



Outcome statement

Students at this school thrive, belong and achieve to the best of their ability. The school is committed to the prevention of child abuse and neglect and to the protection of all children.

Scoping

All staff members (including contractors and volunteers) are expected to be familiar with this policy, its associated procedures and protocols and abide by them.

Advice will be sought through appropriate agencies in all cases of suspected or alleged abuse.

In line with Section 15 of the [Oranga Tamariki Act 1989](#), any person in our school/kura who believes that any child or young person has been or is likely to be harmed (whether physically, emotionally or sexually), ill-treated, abused, neglected or deprived must follow school procedures and may also report the matter to a social worker or the local Police.

Delegations

Although ultimate accountability sits with the board, the board delegates responsibility to the principal to ensure that all child safety procedures are implemented and available to all staff, contractors, volunteers and parents.

Expectations and limitations

The principal must:

- develop appropriate procedures to meet child safety requirements as required and appropriate to the school
- comply with relevant legislative requirements and responsibilities
- make this policy available on the school's internet site or available on request
- ensure that every contract or funding arrangement that the school enters into requires the adoption of child protection policies where required
- ensure the interests and protection of the child are paramount in all circumstances
- recognise the rights of family/whānau to participate in the decision making about their children
- ensure that all staff are able to identify the signs and symptoms of potential abuse and neglect and deal with disclosures by children and allegations against staff members and are able to take appropriate action in response
- support all staff to work in accordance with this policy to work with partner agencies and organisations to ensure child protection procedures are understood and implemented
- promote a culture where staff feel confident they can constructively challenge poor practice or raise issues of concern without fear of reprisal
- consult, discuss and share relevant information with the board or designated person in line with our commitment to confidentiality and information-sharing protocols in a timely way regarding any concerns about an individual child
- seek advice as necessary from NZSTA advisers on employment matters and other relevant agencies where child safety issues arise
- make available professional development, resources and/or advice to ensure all staff can carry out their roles in terms of this policy
- ensure that this policy forms part of the initial staff induction programme for each staff member.

What constitutes abuse and neglect:

a. Physical abuse – 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.

b. Sexual abuse – 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.

c. Emotional abuse – 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.

d. Neglect – 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).

Possible Signs of **Abuse** May Include:

- Physical signs (e.g., unexplained injuries, burns, fractures, unusual or excessive itching, genital injuries, sexually transmitted diseases).
- Developmental delays (e.g., small for their age, cognitive delays, falling behind in school, poor speech and social skills).
- Emotional abuse/neglect (e.g., sleep problems, low self-esteem, obsessive behaviour, inability to cope in social situations, sadness/loneliness and evidence of self-harm).
- Behavioural concerns (e.g., age inappropriate sexual interest or play, fear of a certain person or place, eating disorders/substance abuse, disengagement/neediness, aggression).
- The child talking about things that indicate abuse (sometimes called an allegation or disclosure).

Possible Signs of **Neglect** May Include:

- Physical signs (e.g., looking rough and uncared for, dirty, without appropriate clothing, underweight).
- Developmental delays (e.g., small for their age, cognitive delays, falling behind in school, poor speech and social skills). Emotional abuse/neglect (e.g., sleep • Behavioural concerns (e.g., disengagement/ neediness, eating disorders/substance abuse, aggression).
- Neglectful supervision (e.g., out and about unsupervised, left alone, no safe home to return to).
- Medical neglect (e.g., persistent nappy rash, low self-esteem, obsessive behaviour, inability to cope in social situations, sadness/loneliness and evidence of self-harm). or skin disorders or other untreated medical issues).

Legislative compliance

<http://www.nzsta.org.nz/> – further information including frequently asked questions

<http://www.education.govt.nz/>

[Vulnerable Children Act 2014](#)

[Oranga Tamariki Ministry for Children](#) – further information and sample child protection templates

Review cycle	
Date reviewed	
Next Review	
Signed BOT Chairperson	