our existing provision.

We will regularly look at how our planning and policy for pastoral care is working and being reflected within the life of the school. This will reflect our school aims and be arrived through a process of consultation with all staff. We advocate effective liaison with parents and guardians as we believe that they have a major contribution to make regarding the welfare of their children.

We also will review support arrangements for pupils to ensure that our systems are easily manageable and are highly effective for all participants.

Within our school action plan, we will focus on ensuring that there is co-ordinated provision for all areas of pastoral care in the curriculum, which takes account of the uniqueness of children and their need for individualised support and guidance.

DAY-TO-DAY ARRANGEMENTS

Illness: Children falling ill during school hours will be dealt with by the relevant class teacher. Parents or Carers will be contacted by telephone to arrange for the child to be looked at and taken home if necessary. In case of an accident or emergency the relevant medical agencies will be contacted and parents informed in order of priority.

Conflict between children: These issues will be dealt with by the class teacher in the first instance. Children will be encouraged to find a solution to their difficulty by discussing it. If the child or children feel that more help is required they should contact the Designated Teacher for Pastoral Care, Mrs A Rolloos, (see Listening box). Children are encouraged at all times to behave according to the Code of Conduct, correct behaviour is expected from all children.

School Incident Book: This is maintained by Mrs Rolloos to accurately record all details of all agreements, behavioural difficulties etc which are dealt with outside the classroom.

Parental Interviews: These take place twice yearly, in October and following assessments in the second term. Interviews are also arranged by request if necessary.

School Swimming: Swimming lessons take place at for Primary 4 – 7 and we aim to have an adult of each sex supervising the children in the pool changing areas.

Parents who have regular contact with children are being vetted according to the guidelines given to schools by the Police Service of Northern Ireland.

ANTI-BULLYING POLICY

At Acorn we are committed to providing a caring, friendly and safe environment for all our pupils so that they can learn in a relaxed and secure atmosphere. ***Bullying of any kind is unacceptable at our school.*** If bullying does occur, all pupils should be able to tell and know that incidents will be dealt with promptly and effectively. We are a TELLING school – anyone who knows that bullying is happening is expected to tell the staff.

What is bullying?

Bullying is the repeated use of aggression with the intention of hurting another person, which results in pain and distress to the victim.

Bullying behaviour can include;

<i>Physical</i>	Pushing, hitting, kicking or any use of violence
<i>Verbal</i>	Name calling, sarcasm, spreading rumours, teasing
<i>Emotional</i>	Excluding, tormenting (ie hiding books, threatening gestures) Being unfriendly, racial/religious taunts, graffiti, gestures
<i>Sexual</i>	Unwanted physical contact or abusive comments

Objectives

We aim to;

- Ensure that all staff, governors, pupils and parents have an understanding of bullying and actively discourage such behaviour.
- Have a policy of zero tolerance on bullying behaviour.
- Have clear procedures for reporting bullying in place that are easily understood and followed.
- Actively prevent bullying through the use of appropriate materials and other activities.

Procedures

1. All incidences of bullying should be reported to the class teacher. If an incident occurs at lunchtime then the supervisor should be informed, who will then record the incident in the lunchtime book, which will be given to the class teacher at 12.55pm.
2. If a child feels unable to report an incident to the class teacher, they should put a note in the Listening Box, which will allow the matter to be dealt with in confidence by another member of staff.

Serious incidences of bullying will be recorded by the Pastoral Care co-ordinator in a central book. In this case, parents of all children concerned will be informed.

3. Incidences of bullying will be dealt with in accordance with the school discipline policy and sanctions will be applied as necessary.
4. Wherever possible children will be reconciled and an attempt made to help the bully change his/her behaviour.
5. If a serious incident involves assault or theft, it may be necessary to consult with the police.

Consequences

The aim of consequences will be to raise the self esteem of both the victim and the bully in order to prevent a repeat of the behaviour. These may include removal of the bully to allow them to cool down, signing of a school contract, an apology by the bully and finding ways to atone for the behaviour, or any of the sanctions used in the school discipline policy.

