BHAKTIVEDANTA SCHOOL



CHILD PROTECTION AND SAFEGUARDING POLICY

The administration as well as all staff at the Bhaktivedanta School recognise that they always have a full and active part to play in protecting our students. This policy aims to provide all members of staff, all students, and their families with a clear and secure framework for ensuring that all children in the school are protected from harm, both while at school and when not on the school premises.

We believe in supporting the development and learning of all our students by implementing programs into the curriculum that will educate all students to keep themselves safe. We understand that emotional and social aspects of learning create foundation for all academic learning. If a child has not been supported to understand, express and resolve their feelings and emotions, they may not have the ability to share with other children, resolve the small conflicts that arise in day-to-day school life, or concentrate and focus on their learning. Their frustrations may cause a range of anti-social, disruptive, overly compliant, or withdrawn behaviours.

All school stakeholders will work to ensure that:

- · Children and young people feel listened to, valued and respected
- They are aware of the indicators of abuse and know how to share concerns appropriately
- They work within an assessment framework which considers the child's academic and developmental needs, the capacity of the family and other environmental factors

All staff are subject to rigorous recruitment and receive appropriate support, training and guidance. The Bhaktivedanta School is fully committed to providing the highest standards of student welfare and takes proactive steps to actively promote and safeguard all its children. This policy exists to establish the safest possible learning and working environments for all.

Our school actively promotes:

- Personalised approaches towards learning
- Proactive whole school approaches towards the safeguarding of our students
- Reflective practice, in an open, fair, and honest environment

Educational staff and the Health and Well-being Coordinator play a crucial role in helping to identify welfare concerns, and indicators of possible abuse or neglect, at an early stage. The School is committed to referring those concerns to the Department of Health and Social Services (DHS) and Child Protection Officers. Staff will contribute to the assessment of a child's needs and, where appropriate, to on-going action to meet those needs.

In order to ensure children are adequately protected, we will ensure that:

- We track all children's progress on a weekly basis via the school's review and pastoral care meetings
- We have a designated, trained Health and Wellbeing Coordinator who is the go-to person for teachers who notice a student at risk of abuse. The Health and Well Being Coordinator will

follow the necessary protocols and will complete submissions whilst maintaining the confidentiality of any families involved.

- All staff are trained in basic child protection awareness every year
- All staff have read and understand the child protection policy and are aware of the indicators of child abuse and how to respond to concerns or disclosures of abuse by children
- All children, young people and their families are familiar with the child protection policy
- The child protection policy is reviewed on an annual basis by DHS and the board of governors.

The School will:

- establish a safe learning environment in which all learners can learn and develop
- provide learners with information so that they are aware of how to keep themselves safe
- ensure learners know who they can approach if they are concerned
- maintain clear procedures to identify and refer suspected cases of abuse, ensuring all staff are aware of and know the protocols to follow
- adopt appropriate recruitment and human resource procedures, including arrangements
 for police checks/ working with children checks on staff, casual relief teachers, parent
 volunteers and pre-service teachers working with students and vulnerable adults
- provide up-to-date safeguarding related training for all staff working with children and vulnerable adults and ensure their attendance
- collect information about available services in order to provide appropriate support for all learners
- liaise with employers to ensure relevant learners/ work experience on placements or training have appropriate safeguards in place.

Recognising Abuse

In accordance with the Queensland Child Protection Acts 1999 and their vision that Queensland children and young people are cared for, protected, safe and able to reach their full potential the Bhaktivedanta School will focus on mandatory Safeguarding and promoting the welfare of all children, thus ensuring the safety, wellbeing and best interests of a child because every child has a right to be protected from harm or risk of harm.

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting, by those known to them or, more rarely, by a stranger for example, via the internet. They may be abused by an adult or adults, or another child or children.

Physical Abuse

Physical abuse can involve hitting, shaking, throwing, poisoning, burning, scalding, drowning, and suffocating. It can also result when a parent or carer fabricates the symptoms of, or deliberately induces illness in a child.

Emotional Abuse

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development and may involve conveying to children that they are worthless or unloved or inadequate. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate.

It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. This can also occur when a child is a young carer for a parent who is disabled or has mental health problems or misuse alcohol or drugs.

It may involve seeing or hearing the ill-treatment of another for example where there is fighting or violence in the home. It may involve serious bullying (including via electronic media), causing children frequently to feel frightened or in danger. Some level of emotional abuse is involved in all types of maltreatment of a child, thought it may occur alone

Sexual Abuse

Sexual abuse involves forcing or enticing a child to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching out-side of clothing.

They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Neglect

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once the child is born, neglect may involve a parent or carer failing to provide adequate food, clothing and shelter or protecting a child from physical and emotional harm or danger, ensuring adequate supervision or ensuring access to appropriate medical care or treatment.

Exploitation is marked out by an imbalance of power in the relationship and involves varying degrees of coercion, intimidation and sexual bullying including cyberbullying and grooming.

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It is important to recognize that some young people who are being sexually exploited do not show any external signs of this abuse and may not recognize it as abuse. Young people who go missing can be at an increased risk of sexual exploitation and so procedures are in place to ensure appropriate response to children and young people who go missing, particularly on repeat occasions.

