



## Child Protection Policy revised 2019

This policy is a supplement to the [whole school Handbook](#), the primary and [secondary](#) handbooks, the [Anti Bullying Policy](#)

### **Mission Statement:**

At Ascot, students develop according to their needs in a welcoming, family environment. The challenging curriculum enables our students to become adaptable lifelong learners. Our intercultural ethos strives to promote a strong sense of respect for all.

ASCOT INTERNATIONAL SCHOOL

CHILD PROTECTION POLICY 2019/20

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**Reviewed by:** Peter Lynch, Stephanie Lill and Mark Renie

**Approved by:** Headmaster and BoG

**Legislation:** Child Protection and Social Families Act 2003

UN Convention on the Rights of a Child

## **POLICY DOCUMENT ANNUAL REVIEW**

### **CONTENTS**

#### **1. PURPOSE**

#### **2. SCOPE**

#### **3. CHILD PROTECTION TEAM**

#### **4. RESPONSIBILITIES**

##### **4.1 BOARD OF GOVERNORS, HoS AND SENIOR LEADERSHIP TEAM**

##### **4.2 DESIGNATED SAFEGUARDING LEAD AND DEPUTY DESIGNATED SAFEGUARDING LEAD**

##### **4.3 ASCOT STAFF MEMBERS**

###### **4.3.1 PROFESSIONAL RELATIONSHIPS WITH STUDENTS**

###### **4.3.2 WHISTLEBLOWING CP STATEMENT**

###### **4.3.3 PHYSICAL CONTACT WITH CHILDREN**

###### **4.3.4 PHYSICAL CONTACT WITH CHILDREN - KEY EXPECTATIONS**

###### **4.3.5 BEHAVIOUR MANAGEMENT**

###### **4.3.6 SEXUAL RELATIONSHIPS WITH STUDENTS**

###### **4.3.7 SEXUAL RELATIONSHIPS WITH STUDENTS - KEY EXPECTATIONS**

###### **4.3.8 CONTROL & PHYSICAL INTERVENTION**

###### **4.3.9 STUDENTS IN DISTRESS**

###### **4.3.10 ACTIVITIES REQUIRING PHYSICAL CONTACT (INCLUDING PHYSICAL EDUCATION & SPORTS COACHING)**

###### **4.3.11 SHOWERS & CHANGING**

###### **4.3.12 LOWER PRIMARY BATHROOMING PROCEDURES**

##### **4.4 ASCOT BOARD OF GOVERNORS - STUDENT WELFARE**

#### **5. PROCEDURE**

##### **5.1 THE MAIN PRINCIPLE OF CHILD PROTECTION AT ASCOT**

##### **5.2 ASCOT CHILD PROTECTION POLICY**

###### **5.2.1 GENERAL BACKGROUND**

###### **5.2.2 ASCOT INTERNATIONAL SCHOOL'S IMPLEMENTATION OF THIS POLICY**

###### **5.2.3 ASCOT CORE STATEMENTS**

##### **5.3 RECOGNISING CHILD ABUSE**

###### **5.3.1 MENTAL HEALTH & WELLBEING**

###### **5.3.2 CHILD ABUSE DEFINITION**

###### **5.3.3 ABUSE DUE TO NEGLECT**

###### **5.3.4 PHYSICAL ABUSE**

**5.3.5 SEXUAL ABUSE****5.3.6 PSYCHOLOGICAL ABUSE****5.4 MANAGING CHILD PROTECTION AT OUR SCHOOL****5.4.1 ATTENDANCE AND FIRST DAY CALLING****5.4.2 CHILD PROTECTION PROCEDURE****5.4.3 DISCLOSURE****5.4.4 RECORDING****5.4.4.1 WHAT TO RECORD****5.4.4.2 HOW TO RECORD****5.4.5 REPORTING A DISCLOSURE****5.4.6 RESPONSE COORDINATION BY THE DSL/DDSL****5.4.7 IN-SCHOOL MULTI AGENCY REVIEWS****5.4.8 DETERMINING MEASURES TO ENSURE CONFIDENTIALITY****5.4.9 MONITORING AND RECORDING CONCERNS****5.4.8.1 THE PURPOSE OF CHILD PROTECTION SUPPORT PLAN (CPSP) MONITORING****5.4.10 WORKING WITH PARENTS/GUARDIANS/CARERS****5.4.11 DEALING WITH PARENT DISCLOSURES****5.4.12 REFERRAL/INVOLVEMENT OF OTHER AGENCIES****5.4.13 INTERNATIONAL GUIDANCE FOR SCHOOLS & UNIVERSITIES: TRANSFER OF CHILD PROTECTION****RECORDS****5.4.14 THAILAND'S CHILDREN'S PROTECTIVE SERVICES****5.4.15 REFERRAL TO THE THAI AUTHORITIES****5.4.16 ASCOT ONGOING SUPPORT FOR VICTIMS AND OTHERS****5.4.16.1 ASCOT CARE FOR STUDENTS****5.4.16.2 ASCOT COMMUNICATION****5.4.16.3 ASCOT CARE FOR STAFF****6. COMPLIANCE**

**POLICY DOCUMENT ANNUAL REVIEW**

This integral Policy Document is and will be subject to an Annual Review by Ascot International School's Child Protection Team and it is formally documented to ensure its continuing suitability, adequacy and effectiveness.

Areas subject to review will include, but are not limited to, follow-up actions from previous meetings, reviews, policy conformity, review of complaints, status of corrective and preventive actions, and improvements for the forthcoming year.

The Headmaster and Board of Governors at Ascot International School reserves the right to amend this Policy by notice following such review in circumstances in which it considers such change to be necessary or appropriate.

**1. PURPOSE**

At Ascot International School we believe that it is every child's right to learn in conditions which promote the optimum development of their intellectual, physical, emotional and social well-being. Everyone in the Ascot community has a responsibility to ensure that children are supported and protected in order to achieve their optimum development.

Issues relating to child protection are important in all international contexts, irrespective of socio economic backgrounds. Consequently, all schools need to be aware and to have the local and contextual frameworks to respond to the needs of each child. Given that this area is a complex one and potentially provokes strong feelings in those involved, it is essential that we have in place clear guidelines and procedures. These provide a framework for the appropriate response for each case.