Prevention

We participate in the annual Anti Bullying Week initiatives. We will use PSHE methods to help children prevent bullying. As and when appropriate, this may include writing a set of school rules, signing a behaviour contract, writing stories about bullying, reading stories or having them read to a class or at assembly, discussing bullying and making up role plays.

Acorn Code of Conduct

At Acorn we believe that all our actions should reflect our Code of Conduct, and as a school community these are the beliefs we are striving for.

A – treat **adults** with respect

C – treat other **children** as you would want to be treated

O – do **our** best

R – **Resources** should be treated properly

N – every day a **new** day

POLICY ON CHILD PROTECTION

MISSION STATEMENT

The Child Protection Programme at Acorn Integrated Primary School, seeks to support the child's development in ways which foster security, confidence and independence. It is viewed as central to the well-being of the individual and is, therefore, an intrinsic part of all aspects of the curriculum.

AIMS

*To enhance children's

1. self esteem
 2. self confidence
 3. assertiveness
 4. communication skills
 5. personal safety
- by developing skills to make informed choices.

*To ensure that staff and pupils are able to recognise abuse of power.

*To ensure that staff are well-informed about Child Protection issues.

*To ensure that staff are well-informed about school procedures for reporting concerns.

*To ensure that staff are aware of their duty of care and their responsibility to report concerns.

*To provide for effective communication between children, teachers, parents and other adults working with children.

*To develop co-operation with statutory agencies.

MEANS Means by which the policy will be put into effect

*By providing an environment within the school and classroom in which every child is valued as a member of the community.

*By allowing a variety of opportunities for class and group discussion of thoughts and feelings in an atmosphere of trust, acceptance and tolerance.

*By identifying a range of people to whom children can turn to share concerns and discuss problems.

*By developing awareness and skills of personal safety.

*By monitoring children's physical, emotional, social, intellectual and behavioural development.

*By promoting staff awareness of types and indicators of child abuse and neglect, the appropriate response to the child, knowledge of procedures for reporting concerns and their statutory responsibilities.

*By informing staff of the importance and nature of appropriate record keeping and report writing, and the need to make a clear distinction between factual reporting and personal opinion.

*By informing parents of the school's child protection policy.

*By establishing regular contact with appropriate agencies.

PROCEDURE FOR REPORTING AN INCIDENT OF CHILD ABUSE

Child makes a disclosure to teacher or teacher has concerns about child either as a result of one observation or many observations over a period of time. Teacher should make notes of what was said or observed and must **ACT PROMPTLY**.



Teacher refers matter to designated teacher, discusses it with designated teacher and makes full notes.



Designated teacher meets with Headteacher (or in headteacher's absence, senior teacher) to plan course of action. He/she ensures that a written record is made.



Headteacher/Designated teacher must contact:

- Social Services
- NELB Designated Officer
- Chairperson of Board of Governors - indicating that it is a Child Protection issue
- complete referral forms

If there is any doubt about whether to take further action, advice is available from:

→ NEELB designated officer;
Advisory Teacher for Child Protection;
Social Services;
School Doctor;
Education Welfare Officer;
NSPCC.

When seeking such advice names should not be given. One is simply making an enquiry.

Child Protection/Safeguarding Children

Our Child Protection and Safeguarding Team are:

BoG Chairperson:

Mrs D Ferguson

Designated Teacher:

Mrs A Rolloos

Deputy Designated Teacher:

Mrs S McIlmail

Principal and Health and Safety Co-ordinator:

Mrs C Webb

Governors with Child Protection responsibility:

Mrs D Ferguson and Dr A Gregory

DEFINITIONS OF ABUSE

Children may be abused by a parent, a sibling, another relative, a carer (i.e. a person who has actual custody of a child, such as a foster parent or a staff member in a residential home), an acquaintance or a stranger, who may be an adult or a young person. The abuse may be the result of a deliberate act or of failure on the part of a parent or carer to act or to provide proper care, or both. The abuse may take a number of forms including:-

Neglect:

The actual or likely persistent or significant neglect of a child, or the failure to protect a child from exposure to any kind of danger, including cold or starvation, or persistent failure to carry out important aspects of care, resulting in the significant impairment of the child's health or development including failure to thrive.

