



## Child Protection Policy

"Everyone who works with children should do what is in the best interests of the child."  
Article 3 United Nations Rights of the Child

This policy is to be used in conjunction with the guidelines issued by The Children, Young People, Education and Skills Department (CYPES).

### Child Protection Statement

We recognise our moral and statutory responsibility to safeguard and promote the welfare of all children. We endeavour to provide a safe and welcoming environment where children are respected and valued. We will act quickly and follow our procedures to ensure children receive early help and effective support, protection and justice.

### Aims

At Trinity School we aim to ensure that all members of staff are clear about the actions required with regard to child protection issues.

This policy has been produced to:

- raise the awareness of all staff and identify responsibility in reporting possible cases of abuse
- lay down the correct procedures for those who encounter an issue of child protection
- ensure effective communication between all staff when dealing with child protection issues

### Principles

We believe that:

- the health, safety and well-being of all our children are of paramount importance
- children have a right to be safe in our school and to be protected regardless of age, gender, race, culture or disability
- children are treated with respect at Trinity School
- we foster an atmosphere that encourages all children to do their best
- we provide opportunities that enable our children to take and make decisions for themselves
- our teaching of Personal, Social and Health Education and Citizenship, as part of the school's curriculum, helps to develop appropriate attitudes in our children and makes them aware of the impact of their decisions on others. It also teaches them how to recognise different risks in different situations, and how to behave in response to them

### Procedures

- The Deputy Headteacher Sally Sleath ([s.sleath@trinity.sch.je](mailto:s.sleath@trinity.sch.je)) is the designated person for Child Protection. In some circumstances, including her absence, this responsibility may be delegated to the Head teacher, Katy McMahon ([k.mcmahon@trinity.sch.je](mailto:k.mcmahon@trinity.sch.je)) Emma O'Connell (Lead TA) is also a DSL ([e.oconnell@trinity.sch.je](mailto:e.oconnell@trinity.sch.je)) as is Sally-Ann Fillieul (Lead TA, [s.fillieul@trinity.sch.je](mailto:s.fillieul@trinity.sch.je))
- All staff need to be alert to the signs of abuse as detailed in the Keeping Children Safe in Education (September 2024, Government of Jersey):  
[P Keeping Children Safe in Education 20241007DP.pdf](#)

If staff suspect that a child may be a victim of abuse, they **immediately** inform the designated person about their concerns. Abuse can be of a sexual, emotional or physical nature. It can also be the result of neglect.

- Any action that the designated person takes when dealing with an issue of child protection must be in line with the procedures outlined in the Jersey Child Protection Guidelines.
- The school's named co-ordinator works closely with the Children's Service Department and the Child Protection Co-ordinator for CYPES when investigating any allegations of abuse. All parties involved handle such investigations in a sensitive manner, but the interest of the child is of paramount importance.
- If a child alleges abuse, parents must be informed in advance of the school making a referral to the Children and Families Hub, unless this increases the risk to child. Advice should be taken from Multi Agency Safeguarding Hub (MASH).
- Procedures for referral are made explicit in the Jersey Child Protection Guidelines. All cases should be referred at the earliest opportunity to the Children and Families Hub by telephone consultation on 519000, or if advised to, via the online form. Out of office hours the police should be contacted on 612612.
- The Independent Safeguarding and Standards is an independent service that can be contacted [iss@health.gov.je](mailto:iss@health.gov.je) or by telephone on 01534 443566
- We regard all information relating to individual child protection issues as confidential, and we treat this accordingly. We only pass information on to appropriate persons.
- We require all adults employed in school and all regular volunteer helpers to undertake a police record (DBS) check in order to ensure that there is no evidence of offences involving children or abuse.
- All adults visiting the school to undertake work from outside of CYPES are required to show their DBS certificate/number upon arrival at the school office. All adults visiting school from within CYPES must have their DBS recorded on the list provided to the school by CYPES.
- All adults in the school receive training to raise their awareness of abuse and their knowledge of agreed local child protection procedures.
- There may be times when adults in our school, in the course of their duty, use physical intervention to restrain children. The Headteacher requires the adult involved in any such incident to respond according to the written restraint policy, to report this to her immediately and to complete an incident form.

#### **Monitoring and Review:**

The Leadership Team is responsible for the annual review and monitoring of practice and policy to ensure that it is consistent with CYPES Guidelines and Jersey legislation.

Reviewed December 2019 / February 2021/ March 22/ Sept 22/May 23/ SS Nov 2023/SS Nov 2024/SS April 2025

## **Guidance re potential signs of abuse**

### **Recognising Physical Abuse**

The following are often regarded as indicators of concern:

- An explanation which is inconsistent with an injury
- Several different explanations provided for an injury
- Unexplained delay in seeking treatment
- The parents / carers are uninterested or undisturbed by an accident or an injury
- Parents are absent without good reason when their child is presented for treatment
- Repeated presentation of minor injuries (which may represent a 'cry for help' and if ignored could lead to a more serious injury.
- Family use of different doctors and A&E departments
- Reluctance to give information or mention previous injuries