**2. SCOPE**

This policy applies to all schools in the remit of the Ascot International School Community:

- Lower Primary
- Upper Primary
- Secondary
- KS5 (International Baccalaureate)

**3. CHILD PROTECTION TEAM**

| <b>Role</b>                       | <b>Abbreviation</b> | <b>Named Person</b>                            |
|-----------------------------------|---------------------|--|
| Executive Board of Governors      | BoG                 | K S Bajaj                                      |
| Child Protection Officer/Officers | DSL/DDSL            | Mark Renie - Primary<br>Pete Lynch - Secondary |
| Deputy Head of Primary            | Dep Head of PY      | Karel Linden                                   |
| Designated Safeguarding Lead      | DSL                 | Pete Lynch                                     |

## Collaborate

## Communicate

## Respect

|  |                           |   |
|--|---------------------------|---|
| Deputy Designated Safeguarding Lead                    | DDSL                      | Mark Renie  |
| Designated Mental Health Lead PY                       | DMHL                      | Jeni Lee Sas  |
| Designated Mental Health Lead SY                       | DMHL                      | Tyra Cummings   |
| Lower Primary Coordinator                              | LP Coordinator            | Mahesika Mackenzie  |
| Head of Pastoral Care Primary                          | Head of Pastoral Care PY  | Clara Wells   |
| Head of Pastoral Care Secondary                        | Head of Pastoral Care Sec | Simon Hinds   |
| Head of Primary  | HoPY                      | Mark Renie  |
| Head of Secondary                                      | HoSec                     | Sarah Campbell  |
| Head of Inclusion                                      | Hol                       | Pete Lynch  |
| Head of School   | HoS                       | Gary Booth  |
| Parent/Guardian/Carer                                  | Par/Ga/Ca                 | A person having legal and parental responsibility for a child under the age of 18 years.                        |
| Pupil  |                           | Any person under the age of 18 years old who is studying in either public or private institutions (CP Act 2003) |
| School Director  | SDI                       | Kannitha Suksawashon  |
| School Nursing Service                                 | SNS                       | Por Tanjaree  |
| Senior Leadership Team                                 | SLT                       |   |
| Staff Member   | SM                        | Any adult employed by ASCOT   |
| Special Education Needs & Disabilities Coordinator PY  | SENDCO PY                 | Eden Vidal  |
| Special Education Needs & Disabilities Coordinator Sec | SENDCO Sec                | Craig Tipping   |
| Meetings Facilitator                                   | MF                        | Emmy Morris   |
| Meetings Translation (Thai)                            | MT                        | Rapat Jitrong (Gift)  |

## 4. RESPONSIBILITIES

### 4.1 BOARD OF GOVERNORS, HoS AND SENIOR LEADERSHIP TEAM

The Ascot International School Board of Governors (BoG) and HoS (HoS) are responsible for ensuring that a Designated Safeguarding Lead (DSL) is appointed who has access to appropriate training and support and the capacity to fulfil the requirements of the [role](#).

The BoG and/or HoS act as a second DSL/DDSL, providing an alternative route for reporting and acting as a support and sounding board to all appointed DSL's.

If the HoS wishes to carry the main responsibility for child protection in the school, he/she must ensure that a second member of staff is appointed to support them and act as an alternative route for reporting.

The HoS and Designated Safeguarding Lead (DSL) and/or Head of Inclusion (HoI) are responsible for ensuring that the procedures outlined in this policy are followed appropriately and fairly in the interests of each student and with due regard to the Thai legal framework and school guidelines and procedures.

### 4.2 DESIGNATED SAFEGUARDING LEAD (DSL) AND DEPUTY DESIGNATED SAFEGUARDING LEAD (DDSL)

At Ascot the main [role](#) of the DSL is outlined and stated as holding the key areas of responsibility.

- They understand and implement key legislation and guidance affecting the education and responses to concerns about a child's safety or welfare.
- They will facilitate and start discussions related to recent messages or concerns that occasionally lead to Multi Agency Reviews (MARs)
- They will manage a child's disclosure and state barriers to a disclosure.
- They will state the barriers to staff reporting concerns and develop methods of overcoming them.
- They will make appropriate decisions about the action to take when informed of a range of concerns about a child or young person.
- They will explain the issues in connection with recording and sharing of information, including that of confidentiality, and state how a referral to a Multi-Agency Safeguarding setting should be made.
- They will line manage the other DSL/DDSL's in accordance to the working level of agreement laid out in this policy.

The Ascot International School DDSL:

- works with the HoS under the direction of the DSL,
- coordinates the implementation of this policy
- supports the DSL with the statutory agencies
- coordinates training for all school staff and external providers.

### 4.3 ASCOT STAFF MEMBERS

All Ascot staff must be aware of and abide by the ASCOT Child Protection Policy and sign the [Child Protection Code of Conduct](#).

Staff have a moral and legal responsibility to pass on information in cases of abuse or suspicions of abuse.

New staff need to be made aware of current procedure through induction and staff training. Being informed enables staff to understand their responsibilities towards child protection. It is not a staff member's job to diagnose abuse; their role is just to observe that something may be wrong, ask about it, listen, be available and make time to talk.

#### 4.3.1 PROFESSIONAL RELATIONSHIPS WITH STUDENTS

Everyone has the right to be treated with respect, patience, integrity, courtesy, dignity and consideration. Teachers should be aware of students' vulnerability, especially when working alone with them, and should maintain physical, emotional, and sexual boundaries in such interactions.

#### 4.3.2 Whistleblowing

Ascot staff have a responsibility to ensure that they, their colleagues and others working in the school follow safe working practices so that pupils are kept safe at all times. Staff must also understand that they have a duty to report unsafe practices that could lead to a child being harmed or put at risk of harm. Failure to report such practices may lead to disciplinary action being taken against them if as a result of the failure to report, a child is harmed or put at risk of harm;

Staff are often the first to realise that there may be something seriously wrong within the School in particular regarding Child Protection. However, they may not express their concerns because they feel that speaking up would be disloyal to their colleagues or to the School or that they feel it is not in their job description to act. They may also fear harassment or victimisation. In the circumstances it may be easier to ignore the concern rather than report what may just be a suspicion of malpractice.