Physical Abuse:

Actual or likely deliberate physical injury to a child, or wilful or neglectful failure to prevent physical injury or suffering to a child.

Sexual Abuse:

Actual or likely sexual exploitation of a child. The involvement of children and adolescents in sexual activities they do not truly comprehend, to which they are unable to give informed consent or that violate the social taboos of family roles.

Emotional Abuse:

Actual or likely persistent or significant emotional ill-treatment or rejection resulting in severe adverse effects on the emotional, physical and/or behavioural development of a child. All abuse involves some emotional ill-treatment. This is where it is the main or only form of abuse.

** From the Children (Northern Ireland) Order 1995, Guidance and Regulations, Volume 6, "Co-operating to Protect Children".*

Grave Concern:

While strictly speaking not a form of abuse but a category of registration of abuse, this term covers children where situations do not currently fit any of the four categories above but where social and medical assessments indicate that they are at significant risk of above. These could include situations where another child in the household has been harmed or the household contains a known abuser.

RECOGNISING ABUSE

Detection of abuse is seldom straightforward and rarely clear cut. It is important, therefore, as a teacher/classroom assistant seeing children over long periods, you may notice physical and behavioural indicators which may be evidence of abuse. It is important that you can recognise these signs and symptoms. **None of the indicators, either singly, or in any combination prove conclusively that a child has been abused.**

Physical Abuse

Physical Indicators

Unexplained bruises - in various stages of healing - grip marks on arms; slap marks; human bite marks; welts; bald spots; unexplained / untreated burns, especially cigarette burns or immersion burns (glove like in appearance); unexplained fractures; lacerations or abrasions; bruising on both sides of the ear - (symmetrical bruising should be treated with suspicion); injuries occurring in a time pattern e.g. every Monday.

Behavioural Indicators

Self destructive tendencies; aggressive towards other children; behavioural extremes (withdrawn or aggressive); appears frightened or cowed in presence of adults; improbable excuses to explain injuries; chronic runaway; uncomfortable with physical contact; comes to school early or stays late as if afraid to be at home; clothing inappropriate to weather - to hide part of body; Violent themes in art work or stories.

Neglect

Physical Indicators

Looks very thin, poorly or sad; constant hunger; lack of energy; untreated medical problems; special needs of child not being met; constant tiredness; inappropriate dress; poor hygiene; repeatedly unwashed; smelly; repeated accidents especially burns.

Behavioural Indicators

Tired or listless (falls asleep in class); steals food; compulsive stealing; begging from class friends; withdrawn; lacks concentration; misses school medical; reports that no carer is at home; low self-esteem; persistent non-attendance at School; exposure to violence including unsuitable videos.

Emotional Abuse

Physical Indicators

Well below average in height and weight; “failing to thrive” poor hair and skin; alopecia; swollen hands and feet; recurrent diarrhoea, wetting and soiling; sudden speech disorders; signs of self mutilation; signs of solvent abuse (e.g. mouth sores, smell of glue, drowsiness); extremes of physical, mental and emotional development (e.g. anorexia, vomiting, stooping).

Behavioural Indicators

Apathy and dejection; inappropriate emotional responses to painful situations; rocking/head-banging; inability to play; indifference to separation from family; indiscriminate attachment; reluctance for parental liaison; fear of a new situation; chronic runaway; attention seeking/needing behaviour; poor peer relationships.

Sexual Abuse

Physical Indicators

bruises, scratches, bite marks or other to breasts, buttocks, lower abdomen or thighs, bruises or bleeding in genital or anal areas; torn, stained or bloody underclothes; chronic ailments such as recurrent abdominal pains or headaches; difficulty walking or sitting; frequent urinary infections; avoidance of lessons especially PE, games; anorexia/gross over-eating.

