



Townshend International School

Child Safeguarding and Protection Policy

This policy should be read in accordance with the school's Policy for Safer Recruitment.

Introduction

TIS takes a serious view of its duty to safeguard children and all employees, and does so by:

- Doing all that we can to provide a safe environment in which students can grow and learn
- Carefully checking the background and employment history of all employees prior to appointment
- Equipping students with the confidence and skills they need to keep them safe
- Developing and implementing clear procedures for identifying and reporting suspected cases of abuse
- Supporting students and staff in accordance with an agreed and regularly reviewed Child Safeguarding and Protection Policy.

Aims and Objectives

Prevention

TIS aims to:

- Establish and maintain an environment where students feel secure, where they feel able to talk and where they know they will be heard
- Ensure that students know that there are caring, approachable adults in the school with whom they can share their concerns
- Include opportunities within the civics curriculum to develop skills in personal awareness, social skills and health; and to receive guidance, especially in developing skills relating to on-line security.
- Include opportunities during staff training for all TIS employees to be made aware of their responsibilities relating to child protection and safeguarding and to be guided towards appropriate responses.

TIS takes into account the relevant guidance issued by the UK Department of Education to:

- Designate a Child Protection Officer (CPO)
- Ensure that all staff (including temporary and contracted staff) know the identity of the CPO(s) and, through orientation and staff training, have an awareness of their role
- Ensure that all staff understand their responsibility to refer concerns to the relevant CPO, and the procedure for doing so
- Ensure that all parents understand the responsibility placed on the school and its employees for safeguarding students; including the requirement to share information with local Child Guidance Centres when necessary
- Develop links with relevant agencies in Czech Republic, including Child Guidance Centres, and to cooperate as required with their enquiries regarding child protection matters
- Keep secure written records of concerns relating to students, even when there is no requirement to take immediate further action
- Follow a set procedure when an allegation is made against a TIS employee or volunteer
- Ensure that safe recruitment practices are observed and that such practices are reviewed on a regular basis.

Roles and Responsibilities

At TIS the School Management Team will:

- Work with the School Director, on all matters of school policy and process relating to safeguarding and child protection and ensure policies are reviewed on an annual basis.

At TIS the School Director will:

- Ensure that the school has a procedure for handling child protection cases (including allegations against employees and volunteers) which is available to all employees and volunteers, for reference.
- Appoint a designated CPO in both Primary and Secondary schools and ensure that they are provided with the necessary training and support, and opportunities to liaise with external agencies
- Ensure that all academic staff receive regular appropriate training (and that new staff are trained as part of their orientation)
- Ensure that all employees understand that they may be the recipient of disclosures from children and that they know what to do in such circumstances – or if they have any concerns or suspicions
- Make parents aware of the school's Child Protection Policy and of the fact that referrals may be made to external agencies
- Commit appropriate resources to Child Protection matters
- Report the relevant details of any staff member whose contract has been terminated following a Child Protection incident to the appropriate UK & Czech Republic authorities.

At TIS the HR Manager will:

- Ensure that the school complies, as far as is possible, with the latest UK guidance on safe recruitment
- Oversee the process of gathering appropriate references for all short-listed prospective employees, including one from the current or most recent employer – all references must include a clear statement about disciplinary procedures and working closely with children
- Ensure that DBS checks, or their most robust equivalent, are carried out and recorded

- Disseminate information relating to safeguarding and child protection to new employees and ensure that such information is readily available to all staff at all times.

At TIS the Child Protection Officer will:

- Act as a source of support, advice and expertise within the school
- Cooperate with relevant external agencies both in the UK and the Czech Republic
- Cooperate with the School Director and keep them informed of any issues
- Ensure that all employees have access to and understand the school's Safeguarding and Child Protection Policy
- Undertake regular training
- Ensure that all staff have orientation training covering safeguarding and child protection issues and that they understand their responsibilities and reporting procedures
- Keep detailed, accurate written records of all concerns in a secure manner
- Maintain an up-to-date knowledge of safeguarding and Child Protection developments, and share resources.