Ascot is committed to the highest possible standards of openness, probity and accountability. In line with that commitment we expect employees, and others that we deal with, who have serious concerns about any aspect of the school to come forward and voice those concerns. It is recognised that most cases will have to proceed on a confidential basis but it is important that all disclosures must be made in the public interest.

Whistleblowing makes it clear that an employee can do so without fear of victimisation, subsequent discrimination or disadvantage. This confidential reporting policy is intended to encourage and enable employees to raise serious concerns **within** the School rather than overlooking a problem or "blowing the whistle" outside.

Whistleblowing procedures apply to all school staff including full and part time, casual, temporary, agency staff, individuals undertaking work experience in the school, volunteers and all contractors working for the school on school premises , for example drivers and contractors .

#### **4.3.2 PHYSICAL CONTACT WITH CHILDREN**

A no-touch approach is impractical for most staff, but when physical contact is made with students, it should be in response to their needs at the time, of limited duration, and appropriate to the professional role and the age of the child. Physical contact may be misunderstood by a student, parent or observer. Touching students, including well-intentioned informal and formal gestures such as putting a hand on the shoulder or arm, may be misunderstood if repeated regularly.

There may be occasions in which a distressed pupil needs comfort and reassurance, which may include physical comforting such as a caring parent would give. Staff should use their discretion in such cases to ensure that what is perceived by others is normal and natural, and does not become unnecessary and unjustified contact, particularly with the same pupils over a period of time.

#### **4.3.3 PHYSICAL CONTACT WITH CHILDREN - KEY EXPECTATIONS**

- Staff should use their professional judgement at all times about the appropriateness of any physical contact.
- Staff should always be prepared to explain actions and accept that all physical contact is open to scrutiny.
- Staff should only use physical contact with children in a careful, sensitive and respectful way that is appropriate to their role.
- Staff should not make gratuitous physical contact with students.
- Staff should avoid attributing touching to their teaching style or as a way of relating to children.
- Staff should not touch a student in a way which may be considered indecent.

#### **4.3.4 BEHAVIOUR MANAGEMENT**

As a school we believe that natural or logical consequences are the most effective way to support learning. Staff should use positive reinforcement and constructive feedback rather than personal criticism or comparison when working with children. All students have a right to be treated with respect and dignity. Any form of physical punishment of children is unlawful as is any form of physical response to misbehaviour unless it is by way of restraint.

A member of staff must not inflict any physical or emotional abuse such as striking, spanking, shaking or slapping. Staff should not use any form of humiliating, ridiculing, threatening or degrading treatment to manage student behaviour. It is particularly important that staff understand this both to protect their own position and the overall reputation of the school. Staff should treat students consistently so that each individual child knows that they will receive the same treatment from any member of staff. Staff should aim to speak in a calm and objective way, even in the face of challenging circumstances.

#### **4.3.5 SEXUAL RELATIONSHIPS WITH STUDENTS**

Any sexual behaviour by a member of staff with or toward a student is both inappropriate and illegal.

Students are protected by the same laws in Thailand as adults in relation to non-consensual sexual behaviour. They are additionally protected by specific legal provisions regardless of whether the child or young person consents or not.



There are occasions when adults embark on a course of behaviour known as grooming, in which the sole purpose is to gain the trust of a child and manipulate the relationship so sexual abuse can take place.

Staff should be aware that conferring special attention and favour upon a child might be construed as being part of a grooming process. Sexual behaviour may also include non-contact activities, such as causing children to engage in or watch sexual activity or exposure to pornographic material.

#### **4.3.6 SEXUAL RELATIONSHIPS WITH STUDENTS - KEY EXPECTATIONS**

- Staff must ensure that their relationships with students are appropriate to the age and gender of the students.
- Staff must take care that their language or conduct does not give rise to comment or speculation about their intentions. This includes seductive speech, innuendo or gestures, as well as physical contact that exploits, abuses, or harasses a student.
- Staff must immediately ensure that a member of the leadership team is informed if they encounter students who display inappropriate attention-seeking behaviour, or profess to be attracted to them in line with school whistleblowing procedures.
- Staff must not pursue sexual relationships with children and young people either in or out of school.
- Staff must not engage in any communication with a child or young person which could be interpreted as sexually suggestive or provocative, including verbal comments, letters, notes, email, phone calls, texts or physical contact.

#### **4.3.7 CONTROL & PHYSICAL INTERVENTION**

Staff may legitimately intervene to prevent a student from injuring themselves or others.

Whenever possible staff should always try to defuse situations before they escalate and send for another adult if there is a concern that a situation will become physical. In all cases in which physical intervention is felt to be necessary, the incident and subsequent actions should be documented and reported in an email to HoPY or HoSec.

In the rare cases in which physical intervention is used, the aim should be to use minimum force for the shortest period necessary.

#### **4.3.8 STUDENTS IN DISTRESS**

Staff should consider the way in which they offer comfort to a distressed student. There may be occasions when a distressed student needs comfort and reassurance. This may include age-appropriate physical contact. Staff should remain self-aware at all times in order that their contact is not threatening, intrusive or subject to misinterpretation. When a member of staff has a particular concern about the need to provide ongoing physical contact of this nature, they should seek further advice from a senior leader. In such cases a decision must be reached about whether it is appropriate for staff to offer counselling and advice, or whether to refer the child to another member of staff with acknowledged pastoral responsibility for the particular child such as a member of the School Inclusion Welfare Team.

#### **4.3.9 ACTIVITIES REQUIRING PHYSICAL CONTACT (INCLUDING PHYSICAL EDUCATION & SPORTS COACHING)**

Some staff such as those who teach PE, games, physical theatre and Dance or who offer music or Perpetetic instruction, will on occasion have to initiate physical contact with students in order to support a student to perform a task safely, to demonstrate the use of a particular piece of equipment/instrument, or to assist them with an exercise.

Staff should always explain to a student the reason why contact is necessary and what form that contact will take unless their safety is at immediate risk. This should be done with the student's agreement and awareness of the student's level of comfort. Contact under these circumstances should be for the minimum time necessary to complete the activity and should take place in a visible environment.

Staff must remain sensitive to any discomfort expressed verbally or nonverbally by the student and should consider alternatives when it is anticipated that a student might misinterpret any such contact. This could be by involving another member of staff, or through asking a less vulnerable student to assist in the demonstration.