Behavioural Indicators

What the child tells you; withdrawn; chronic depression; excessive sexual precociousness; seductiveness; children having knowledge beyond their usual frame of reference e.g. young child who can describe details of adult sexuality; parent/child role reversal; overly concerned for siblings; poor self-esteem; self devaluation; lack of confidence; peer problems; lack of involvement; massive weight change; suicide attempts (especially adolescents); hysterical/angry outbursts; lack of emotional control; sudden school difficulties e.g. deterioration in school work or behaviour; inappropriate sex play; repeated attempts to run away from home; unusual or bizarre sexual themes in children's art work or stories; vulnerability to sexual and emotional exploitation; promiscuity; exposure to pornographic material.

Indicators of Sexual Abuse by Child or Young Person

Background

Previous therapy;
witnessed family violence;
abused (including physical, emotional, sexual and neglect);
parental loss;
feels persecuted, by parents, by system;
substance abuse.

Behaviour

Inappropriate sexual contact with another child e.g. fondling, simulated sexual acts;
exhibitionism;
voyeurism;
obscene calls;
stealing underwear;
uninvolved with peer groups in acceptable social ways;
isolated;
no social activities e.g. youth club;
obsessive interest in pornographic material;
lack of empathy for others.

ABUSE CARRIED OUT BY CHILDREN AND YOUNG PEOPLE

When abuse of a child is alleged to have been carried out by another child or young person, it is important that the appropriate Child Protection procedures are followed in respect of both the victim and the alleged abuser.

Most cases of physical or emotional ill-treatment within school may be dealt with in accordance with the school's policy on bullying, except in the most serious cases where statutory agencies and/or Educational Psychology Service may be involved.

The problem of sexual abuse by children and young people is increasingly being recognised. When sexual activity takes place and there is lack of consent, lack of equality (e.g. size, intellectual capability, strength or age) or coercion, then it is sexual abuse.

An abusing child is often an abused child.

ABUSE CARRIED OUT BY A MEMBER OF STAFF

If a member of staff is suspected of child abuse the headteacher must be informed immediately by the person who suspects. It is then the headteacher's duty to notify the EA and the social services. The Chairperson of the Governors should also be informed.

ABUSE CARRIED OUT BY THE HEADTEACHER

If it is the headteacher who is suspected, the staff member who is aware of the possible offence, must report it to the designated teacher who will report it to the EA, and the Chairperson of the Governors. It is then the EA's responsibility to notify the Social Services.

N.B. Need for Constant Vigilance

Abuse can occur inside and outside the family. Many child abusers cultivate an image of respectability and may appear to be extremely co-operative with schools and other agencies.

They may foster a belief that such a person could not be an abuser.

Paedophiles will plan and infiltrate social groups, work or voluntary organisations, where they can have access to children.

THE ROLE OF THE DESIGNATED TEACHER

Organisation and Administration

- Maintain a Child Protection Register.
- Bring the EA Child Protection Guidelines and AIPS Child Protection Policy and Procedures to the attention of all who work in the school.
- Make new staff, on appointment, aware of the Guidelines and AIPS Policy and Procedures.
- Inform appropriate staff about children in their care who are on the Child Protection Register, while maintaining as much confidentiality as is possible at all times.
- Liaise with the headteacher when a case of child abuse, or a suspected case, occurs.
- With the consent of the principal contact the relevant Social Services personnel about a case or suspected case of child abuse.
- Attend training courses in child protection and regularly organise similar training for colleagues.
- Be thoroughly familiar with EA. guidelines.

THE ROLE OF THE HEADTEACHER

The headteacher's role in child protection is of central importance and while day-to-day child protection matters may be delegated to the designated teacher the headteacher still retains responsibility. It is important therefore that the role of designated teacher is clearly understood. A referral to Social Services should be made following consultation between the designated teacher and the headteacher or acting headteacher.

Advice

When the designated teacher comes to the headteacher with an incident to be referred he/she may want to talk to someone before initiating the referral procedures. Advice is available from:

EA Designated Officer: - Elaine Craig Ph 028 2565 3333

Education Welfare Officer: Phyllis Lewis Ph 028 9085 4826

Social Services:- Children's Services, Ellis Street Ph 028 9331 5800

NSPCC:- Ph 0800 800 500

School Doctors:- Dr. C Bailey, Whiteabbey Hospital Ph 028 9086 5181

School Nurse:- Dawn Lyttle, Carrickfergus Health Centre. Ph 028 9331 5800

When seeking advice **DO NOT** name a child. A child should only be named at the referral stage.

