

Appendix to Safeguarding policy for FGM

Rationale:

St Paul's Peel C.E. Primary has robust and rigorous safeguarding procedures and takes its responsibilities of child protection seriously.

Female Genital Mutilation is a form of child abuse and as such is dealt with under the schools Child Protection/Safeguarding policy. At St Paul's Peel C.E. Primary, the Headteacher and Governors expect Safeguarding to be everybody's responsibility expect all staff to adhere to and follow these policies. The school uses the World Health Organisation definition as written below.

Definition of FGM:

"Female Genital Mutilation (FGM) comprises of all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs whether for cultural or non-therapeutic reasons."

(World Health Organisation-1997)

Government documents:

The school has taken information from several documents to write this appendix. These include, The South West Child Protection Procedures Guidelines for FGM www.swcpp.org.uk, the Government Home Office guidelines, the Ofsted guidelines for "Inspecting Safeguarding".

The UK Government has written advice and guidance on FGM that states;

"FGM is considered child abuse in the UK and a grave violation of the human rights of girls and women. In all circumstances where FGM is practised on a child it is a violation of the child's right to life, their right to their bodily integrity, as well as their right to health. The UK Government has signed a number of international human rights laws against FGM, including the Convention on the Rights of the Child."

"Girls are at particular risk of FGM during school summer holidays. This is the time

when families may take their children abroad for the procedure. Many girls may not be aware that they may be at risk of undergoing FGM.

UK communities that are most at risk of FGM include Kenyans, Somalis, Sudanese, Sierra Leoneans, Egyptians, Nigerians and Eritreans. However women from non-African communities that are at risk of FGM include Yemeni, Kurdish, Indonesian and Pakistani women."

As from January 2013 Ofsted have included FGM in their "Inspecting Safeguarding" briefing for Inspectors. Annex 4 contains questions and information about FGM for inspectors. Below are excerpts from this document;

ANNEX 4. FEMALE GENITAL MUTILATION

"...Designated senior staff for child protection in schools should be aware of the guidance that is available in respect of FGM, and should be vigilant to the risk of it being practised. Inspectors should be also alert to this when considering a school's safeguarding arrangements, and where appropriate ask questions of designated staff.

Key questions could include:

- . Are designated senior staff for child protection aware of the issue and have they ensured that staff in the school are aware of the potential risks?
- . How alert are staff to the possible signs that a child has been subject to female genital mutilation or is at risk of being abused through it?
- . Has the school taken timely and appropriate action in respect of concerns about particular children?"

In light of this information St Paul's Peel C.E.Primary School has decided to implement these policies and procedures.

Procedures School has in place:

St Paul's Peel C.E. Primary School has decided to take proactive action to protect and prevent our girls being forced to undertake FGM. The Headteacher and Governors do this in four ways:

1. A robust attendance policy that does not authorise holidays, extended or otherwise.
2. FGM training for Child Protection leads and disseminated training for all staff at the front line dealing with the children.
3. FGM discussions by Child Protection lead with parents of children from practising communities who are at risk.
4. Comprehensive PSHE and Relationship and Sex Education delivered to KS2 children with a discussion about FGM with Year 6 girls.

In order to protect our children it is important that key information is known by all of the school community.

Indications that FGM has taken place:

- . Prolonged absence from school with noticeable behaviour change – especially after a return from holiday.
- . Spend long periods of time away from the class during the day.
- . A child who has undergone FGM should be seen as a child protection issue.

Medical assessment and therapeutic services to be considered at the Strategy Meeting.

Indications that a child is at risk of FGM:

- . The family comes from a community that is known to practice FGM - especially if there are elderly women present.
- . In conversation a child may talk about FGM.
- . A child may express anxiety about a special ceremony.
- . The child may talk or have anxieties about forthcoming holidays to their country of origin.

. Parent/Guardian requests permission for authorised absence for overseas travel or you are aware that absence is required for vaccinations.

. If a woman has already undergone FGM – and it comes to the attention of any professional, consideration needs to be given to any Child Protection implications e.g. for younger siblings, extended family members and a referral made to Social Care or the Police if appropriate.

If we have concerns that children in our school community are at risk or victims of Female Genital Mutilation then we refer to the South West Child Protection Procedures

Guidelines for FGM (www.swcpp.org.uk). We may;

ASK

Ask children to tell you about their holiday. Sensitively and informally ask the family about their planned extended holiday ask questions like;

- . Who is going on the holiday with the child?
- . How long they plan to go for and is there a special celebration planned?
- . Where are they going?
- . Are they aware that the school cannot keep their child on roll if they are away for a long period?
- . Are they aware that FGM including Sunna is illegal in the U.K even if performed abroad?

If you suspect that a child is a victim of FGM you may ask the child;

- . Your family is originally from a country where girls or women are circumcised – Do you think you have gone through this?
- . Has anything been done to you down there or on your bottom?
- . Do you want to talk to someone who will understand you better?
- . Would you like support in contacting other agencies for support, help or advice?

These questions and advice are guidance and each case should be dealt with sensitively and considered individually and independently. Using this guidance is at the discretion of the Headteacher.

Record

All interventions should be accurately recorded.

Refer

Child protection lead or Headteacher needs to seek advice about making referrals to Social Care and CAIT (Child Abuse Investigation Team) and to follow South West Child Protection Procedure Guidelines on FGM and CP referrals.

Useful documents include:

- . Multi-Agency Practice Guidelines: Female Genital Mutilation (HM Government, 2011)
- . Briefings and Information for Use During Inspections of Maintained Schools and Academies (Ofsted, updated December 2012).
- . South West Child Protection Procedure Guidelines
- . Working together to safeguard children, HM Government (2010), paragraphs 6.14 to 6.19.1
- . Safeguarding children and safer recruitment in education, DfE (2006), Annex A, paragraphs 39 to 42.2

The Department for Education website;

<http://www.education.gov.uk/schools/pupilsupport/pastoralcare/childprotection/a0072224/safeguarding-children-from-female-genital-mutilation>.