#### **4.3.10 SHOWERS & CHANGING**

Young people are entitled to respect and privacy when changing clothes or taking a shower.

However, there needs to be an appropriate level of supervision in order to safeguard students, satisfy health and safety considerations, and ensure that bullying or teasing does not occur. This supervision should be appropriate to the needs and age of the students concerned and sensitive to the potential for embarrassment. In Primary (up to Year 1) supervision of changing and showers is provided by life teachers (Nannies) and teacher assistants. After that age students are expected to be able to change and shower by themselves and assistance is only provided in extenuating circumstances. TAs are expected to stay outside the change room until the last child is finished.

Staff therefore need to be vigilant about their own behaviour, ensure they follow agreed guidelines and be mindful of the needs of the students. The following should always be considered:

- Staff should avoid any physical contact when students are in a state of undress.
- Staff should avoid any visually intrusive behaviour when they are in changing rooms.
- It is acceptable for same-sex staff to remain in the room when groups are changing to ensure indirect supervision.
- Sensitive students should be offered the opportunity to change privately.
- Staff should not change in the same place as students.
- Staff should only shower in staff-designated changing spaces.
- In settings with Lower Primary students where supervision must be closer it is understood that there may be modifications to some of the above and this will be documented in specific guidelines for that team

#### **4.3.11 LOWER PRIMARY BATHROOMING PROCEDURES**

Our expectation is that all students entering our programme should be encouraged to use the toilet independently. This means that they can communicate the need to go to the bathroom and use the toilet only a little support. All children

need to be encouraged to be in regular underpants and become less reliant on diapers or absorbent training pants by the end of the first term. They should be encouraged to use toilet paper or the sprayer to clean themselves when finished and should be able to pull their pants up independently and then wash their hands with soap.

An adult will accompany each Nursery student to the bathroom on all occasions where possible (whenever there is more than one adult with that group). Kindergarten and Reception students will be encouraged to go to the bathroom by themselves. Any students who go to the bathroom independently will be checked on by an adult after two or three minutes to ensure they do not require assistance. Of course, with children of this age there will be occasional accidents which will occur from time to time. However, if a pattern starts to appear it may be determined that a child needs to spend time at home to work on their independence in toileting. This can be a frustrating process, but parents need to understand that these procedures are in place for the safety, hygiene and well being of all children in the classroom. Helping a child who has had an accident takes one adult out of the classroom, which negatively impacts the other students in the class.

As a team, we acknowledge that there will be occasions when special circumstances arise and a student requires additional assistance. In such cases we will support students by giving verbal instructions or step in and help them. We only do this when there is a risk of hygiene issues or a student has become distressed. In these situations we will be acting in loco parentis (acting in the place of a parent in their absence).

#### **4.4 ASCOT BOARD OF GOVERNORS - STUDENT WELFARE**

The representative for Child Protection and Safeguarding on the BoG ensures that up to date legislation and procedures are followed and adhered to at all times. Updates are made by the DSL or DDSL at each meeting. At the end of the Academic year BoG members are updated with a comprehensive report.

### **5. PROCEDURE**

#### **5.1 THE MAIN PRINCIPLE OF CHILD PROTECTION AT ASCOT**

The protection of the child is a core concern at Ascot International School. The promotion by all staff of the optimum development of the child is the aim that underlies all of this work.

The Ascot framework and guidelines fully abides to the laws that need to be adhered to in Thailand. Similarly there are procedures and arrangements within the Thai Social Welfare Systems and its specialist teams that also apply.

To ensure the protection of the children in our care we must address all forms of child abuse:

- abuse due to neglect;
- physical abuse;
- sexual abuse;
- psychological/emotional abuse.

Within those agencies involved there should be very clear and open access to information as each individual will only have a partial picture of a child and their situation. It can often be the case that only when different agencies bring their concerns together a full holistic picture emerges.

There also needs to be sensitive but explicit recognition that we live in a multicultural community that has a variety of child rearing practices. In turn, our sensitivity to this must sit alongside our adherence to the laws of Thailand and the guidance of the Social Welfare Department and The Child Protection Act 2003.

When there are concerns about a child or student, in line with Ascot's vision, mission and values it is essential that the school follows agreed procedures and works with other agencies as necessary to provide what is best for the child.

## **5.2 ASCOT CHILD PROTECTION POLICY**

The aim of our Child Protection Policy is to ensure all children at Ascot within our care are safe and well. It also enables all our staff to feel more confident and clear about the part they play in the protection of children.

The policy also helps Ascot to support the rights of all children in our care to be protected, rather than just responding to specific cases of abuse. Children's Rights at Ascot can be broadly grouped as follows:

- **Provision** i.e. the right to possess, receive or have access to certain resources and services.
- **Protection** i.e. the right to be shielded from harmful acts or practices.
- **Participation** i.e. the right to be heard on decisions affecting his or her life. More specifically, children are entitled to love, food, shelter, care and the chance to maximise their potential.

Legislation in Thailand and around the world focuses the attention on the responsibility of all adults to uphold the rights of children and to work together to protect them and promote their welfare as the paramount consideration. Thailand is bound by the [UN Convention on the Rights of the Child](#) which Ascot and Thailand adhere to.

A commitment to these rights by all those connected with the Ascot community, such as Executive Board and Board of Governor members, school leaders, administration staff, teaching staff, non-teaching staff, parents and other carers such as domestic helpers, is essential. Training is provided each year to staff to ensure full transparency and clarity.

### **5.2.1 GENERAL BACKGROUND**

### **5.2.2 ASCOT INTERNATIONAL SCHOOL'S IMPLEMENTATION OF THIS POLICY**

There must be transparent and open communication, dialogue and coordination at Ascot for our Child Protection Policy to be effective. Staff need to be aware of what constitutes abuse and be familiar with procedures and guidelines as well as disciplinary procedures taken if procedure is not followed.

Ascot International School is part of a wider growing system involving other agencies such as the Thai Social Welfare Department, doctors and police, so a close, cohesive and positive liaison is essential and should be based on trust and understanding of each other's roles.

Ascot International School is not isolated nor should it place itself in a position of isolation. Understanding and communication between all agencies, problematic as it can be at times, is crucial for satisfactory child protection practice to be achieved.