Child Protection Officer Designations

The Child Protection Officer (CPO) is the is the TIS school Counsellor.

Dealing with disclosure of abuse

TIS staff should not investigate reports of suspected abuse themselves. They should **not** take action beyond that of reporting suspected abuse to the Child Protection Officer. The most important thing is to remember to REFER ON – do not keep information to yourself. If you have any doubts or suspicions, inform the CPO or the School Director in the event of the CPO's absence.

All concerns should be recorded, however minor, on the Note of Care under Policy and Forms on the TIS Staff Intranet. If, at any point, there is a risk of immediate serious harm to a child, a referral should be made to children's social care

immediately. Anybody can make a referral. If the child's situation does not appear to be improving the staff member with concerns should press for re-consideration. Concerns should always lead to help for the child at some point. (Keeping children safe in education, April 2014).

Refer to Appendix A to review the four distinct categories of child abuse, and typical signs and symptoms of each.

Procedure for dealing with disclosures of abuse

1. Always stop and listen straight away to anyone who wants to tell you about incidents or suspicions of abuse.
2. Do not give a guarantee of confidentiality. Talk through the issue of confidentiality with the student. You can guarantee that you will only pass on information to the minimum number of people who must be told in order to ensure that the proper action is taken; that you will never tell anyone who does not have a clear ' need to know'; and that you will personally take whatever steps you can to protect the informing student or adult from retaliation or unnecessary stress that might be feared after a disclosure of alleged abuse has been made.
3. Remain calm, do not panic or express shock.
4. Reassure the student – them him/her they are doing the right thing and that you are pleased they are confiding in an adult. Praise them for having the courage to talk about it with someone.
5. Let the student know that you will do your best to protect and support them.
6. Explain that you would like to make notes of what they are telling you and write a short account of what is being said.
7. Do not project or assume anything. Let the student tell their story. Leave your own assumptions out. Listen carefully – do not prompt responses.
8. Let the student know they are believed.
9. Use age specific language. Ask for clarification for any meaning or words you don't understand.
10. Avoid asking leading questions like, "Who hit you?" Instead try, "How did you get that mark?" or 'Is there anything else you want to say?' Open questions normally – begin with "what" "where" "how" "who", also "tell me", "explain to me" and "describe to me"

11. Closed questions that could afford the answer Yes or No should also be avoided upon disclosure.
12. Avoid making any criticism of the alleged perpetrator in front of the student.
13. Check that you have a full understanding of what the student has told you before the end of the discussion.
14. Explain to the student that it is necessary, in order to help him or her, you will have to tell certain other parties. Assure them, however, that this will not be general knowledge within the school community.
15. Ensure the student is handed on to a sympathetic, appropriate environment when he or she leaves you. Do not leave them on their own. Ensure that the student is not left in a situation where he/she may be pressured to change their story.
16. Report the information immediately to the CPO who must then report it to the appropriate authority within 24 hours if necessary.
17. After reporting the situation to the CPO, the staff member should also make a written record under the 'Notes of Care' as soon as possible of what they have been told and hand a copy to the designated CPO, or School Director, if the CPO is not present. It is important that the information is recorded in as much detail as possible so that the child does not have to repeat the details of abuse unnecessarily.
18. Maintain confidentiality. Do not discuss this with any other members of staff, children or people outside of school. It will be considered a breach of school protocol if you do this.
19. Follow any instructions given by the CPO with regard to:
 - a) Informing a student's parents.
 - b) Informing students of next steps
 - c) Medical examination of treatment for the student.
 - d) Immediate protection needed for a student who has been the victim of abuse, a student who has given information about abuse and a student against whom an allegation has been made.
 - e) Informing people at School (including any other members of staff) of the allegation.