THE ROLE OF THE BOARD OF GOVERNORS

The Board of Governors must ensure that the school has a child protection policy in place and that staff implement the policy. The Board of Governors should be aware of child protection issues and the implications for schools.

It may not be in the interests of children who are the subject of child protection investigations and allegations, to make the details of such investigations and allegations known to the entire Board of Governors.

The headteacher and deputy head will inform the Chairperson of the Board of Governors when an incident occurs. Confidentiality is crucial and information should only be passed on a 'need to know' basis.

THE ROLE OF THE EA DESIGNATED OFFICER

The Designated Officer has responsibility for co-ordinating board policy and action on child protection in consultation with other statutory agencies. This includes monitoring and following up all child protection referrals, reviewing board guidelines and advice and organising inservice training on child protection issues.

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The Designated Officer is responsible for maintaining close links with the other agencies involved in child protection. The officer is available at all times to advise and assist schools on matters of child protection.

The Designated Officer represents the NEELB on the North Eastern Area Child Protection Committee and on other relevant bodies and meets with parents and other interested groups on matters related to child protection.

THE ROLE OF THE EDUCATION WELFARE OFFICER

Education Welfare Officers have always been involved in child protection work and have been a source of advice and support to schools. The Education Welfare Officer is sometimes in a position to add some family background to a school's knowledge of a child.

Education Welfare Officers are available to assist and advise schools and because of their close contacts with families and schools there should be close liaison with designated teachers as required.

In some special circumstances Education Welfare Officers make referrals on behalf of schools. Headteachers and designated teachers may confer with Education Welfare Officers if they are unsure of how to act.

An Education Welfare officer to whom a disclosure is made within school, must consult the school's designated teacher and agree as to who will make the referral.

When the E.W.O. or Educational Psychologist is the first to identify an abuse problem it is their responsibility to inform the headteacher and the EA. The EA will be responsible for contacting the social services.

THE ROLE OF SOCIAL SERVICES

Social Services and N.S.P.C.C. are agencies charged with responsibility for child protection.

If the Social Services find out about child abuse first, it is their duty to inform the school and provide them with all relevant details. It will then be the school's responsibility to pay particular attention to the attendance and development of all such children and to report any cause for further concern, to social services. The Social Services must in turn inform the school of any termination of a court order or change in status or placement of the child. If such a child moves school the headteacher shall be responsible for informing Social Services who will then ensure that the needed information is passed on to the new school.

WHAT HAPPENS FOLLOWING A REFERRAL?

Once a referral has been made, Social Services and the Police will hold a strategy discussion within 24 hours. This can be done by telephone. The purpose of the discussion is to:-

- examine the available information about the child and family.
- plan the investigation.
- agree the role of each agency.
- agree the extent of joint investigation.

Decisions should be reached on the initial action to be taken, by whom and when, and the arrangements for reporting back. Schools should be informed of the outcomes of the discussion. School staff should keep a written record of plans and agreements made with other agencies, including those agreed by telephone.

Join Investigations by Statutory Agencies.

Specially trained social workers and police officers from CARE (Child Abuse and Rape Enquiry) teams carry out a joint investigation in order to minimise the trauma for a child. Repeated interviewing can be a further abuse of a child. The police focus on criminal investigation and Social Services on child protection. However, both agencies work on the principle that the child's interests are paramount.

Statutory agencies ie Social Services and the police will carry out any investigation. **It is not the role of any member of school staff to investigate nor to contact the child's family on a referral.** Contact with a family should only be made after agreement with the statutory agencies.

Schools should be kept informed of decisions made by other agencies and the headteacher should feel free to make contact with other agencies.

If a child protection case conference is convened this should be held not later than 15 days after initial referral to Social Services. The headteacher will be invited and should attend or send an appropriate member of staff. Schools should be represented at all Child Protection Case Conferences of school age children from the school whether or not the school made the initial referral.