Child protection is a complex issue and the five key areas to be considered at Ascot are:

1. Monitoring suspicion
2. Dealing with clear indications of possible abuse
3. Coping with known victims and those responding responding to the disclosure
4. Dealing with parents and community
5. Curriculum development and awareness

### **5.2.3 ASCOT CORE STATEMENTS**

The implementation of the Thai provisions as identified as the 'Procedural Guide for Handling Child Abuse Cases' as stated in the Child Protection Act 2003 has further focused attention on the responsibility of all adults to uphold the rights of children and to work together to protect them and promote their welfare in every way. This is reinforced as Ascot being a school that supports the agreements laid out in the United Nations Rights of a Child.

Our school fully accepts this responsibility. These principles have implications, in particular for those who have regular contact with children in their professional lives. All staff members at Ascot are committed to meeting these responsibilities. This will be achieved through school policies on positive behaviour, equal opportunities, dealing with bullying and a curriculum for personal, social and health education.

Where there are concerns about a child it is essential that Ascot follows the agreed procedures and works together with other agencies as necessary to provide for the child's needs. For each school the DSL has special responsibility for coordinating all matters regarding child protection in the school.

## **5.3 RECOGNISING CHILD ABUSE**

### **5.3.1 CHILD ABUSE DEFINED**

Any act of commission or omission that endangers or impairs the physical or psychological health and development of an individual under the age of 18.

It is committed by individuals, singularly or collectively, who by their characteristics (e.g. age, status, knowledge, organisational form) are in a position of differential power that renders a child vulnerable.

Such acts are not viewed as limited to a child-parent/guardian situation but include anyone who is entrusted with the care and control of a child e.g. childminders, relatives, teachers, etc.

Abuse may also be perpetrated by someone who is not known to the child.

In determining whether a case should be defined as a child abuse case, the DSL/DDSL, in consultation with Ascot's SLT as appropriate, should make assessment based on individual case merits, taking into consideration various factors e.g. the child's age, the act, the consequences of the act on the child, etc. alongside the frequency and nature of the incident that has occurred.

There are four main areas of child abuse and more information is available on the [Ascot Child Abuse Checklist](#):

- abuse due to neglect;
- physical abuse;
- sexual abuse;
- psychological/emotional abuse.

It should be recognised that signs of abuse may also be a symptom of another problem.

### 5.3.2 ABUSE DUE TO NEGLECT

This is a severe or repeated pattern of lack of attention to a child's basic needs that endangers or impairs the child's health or development.

Neglect may be:

- **Physical** (e.g. failure to provide necessary food, clothing or shelter, failure to prevent physical injury or suffering, lack of appropriate supervision or left unattended)
- **Medical** (e.g. failure to provide necessary medical or mental health treatment)
- **Educational** (e.g. failure to provide education or ignoring educational needs arising from a child's disability)
- **Emotional** (e.g. ignoring a child's emotional needs or failure to provide psychological care)

### 5.3.3 PHYSICAL ABUSE

This is a physical injury or physical suffering to a child including non-accidental use of force, deliberate poisoning, suffocation, burning, Munchausen's Syndrome by Proxy, etc. where the injury has been inflicted non-accidentally.

### 5.3.4 SEXUAL ABUSE

This is the involvement of a child in sexual activity e.g. rape or oral sex which is unlawful, or to which a child is unable to give informed consent.

This includes direct or indirect sexual exploitation and abuse of a child e.g. production of pornographic material.

It may take place within the home or outside the home.

It may be committed by parents, carers, other adults or children singly or acting in an organised way.

The abuser may make use of rewards or other means to attract the child. It may be committed by individuals either known or strangers to the child.

**NB:** Child sexual abuse is different from casual sexual relationship that does not include any sexual exploitation, e.g. between a boy and a girl, though the boy can be liable for offences like indecent assault or unlawful sexual intercourse with an under-aged girl.

### **5.3.5 PSYCHOLOGICAL ABUSE**

This is the repeated pattern of behaviour and attitudes towards a child or extreme incident that endangers or impairs the child's emotional or intellectual development.

Examples include acts of spurning, terrorizing, isolating, exploiting/corrupting, denying emotional responsiveness, conveying to a child that he/she is worthless, flawed, unwanted or unloved.

Such acts damage immediately or ultimately the behavioural, cognitive, affective, or physical functioning of the child.

## **5.4 MANAGING CHILD PROTECTION AT OUR SCHOOL**

The management of a Child Protection issue in a school context will be dependent on the needs of the case. A procedural flowchart is included, which outlines the various events and actions that may occur in managing a case, and shows the relationship between them and the sequence in which they may occur. This sequence of events and actions includes the following, each of which is detailed below:

### **5.4.1 ATTENDANCE AND FIRST DAY CALLING**

### **5.4.2 CHILD PROTECTION PROCEDURE**

1. Disclosure
2. Recording
3. Reporting
4. Response coordination by the DSL/DDSL
5. Case conference meeting
6. Determining measures to ensure appropriate confidentiality
7. Monitoring
8. Working with parents/guardians/carers
9. Referral/involvement of other agencies (MA)
10. Ongoing support for victims and others

### **5.4.2 DISCLOSURE**

Identification of child abuse or suspected child abuse may occur through observations and/or a conversation between a staff member and a student or group of students.

When this occurs, it is important for the member of staff to follow the guidance for how to conduct a disclosure conversation, remembering in particular:

1. To remain calm and reassuring; disclosing to an adult is often an incredibly difficult thing for a child to do.
2. To refrain from promising confidentiality.
3. To ask open-ended questions and encourage the student to talk, rather than asking closed or leading questions.
4. To avoid passing judgment on anything being described to them.
5. To take every disclosure seriously.

### 5.4.3 RECORDING

Details of any indicators of possible child abuse observed by a member of staff, whether through observation, disclosure or some other means, must be recorded as soon as possible after an indicator has been observed.