Allegations against staff

All school staff should adopt safe working practices when working with students:

- Avoid one to one situations where possible
- Be visible if you are in a situation where you are working alone with students (let someone know where you are, and leave the door open, if possible).
- Avoid unnecessary physical contact
- Ensure all contact during lessons is appropriate, visible and in context.
- Adopt discretion with distressed students.
- Maintain appropriate communication with students both in and out of school – staff should be particularly careful regarding any communication with a student via mobile phone, email or social media.
- Staff should give serious consideration before having students as ‘friends’ via any social media or social networking site.

If such an allegation is made directly by a student to a member of staff, the member or staff receiving the allegation will immediately inform one of the Child Protection Officer.

The CPO will then investigate the allegation to determine:

- Who made the allegation
- The nature of the allegation
- Where and when the alleged incident took place
- Who was involved
- Whether there were any witnesses

All allegations made against members of the staff will be reported to the School Director. In the event an allegation is made against the School Director, the CPO will inform a member of the School Management Team.

Our anti-bullying policy is set out in a separate document and acknowledges that to allow or condone bullying may lead to consideration under child protection procedures. This includes homophobic, gender related and racist bullying. The school delivers a zero tolerance approach to all forms of bullying including verbal, physical and cyber bullying.

Appendix One - Types of Child Abuse

The basis of all child abuse is the failure to recognise a child's basic needs and respond to them. Our duty as professionals is to be open to the possibility that various forms of abuse may take place, to identify the indicators of such abuse and to ensure that our concerns are transmitted to others. Any delay in doing this might leave the child open to further and possibly more serious abuse and might result in a possible loss of evidence which could have been used to improve the child's position. We recognise that because of the day-to-day contact with children school staff are ideally placed to observe the outward signs of abuse. It is the role of the designated CPO (Child Protection Officer) to keep a secure record, to monitor and to refer cases as necessary to the Whole School Protection Officer. These documents are to be kept separate from the child's academic file.

Child abuse can be categorised into four distinct types;

1. Physical Abuse:
2. Sexual Abuse:
3. Emotional Abuse:
4. Physical Neglect:

A child can be at risk from any combination of the four categories.

Physical Abuse

This involves physical injury to a child, including deliberate poisoning, where there is definite knowledge or a reasonable suspicion, that the injury was inflicted or knowingly not prevented.

Typical signs of Physical Abuse are:

- Bruises and abrasions - especially about the face, head, genitals or other parts of the body where they would not be expected to occur given the age of the child. Some types of bruising are particularly characteristic of non-accidental injury especially when the child's explanation does not match the nature of injury or when it appears frequently.
- Slap marks - these may be visible on cheeks or buttocks.
- Twin bruises on either side of the mouth or cheeks - can be caused by pinching or grabbing, sometimes to make a child eat or to stop a child from speaking.
- Bruising on both sides of the ear - this is often caused by grabbing a child that is attempting to run away. It is very painful to be held by the ear, as well as humiliating and this is a common injury.
- Grip marks on arms or trunk - found in babies who are handled roughly or held down in a violent way. Gripping bruises on arm or trunk can be associated with shaking a child. Shaking can cause one of the most serious injuries to a child, i.e. a brain haemorrhage as the brain hits the inside of the skull. X-rays and other tests are required to fully diagnose the effects of shaking. Grip marks can also be indicative of sexual abuse.
- Black eyes - are most commonly caused by an object such as a fist coming into

contact with the eye socket. Note - A heavy bang on the nose however, can cause bruising to spread around the eye but a doctor will be able to tell if this has occurred.

- Damage to the mouth - e.g. bruised/cut lips or torn skin where the upper lip joins the mouth.
- Bite marks.
- Poisoning and other misuse of drugs - e.g. overuse of sedatives.
- Burns and / or scalds - a round red burn on tender, non-protruding parts like the mouth, inside arms and on the genitals will almost certainly have been deliberately inflicted. Any burns that appear to be cigarette burns should be cause for concern.
- Some types of scalds known as 'dipping scalds' are always cause for concern. An experienced person will notice skin splashes caused when a child accidentally knocks over a hot cup of tea. In contrast a child who has been deliberately 'dipped' in a hot bath will not have splash marks.