Roles and Responsibilities

When to Warrant action under Child Protection Procedures

When a member of staff becomes aware that a child may be living in a household where there is emotional, physical or sexual violence, they should attempt to find out whether the family are receiving help and should consider contacting the referral or advice lines below. Schools will notify the necessary department if there is a concern that a young person may be at risk and will contact Department of Human Services – Child Protection Officers and School Health and Well Being Coordinator.

The Health and Well-being Coordinator takes the lead responsibility for child protection, including support for other staff and information sharing with other agencies, developing policies and staff training. Usually, the Health and Well-being Coordinator is also the named person who responds to allegations made against members of staff.

The Health and Well-being Coordinator should be a senior member of staff with the authority and seniority to carry out the functions of the role. The Health and Well-being Coordinator making the report is to refer suspected abuse and neglect to the First Response Service, and report allegations made against members of staff to the Local Authority.

He/She will develop and update the Child Protection Safeguarding policies, ensuring that staff, children/families/parents and carers are aware of them; provide support and advice to all members of staff within the setting regarding child protection concerns; keep the Principal informed about any issues that arise; ensure that a child protection file is copied for the new educational establishment when a child moves educational settings, and that this file is transferred securely and separately from the main student file; ensure that staff receive appropriate child protection and safeguarding training, and maintain training records; co-operate with any requests for information from the local authority, such as child protection training returns and self-evaluative forms for safeguarding and child protection,

Where accusations are made against a member of staff the following procedures will be followed by the Principal. The Principal will:

- Ensure that the child reporting the allegation is safe and away from the member of staff against whom the allegation has been made;
- Contact DHS immediately
- Make a referral to the Children's Service where the child resides, if appropriate;

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- Contact the parents/carers of the child, following advice from DHS;
- Amend strategy meetings convened by the Local Authority Designated Officer (LADO) and act upon the decisions made at these meetings.

Suspension will be considered when:

- There is a cause to suspect a child is at risk of significant harm or;
- The allegation warrants investigation by the police or;
- The allegation is so serious that it might be grounds for dismissal.

If the accusation is against the Principal, the nominated Health and Wellbeing Coordinator will lead all decision-making and follow the above procedures. Any disciplinary investigation will be carried out once the child protection investigation has been completed.

Even if a staff member/parent think the concern is minor, the Health and Wellbeing Coordinator may have more information, so open communication is necessary between the coordinator and the teachers. It is your decision alone how to respond to concerns, but it is always YOUR responsibility to share concerns, no matter how small.

Decide whether you need to find out more by asking the child/young person, or their parent to clarify your concerns, being careful to use OPEN questions:

.... beginning with words like: 'how', 'why', 'where', 'when', 'who'?

Let the child/young person/parent know what you plan to do next, if you have heard a disclosure of abuse or you are talking with them about your concerns. Do NOT promise to keep what s/he tells you a secret.

..... for example, 'I am worried about your bruise and I need to tell Mrs X so that she can help us think about how to keep you safe'. (The Health and Wellbeing Coordinator and the staff can create a script that can be used across the school.)

Inform the Health and Wellbeing Coordinator, if not available, inform the Principal or a member of the Leadership team.

If there are no members available, then you must make the referral yourself.

Make a written record as soon as possible after the event, noting:

- a. Name of child
- b. Date, time and place
- c. Who else was present
- d. What was said/what happened/what you noticed in speech, behaviour, mood, drawings, games or appearance
- e. If a child or parent spoke, record their words rather than your interpretation
- f. Analysis of what you observed and why it is a cause for concern.

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The Health and Wellbeing Coordinator may take advice from the (DHS) First Response Team.

The Health and Wellbeing Coordinator makes the referral to the First Response Service.

The referral will note all previous intervention by the school with the child, any relevant history relating to the child, their siblings or the family. The Health and Wellbeing Coordinator shares information with other relevant professionals, recording reasons for sharing information and ensuring that they are aware of what action the other professionals will take as a result of the information shared.

The DHS or the First Response Service may suggest to delay informing the parent/carer in cases of suspected sexual abuse, or where informing the parent might put the child at further risk, to prevent the child being harmed or intimidated (and retracting the disclosure).

Or in cases of suspected Fabricated or induced illness by proxy, the parent/carer is not informed that this is being considered.

The Health and Wellbeing Coordinator remains in close communication with other professionals around the child/young person and with the family, in order to share any updates about the child/young person. If a child protection investigation is pursued, the Health and Wellbeing Coordinator and other key school staff will:

- Work closely and collaboratively with all professionals involved in the investigation, to keep the child/young person safe;
- Attend a child protection conference when invited and provide updated information about the child;
- Attend any subsequent child protection review conferences;
- Attend core group meetings and take an active role in the implementation of the protection plan.

At Bhaktivedanta School, every member of our school community is committed to keeping our students safe and happy.

Key Contacts in Child Protection

Health and Wellbeing Coordinator

General Child Services

Department Of Human Services Child Support - Brisbane

Department Of Human Services