#### 5.4.3.1 WHAT TO RECORD

Consideration should be given to any or all of the following:

1. Patterns of attendance including unexplained absences or those that follow a pattern.
2. Nature and quantity of contact with parents/domestic helpers.
3. Nature and quantity of contact with school staff: Nurses, EA, frequently seeking out attention and/or reassurance.
4. Body Language and Behaviour including changing behaviour associated with a particular time or day; marked changes in behaviour or attitude over time; eating disorders or changes in eating patterns, complaints about feeling unwell, difficulties in walking or sitting; sexualised behaviour, symptoms of drug/solvent abuse. Mood (and changes in this) reactions to adults coming to collect the child.
5. Language, either explicit or ambiguous.
6. Play, acting out abuse in play situations or drama; exhibiting extreme aggression or withdrawal, change in play patterns.
7. Drawing and/or writing (including online) about people with detailed genitalia; suspicious incidents in diaries or news; detailed stories of abuse in "imaginative" writing.
8. Medicals and PE including a reluctance to undress; bruising; torn clothing; bloodstains; smell of semen.
9. Indications or neglect when there is inappropriate clothing; poor personal hygiene; strong attention or affection seeking; underweight or small for age.
10. Injuries to the child such as bruises; lacerations and welts; burns and scalds; injuries or medical problems that do not receive medical attention.
11. Relationships (including online) that focus on inappropriate dialogue, conversation or contact.
12. Record any special needs of the child.

This list is by no means exhaustive, and what is appropriate to record will vary in each individual case, and according to the age and maturity of the child.

#### 5.4.3.2 HOW TO RECORD

The Ascot Child Protection Report (CPSP) should be used to record concerns. A master copy of this form can be found [here](#). Before completing this form, the steps below must be followed (for screenshots of the process):

1. make a copy of the document



2. rename it using the name standards outlined here (put in link)
3. change the security settings so 'only specific people can access'.
4. share it with HSS/Inc

When completing the Ascot Child Protection Report, it is imperative that:

- **The record only contains facts.** These records may be open to disclosure to parents and legal representatives and it is therefore essential that they only contain factual material. It is important not to interpret what is seen or heard, simply to record. This will also help to reduce teachers' natural concerns about committing such sensitive matters to paper.
- **Day, date, time and place should be included.** This will make it possible to discern any patterns of behaviour more easily.
- **Background information should be included in order to put the incident in context.** The events leading up to and surrounding an incident can be as important as the incident itself. Examples of such relevant information would include such things as details of the setting, triggering factors, and details of school routine that might have a bearing on the observed behaviour.
- **Any record of the child's words should be verbatim and not the teacher's interpretation of the child's words.** This would include the child's words for the parts of the body, rather than the adult ones that the teacher would use. Where a teacher tries to clarify what a child is trying to say, the record should include details of the teacher's questions. It may be appropriate to have photographic evidence of some specific injuries

#### 5.4.4 REPORTING A DISCLOSURE

1. All initial reporting is to be completed on the green [Ascot Child Protection Form](#) (ACPF) by the member of staff involved.
2. This member of staff observing indicators of child abuse or possible child abuse must contact the DSL or DDSL as soon as possible, ideally after having recorded their concerns on the green ACPF.
3. It is recognized that many members of staff may wish to consult the DSL/DDSL for an initial discussion before making a record, but this should not be at the expense of timely recording or cause a delay in the process.
4. The staff member should pass on their recorded comments on the green ACPF to the DSL/DDSL and should not keep their own copy of the record.
5. The report must be given directly to the DSL/DDSL and to no other member of staff. If the DSL or DDSL is unavailable the member of staff must keep the ACPF in a locked drawer/cupboard until they can find them. They will need to email the DSL/DDSL to inform them they are looking for them.
6. The DSL/DDSL will open a file for the child in question within the Child Protection Folder and only share it with the relevant members of staff. All records of conversations, incidences, actions taken will be stored in this file.

Should a member of staff observing indicators of child abuse or potential child abuse not follow the steps outlined above the following disciplinary action will be taken:

- Verbal warning
- Written warning
- Termination

Below are some examples of situations highlighting actions that will result in disciplinary action.

| Reporting stage | Action taken  | Cause for concern  |
|-----------------|---|--|
| 1               | Member of staff writes down initial report on their computer screen and leaves it turned on and unlocked.                   | Lack of confidentiality and others can edit information.   |
|                 | Member of staff writes down initial report on scrap paper.  | Member of staff won't know the cues on the ACPF and may miss important information.  |
|                 | Member of staff writes down initial report in an email.   | Can be sent to the wrong person.   |
| 2               | Member of staff does not contact the DSL/DDSL immediately and 1 working day has passed since the initial incident.          | Cases can not be dealt with urgently and in a timely manner.   |
|                 | Member of staff does not contact the DSL/DDSL at all and speaks to a colleague.   | Procedures are not being followed and this can create gossip and lack of confidentiality.                                  |
|                 | Member of staff talks to others about the situation and treats it as gossip.  | Lack of confidentiality and others can change information.   |
| 3               | Member of staff does not seek advice at the earliest opportunity and the DSL/DDSL have not been informed of the disclosure. | Cases can not be dealt with urgently and in a timely manner.   |
|                 | Despite advice being given from the DSL/DDSL the member of staff has not completed the ACPF.                                | Cases can not be dealt with urgently and in a timely manner.   |
| 4               | Member of staff makes and keeps a copy of the ACPF on their desk.   | Lack of confidentiality and others can edit information. Sensitive information can be seen by people who are not involved. |
|                 | Member of staff makes keeps a copy of the ACPF in their email.  | Lack of confidentiality and others can edit information. Sensitive information can be sent to people who are not involved. |

|   |   |  |
|---|---|--|
| 5 | Member of staff leaves the ACPF unattended on their desk, classroom, staffroom etc.                   | Lack of confidentiality and others can edit information. Sensitive information can be seen by people who are not involved. |
| 6 | Member of staff shares the online document with others not involved in the case.                      | Lack of confidentiality and others can edit information. Sensitive information can be sent to people who are not involved. |
|   | Member of staff does not update the ACPF in a timely manner.  | Cases can not be dealt with urgently and in a timely manner.   |
|   | Member of staff does not record parent meetings and/or parent emails relating to the case on the ACPF | Cases can not be dealt with urgently and in a timely manner.   |
|   | Member of staff does not share the ACPF with the DSL/DDSL after updating it in a timely manner.       | Cases can not be dealt with urgently and in a timely manner.   |

#### 5.4.5 RESPONSE COORDINATION BY THE DSL/DDSL

Once a report of child abuse/possible child abuse is made, the role of the DSL/DDSL is to coordinate the school's response to the report, supporting those involved and following the procedures laid out in this policy

#### In particular, the Ascot DSL/DDSL plays the leading role in:

- Deciding on whether there is a valid basis for suspicion (in consultation with the school SLT where appropriate) based on the report(s) made.
- If there is a valid basis, convening a case conference of relevant school colleagues.
- Overseeing any established monitoring system.
- Coordinating work with parents, if applicable.
- In conjunction with the SLT and School Nurse making referrals to other agencies.
- Coordinating ongoing support for the child or children involved and any other relevant parties.
- Maintaining the child protection/Inclusion folder as the single central record of each case.
- Where the alleged perpetrator of abuse/neglect is a member of Ascot staff, promptly informing the Director and HoS and work with them to manage the case.