Sexual Abuse

The involvement of dependent, developmentally immature 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.

Typical signs of Sexual Abuse are:

- A detailed sexual knowledge inappropriate to the age of the child.
- Behaviour that is excessively affectionate or sexual towards the children or adults.
- Attempts to inform by making a disclosure about the sexual abuse often begin by the initial sharing of limited information with an adult. It is also very characteristic of such children that they have an excessive pre-occupation with secrecy and try to bind the adults to secrecy or confidentiality.
- A fear of medical examinations.
- A fear of being alone - this applies to friends / family / neighbours / baby-sitters, etc.
- A sudden loss of appetite, compulsive eating, anorexia nervosa or bulimia nervosa.
- Excessive masturbation.
- Promiscuity.
- Unusually explicit or detailed sex play in young children.
- Sexual approaches or assaults - on other children or adults.
- Pregnancy, urinary tract infections (UTI's), sexually transmitted infections (STI's) are all cause for immediate concern in young children, or in adolescents if his / her partner cannot be identified.
- Bruising to the breasts, buttocks, lower abdomen, thighs and genital / rectal areas. Bruises may be confined to grip marks where a child has been held so that sexual abuse can take place.
- Discomfort or pain particularly in the genital or anal areas.

- The drawing of pornographic or sexually explicit images.

Emotional Abuse

The severe adverse effect on the behaviour and emotional development of a child caused by persistent or severe emotional ill treatment or rejection.

All abuse involves some emotional ill treatment - this category should be used where it is the main or sole form of abuse.

Physical Neglect

The persistent or severe neglect of a child (for example, by exposure to any kind of danger, including cold and starvation) which results in serious impairment of the child's health or development, including non-organic failure to thrive. Persistent stomach-aches, feeling unwell, and apparent anorexia can be associated with Physical Neglect.

Typical signs of Physical Neglect are:

- Underweight: a child may be frequently hungry or pre-occupied with food or in the habit of stealing food or with the intention of procuring food. There is particular cause for concern where a persistently underweight child gains weight when away from home, for example, when in hospital or on a school trip. Some children also lose weight or fail to gain weight during school holidays when school lunches are not available and this is a cause for concern.
- Inadequately clad - where the lack of care is preventing the child from thriving.

Physical Neglect is a difficult category because it involves the making of a judgment about the seriousness of the degree of neglect. Much parenting falls short of the ideal but it may be appropriate to invoke Child Protection Procedures in the case of neglect where the child's development is being adversely affected.

The Symptoms of Stress and Distress

When a child is suffering from any one or more of the previous four 'categories of abuse', or if that child is 'at risk', she will nearly always suffer from/display signs of stress and distress.

An abused child is likely to show signs of stress and distress as listed below:

- A lack of concentration and a fall-off in school performance.
- Aggressive or hostile behaviour.
- Moodiness, depression, irritability, listlessness, fearfulness, tiredness, temper tantrums, short concentration span, acting withdrawn or crying at minor occurrences.
- Difficulties in relationships with peers.
- Regression to more immature forms of behaviour, e.g. thumb sucking.
- Self-harming or suicidal behaviour.

- Low self-esteem.
- Wariness, insecurity, running away or truancy - children who persistently run away from home may be escaping from sexual/physical abuse.
- Disturbed sleep.
- General personality changes such as unacceptable behaviour or severe attention seeking behaviour.
- A sudden change in school performance.

Parental Signs of Child Abuse

Particular forms of parental behaviour that could raise or reinforce concerns are:

- Implausible explanations of injuries.
- Unwillingness to seek appropriate medical treatment for injuries.
- Injured child kept away from school until injuries have healed without adequate reason.
- A high level of expressed hostility to the child.
- Grossly unrealistic assumptions about child development.
- General dislike of child-like behaviour.
- Inappropriate labelling of child's behaviour as bad or naughty.
- Leaving children unsupervised when they are too young to be left unattended.

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