#### **Bruising**

- Children can have accidental bruising, but the following must be considered as non accidental
- unless there is evidence or an adequate explanation provided:
- Any bruising to a pre-crawling or pre-walking baby
- Bruising in or around the mouth, particularly in small babies which may indicate force feeding
- Two simultaneous bruised eyes, without bruising to the forehead (rarely accidental, though a single bruised eye can be accidental or abusive)
- Repeated or multiple bruising on the head or on sites unlikely to be injured accidentally
- Variation in colour possibly indicating injuries caused at different times
- The outline of an object used e.g. belt marks, hand prints or a hair brush
- Bruising or tears around, or behind, the earlobe/s indicating injury by pulling or twisting
- Bruising around the face
- Grasp marks on small children
- Bruising on the arms, buttocks and thighs may be an indicator of sexual abuse

#### **Bite Marks**

- Bite marks can leave clear impressions of the teeth. Human bite marks are oval or crescent shape. Those over 3 cm in diameter are more likely to have been caused by an adult or an older child.
- A medical opinion should be sought where there is any doubt over the origin of the bite.

#### **Burns and Scalds**

- It can be difficult to distinguish between accidental and non-accidental burns and scalds, and will always require experienced medical opinion. Any burn with a clear outline may be suspicious e.g:
- Circular burns from cigarettes (but may be friction burns if along the bony protuberance of the spine)
- Linear burns from hot metal rods or electrical fire elements
- Burns of uniform depth over a large area
- Scalds that have a line indicating immersion or poured liquid (a child getting into hot water of its own accord will struggle to get out and cause splash marks)
- Old scars indicating previous burns / scalds which did not have appropriate treatment or adequate explanation

- Scalds to the buttocks of a small child, particularly in the absence of burns to the feet, are indicative of dipping into a hot liquid or bath.

#### Fractures

- Fractures may cause pain, swelling and discoloration over a bone or a joint.
- Non-mobile children rarely sustain fractures.

There are grounds for concern if:

- The history provided is vague, non-existent or inconsistent with the fracture type
- There are associated old fractures
- Medical attention is sought after a period of delay when the fracture has caused symptoms such as swelling, pain or loss of movement
- There is an unexplained fracture in the first year of life

#### Scars

A large number of scars or scars of different sizes or ages, or on different parts of body, may suggest abuse.

#### Behavioural Indications

Some children may behave in ways that alert you to the possibility of physical injury, for

Example:

- Withdrawal from physical contact
- Fear of returning home
- Self destructive tendencies
- Aggression towards others

#### Recognising Emotional Abuse

Emotional abuse may be difficult to recognise, as the signs are usually behavioural rather than physical. The manifestations of emotional abuse might also indicate the presence of other kinds of abuse.

The indicators of emotional abuse are often also associated with other forms of abuse.

The following may be indicators of emotional abuse:

- Developmental delay
- Abnormal attachment between a child and parent / carer e.g. anxious, indiscriminate or no attachment
- Aggressive behaviour towards others
- Scape-goated within the family
- Frozen watchfulness, particularly in pre-school children
- Low self esteem and lack of confidence
- Withdrawn or seen as a 'loner' – difficulty relating to others
- Over-reaction to mistakes
- Fear of new situations
- Inappropriate responses to painful situations
- Neurotic behaviours
- Self harming
- Running away

#### Recognising Neglect

Evidence of neglect is built up over a period of time and can cover different aspects of parenting.

Indicators include:

- Failure by parents or carers to meet the basic essential needs e.g. adequate food, clothes,
- warmth, hygiene and medical care

- A child seen to be listless, apathetic and unresponsive with no apparent medical cause
- Failure of child to grow within normal expected pattern, with accompanying weight loss
- Child thrives away from home environment
- Child frequently absent from or late for school
- Child left with adults who are intoxicated or violent
- Child abandoned or left alone for excessive periods
- Compulsive stealing or scavenging

### **Recognising Sexual Abuse**

Boys and girls of all ages may be sexually abused and are frequently scared to say anything due to guilt and / or fear. This is particularly difficult for a child to talk about and full account should be taken of the cultural sensitivities of any individual child / family.

Recognition can be difficult, unless the child discloses and is believed. There may be no physical signs and indications are likely to be emotional / behavioural.

Some behavioural indicators associated with this form of abuse are:

- Inappropriate sexualised conduct
- Sexually explicit behaviour, play or conversation, inappropriate for the child's age
- Continual and inappropriate or excessive masturbation
- Self-harm (including eating disorder, self mutilation and suicide attempts)
- Involvement in prostitution or indiscriminate choice of sexual partners
- An anxious unwillingness to remove clothes for e.g. sports events (but this may be related to
- cultural norms or physical difficulties)

Concerning changes in behaviour or general presentation

- Regressive behaviour
- Distrust of a particular adult
- Unexplained gifts of money
- Sleep disturbances or nightmares
- Phobias or panic attacks

Some physical indicators associated with this form of abuse are:

- Pain or itching of genital area
- Blood on underclothes
- Pregnancy in a younger girl where the identity of the father is disclosed
- Physical symptoms such as injuries to the genital or anal areas, bruising to buttocks, abdomen and thighs, sexually transmitted disease, presence of semen in vagina, anus, external genitalia or clothing
- Wetting or soiling