In cases where there is serious injury the DSL/DDSL will also coordinate the process of taking the child to hospital. The child should be accompanied by the DSL/DDSL or by another member of staff to whom this responsibility is delegated, to the nearest Accident & Emergency Department.

Wherever possible the child's parent(s)/guardians/carers should also attend, or if this is not possible then their permission should be sought. If parental consent cannot be obtained the child should still be taken to the nearest Accident and Emergency Department should be contacted for further advice as soon as possible.

In carrying out the above responsibilities, the DSL/DDSL liaises with, and is supported by, the HoS. It may be appropriate for the DSL/DDSL to seek advice from other professionals or agencies.

#### **5.4.6 IN-SCHOOL MULTI AGENCY REVIEWS**

Unless action is already being taken and/or the case has already been referred to an external agency, where a report of a Child Protection issue has been determined by the DSL/DDSL to be the basis for a valid suspicion of abuse and/or neglect, the DSL/DDSL should, as soon as possible and no later than 10 working days from the date of the first report convene a case conference of relevant colleagues to discuss the case.

The Multi Agency Review (MAR) should include but is not restricted to the following members of staff:

- DSL
- DDSL
- Head of Pastoral Care
- Head of School
- Pupil's Teacher
- Pupil's TA
- School Director
- School Health Professional - Nurse/Play Therapist
- External Professional
- SENDCO
- Parents
- If appropriate (The Child)
- Local Police community liaison officer

The above list indicates who is included at a MAR, future actions for the management of the case will be identified, around a framework of three options:

- Monitoring
- Involving parents
- Referral/involvement of other agencies

The outcomes of the conference will be minuted and added to the child's file in the Child Protection Folder.

After the initial case conference, the DSL/DDSL will determine whether/when future case conferences will be convened to manage the case on an ongoing basis.

Generally speaking, further case conferences should be convened when:

- a period of monitoring has come to an end and the monitoring system in use needs to be reviewed;
- significant new information has come to light or the situation has changed in some way;
- a further decision on the progress of the case is necessary, e.g. a particular course of action has proved ineffective and a rethink is needed.

#### **5.4.7 DETERMINING MEASURES TO ENSURE CONFIDENTIALITY**

Determining measures to ensure confidentiality In a suspected case of child protection, all communication must be treated with confidentiality.

Sensitive information is only to be shared with the group monitoring the case, on a 'need to know' basis. It will rarely be appropriate for all staff to be made fully aware of the details of the case.

All records relating to the management of the case must be kept solely in the Child Protection Folder. Access to the folder must be restricted to the DSL/DDSL and the School SLT.

On no account must any Child Protection records be kept with the child's general records. If a child moves from one Ascot International school to another (including as part of transition between phases), any records stored in the Child Protection Folder should be transferred securely to the new school.

If any request is made from outside the school for information which would potentially involve sharing the contents of a Child Protection file, the DSL/DDSL should act in accordance with the Ascot Personal Data Handling Policy and should liaise with the HoI as appropriate in doing so.

#### **5.4.8 MONITORING AND RECORDING CONCERNS**

One possible action to be taken in response to a report of a Child Protection disclosure is the adoption of the school Inclusion Monitoring System.

##### **5.4.8.1 THE PURPOSE OF CHILD PROTECTION SUPPORT PLAN (CPSP) MONITORING**

The purpose of a formalised framework for monitoring suspected cases of child abuse is to:

- Clarify the nature and extent of the concerns.
- Provide a clear record of the facts which contribute to the development of concerns.
- Help to identify patterns of behaviour.
- Provide a means of reducing staff concerns.
- Enable subsequent referrals to Social Welfare Department to be made clearly and professionally.

The key components of the CPSP monitoring system can be represented by the following questions:

1. Who is being asked to monitor the child?
2. For what specified period are they doing this monitoring?
3. What indicators are they looking out for?
4. What should they do if they witness one or more of these indicators?

Ongoing monitoring means that a detailed understanding can be built up over time of the child's situation. Individual observations may not seem to indicate much by themselves but, when combined with other observations gathered over time, can form a significantly bigger and holistic picture of the child.

All of the staff involved in a monitoring system should be aware of how the system operates and when it will be used.

It is likely that the school will most often use a monitoring system as a means of information gathering prior to the involvement of the external authorities, or as a means for the school to manage the case itself. However, the school may also be asked to monitor, or to continue to monitor, a child either as part of an ongoing investigation by the Police/other official agencies or when an investigation has taken place and there are still concerns about a child.

#### **5.4.9 WORKING WITH PARENTS/GUARDIANS/CARERS**

Parents and children will feel more confident about the school's ability to deal with the problems if they know that a constructive policy is operating within the school.

Good liaison with parents will ensure that they understand the role and duties of school staff in promoting child protection

#### **5.4.10 DEALING WITH PARENT DISCLOSURES**

Parents are informed fully of the school CP procedures and understand their responsibilities within this framework. This is communicated heavily through the internal BoG meetings and also through regular parent communication and training thus channelled through the Parent Support Group (PSG)

#### **5.4.11 REFERRAL/INVOLVEMENT OF OTHER AGENCIES**

The liaison at the Thai Family and Child Protective Services Unit (FCPSU) will provide advice, including for cases where there are doubts as to whether to make a formal report or not, during office hours.

For reports on suspected child abuse cases received after office hours see [Child Protection Act 2003](#).