The purpose of the case conference is to exchange information and plan together. Its function is to decide whether or not to place a child's name on the Child Protection Register, to draw up a written protection plan and to identify a core group to implement the protection plan. Schools should be notified when a child's name is placed on the Register, similarly they should be notified when a name is removed from the Register.

These decisions should be arrived at by unanimous or majority agreement. Any dissent should be recorded.

A case co-ordinator will be identified from Social Services and will have responsibility for co-ordinating and developing the multi-agency protection plan, and who provides a focus for communication within the core group and with other professionals.

It will be the responsibility of individual agencies to implement the parts of the plan relating to them and to communicate with the key worker and others as necessary.

At the initial Case Conference, the timing of the review, within three months, will be agreed. Any appropriate professional can ask for a case review to be convened earlier than this, should there be cause for concern.

REPORTS

Reports prepared for Child Protection Conferences should focus on the child's educational progress and achievements, attendance, behaviour, participation, relations with other children, and, where appropriate, the child's appearance.

If relevant, reports should include what is known about the child's relations with his/her family and the family structure.

Reports should be objective and based on evidence. They should distinguish between fact, observation, allegation and opinion. Reports may be made available to the child's parents at the Child Protection Conference.

If a school cannot be represented at the Case Conference, a written report should be sent. In the initial stages reports may be restricted at a school's request.

**ACORN INTEGRATED PRIMARY SCHOOL
BEHAVIOUR POLICY AND FAIR RULES**

Please refer to the Positive Behaviour Policy

This policy has been drawn up with the health and safety of all pupils and staff in this school in mind. As always, the well being of the pupil is of paramount importance.

FIRST AID

1. In the case of slight illness the parent will be asked to collect the child from school.
2. In the case of slight injury a member of staff will render First Aid, ie minor bumps - application of an ice pack, minor cuts and grazes - use of sterile wipes and plasters.
3. In the event of a more serious emergency arising the school will contact parents, or emergency contact person, doctor and hospital in order and as far as necessary.

ADMINISTRATION OF MEDICINES

Pupils should not be sent to school when they are ill but sometimes doctors will advise that pupils should attend school while still needing to take medicine. This may be because they are suffering from a chronic illness or allergy (such as diabetes or asthma) or because they are recovering from a short-term illness and are undergoing a course of treatment needing antibiotics.

SHORT TERM MEDICATION

Administration of Drugs: This school by agreement will administer drugs, following completion of form AM2. Asthma: parents will be expected to provide an inhaler, labelled with their child's name, solely for use within school. Inhalers provided will be kept securely in school. Parents will be responsible for providing the replacement when it reaches the use by date.

EMERGENCY MEDICATION

There may be cases where preparation can be made for emergencies, eg peanut allergy, diabetic coma etc. In these cases we expect parents to warn the school of the possibility of an emergency arising. We need to be informed in writing and have the medication in school with the fullest possible instructions attached, including care plan. Training in emergency procedures will also be given to staff. This would be arranged by means of an interview with the parent to obtain background information and to draw up an agreement and contingency plan with the school - eg emergency number to page the parent etc.

RECORD

A record will be kept of all First Aid treatment and administration of medication to pupils of this school.

Advice for children

Help is there if you need it.

If you are having problems

1. Tell your teacher.
2. At lunchtime tell the supervisor.
3. If you have something you really need to talk about but can't tell your own teacher speak to me (Mrs Rolloos)
4. If you can't tell anyone at school or home phone Child Line (number is on the Pastoral Care Board).

When to contact Mrs Rolloos

- If you have asked your teacher for help and things have not got better
- If you need to talk about something private
- If you are in trouble and need help.

You don't use this if

- You fall out with your best friend over something silly
- If you have got into a bad mood and started a fight
- If you have been told off for doing something wrong

What happens?

I will arrange a time to speak to you to get more details.

I will discuss your problem with you and together we will try to find a solution.

A record is kept of what happened but this record is only shown to the people who need to know, it is private.

From time to time I will check with you to see how things are going.

Mrs Rolloos