#### **5.4.12 INTERNATIONAL GUIDANCE FOR SCHOOLS & UNIVERSITIES: TRANSFER OF CHILD PROTECTION RECORDS**

It is the responsibility of the Designated Safeguarding Lead to ensure that, 'Where children leave the school, the designated safeguarding lead should ensure their child protection file is transferred to the new school or place of study as soon as possible, ensuring secure transit, and confirmation of receipt should be obtained. For schools, this should be transferred separately from the main pupil file. Receiving schools and places of study should ensure key staff such as designated safeguarding leads and SENCOs or the named person with oversight for SEND in the institution, are aware as required.

In addition to the child protection file, it is the responsibility of the designated safeguarding lead to consider if it would be appropriate to share any information with the new school in advance of a child leaving. For example, information

that would allow the new school to continue supporting victims of abuse and have that support in place for when the child arrives.

This guidance should be followed by all educational establishments that provide education to children and young people up to the age of 18 years. These establishments include schools maintained by the Private and Public sector.

The responsibility for the transfer of records lies with the original setting, as the receiving setting may not otherwise know that child protection concerns exist. It is important that all child protection records are transferred at each stage of a child's education up until the age of 18 years and includes a child's transfer into post-16 education.

#### **5.4.13 THAILAND'S CHILDREN'S PROTECTIVE SERVICES**

This list of services are used by the DSL/DDSL to assist, if needed, with disclosures. Members of staff can access these resources for personal reference but should not contact them regarding a disclosure unless directed by the DSL/DDSL. If this is the case all information gathered needs to be recorded on the child's file.

- [info@childlinethailand.org](mailto:info@childlinethailand.org) for general inquiries
- [Department for Youth and Children](#)
- [Contacts for above](#)
- [1387@childlinethailand.org](mailto:1387@childlinethailand.org) for reporting and coordinating cases
- 1387 - the phone number for reporting cases
- [smirnoffbox@childlinethailand.org](mailto:smirnoffbox@childlinethailand.org) - Ilya Smirnoff (Executive Director Childline Thailand)
- [jinda@childlinethailand.org](mailto:jinda@childlinethailand.org) - Jinda Chaipol (Call Centre Manager Childline Thailand)

#### **Health Partners**

- <https://www.samitivejhospitals.com> › [srinakarin](#) - Dr Jirada - Consultant Psychiatrist
- Dr Damith Woods - Psychological Support Services [damith.wo@standrews.ac.th](mailto:damith.wo@standrews.ac.th)

#### **Legal Partner -**

- [Local Police and Family Service Contacts and Crisis Centre](#)

Childline provides its services for any child under the age of 18. The foundation works with various government and NGO stakeholders to safeguard the rights of every child as outlined by the United Nations' Convention on the Rights of the Child (CRC).

Over one hundred countries worldwide have their own child helplines and many others are in the process of starting one. Helplines for children across the world have demonstrated their effectiveness by providing direct assistance to children in need and making comfort, help and emotional support immediately available.

Children are encouraged to talk about their problems without judgment or fear of making things worse. Outreach services can link children to immediate rescue, safety and provide direct support to the child.

"SaiDek 1387", like most Childlines around the world, is not associated with any government agency. This makes it possible for the organization to urge the authorities to take action and to fully function as a spokesperson and representative of the child population of Thailand.

#### **5.4.14 REFERRAL TO THE THAI AUTHORITIES**

In cases of suspected child sexual abuse or serious physical abuse a referral should be made directly to the Thai Children's Services who will work with the Child Protection Team.

In referring to Thai Children's Services the DSL/DDSL may be asked to provide the following information to hand:

- The immediate cause for concern and any immediate danger
- The child's full name, date of birth, address, I.D. number and special needs of the child
- The child's whereabouts
- Name and THAI ID No. of parents/carers and details of other members of the household e.g. siblings
- Name of the family doctor
- Name of school
- Name, post and phone number of the contact person
- Name of other witnesses and other agencies
- Any other relevant information you may have

It is important to remember that submitted documentation may form part of the evidence should a case develop into court proceedings.

It may be helpful to explain to the duty officer what ASCOT's expectations are of the team dealing with the case, e.g. that they will respond back within a certain time span, keep you informed, etc.

A copy of the referral information should also be sent to the DSL/DDSL via email or a hard copy.

Agree with the [Thai FCPSU](#) how this will be handled and by whom - **do not contact the parents at this stage.**



Confidentiality in these matters must be considered at all times. It may be important to avoid the risk of an abuser being alerted prematurely before the child is adequately protected or when police evidence could be destroyed.

#### **5.4.15 ASCOT ONGOING SUPPORT FOR VICTIMS AND OTHERS**

Ascot CPSP monitoring system is committed to supporting any student who has had traumatic experiences. There can be high levels of anxiety for those involved with supporting known victims of abuse.

Staff often underestimate their abilities in this field and negate their skills and experience because of the emotional impact of child abuse.

##### **5.4.15.1 ASCOT CARE FOR STUDENTS**

Children and young people who experience abuse may have a change in behaviour, which can be difficult to manage. Being caring, consistent and attentive is a necessary support for the students and it is essential all staff continue to work as part of a team in order to provide consistent and appropriate care.

##### **5.4.15.2 ASCOT COMMUNICATION**

Clear communication between all staff, family and other agencies will help in understanding the child's situation and lead to developing strategies to support the child and promote positive and safe behaviour.

If a situation arises where families are not allowed to be contacted then... (need to work with MS to ensure effective communication on iSAMS)

##### **5.4.15.3 ASCOT CARE FOR STAFF**

Consideration needs to be given to the impact on those involved with a case of child protection.

Ascot will ensure a clear system of support is available for all members of staff.

Ascot commits to supporting staff and also providing a support network for DSL/DDSL

## **6. COMPLIANCE**

Child Protection is the responsibility of all adults and should be a part of the whole school approach.

A central obligation of the policy is adherence to Thai guidelines. Where these guidelines indicate that a case should be referred to the Thai FCPSU, the DSL/DSL or SLT must do so without delay and must not deal with such cases in isolation.

Any matters concerning the implementation of this Policy in a particular school/organisation should be raised with the DSL/DDSL or HoS.

Any matters concerning non compliance any member of the Ascot Community should be raised with the HoS.

All visitors at Ascot must sign a [Visitor Code of Conduct](#) which aligns itself with the Ascot Child Protection Policy.