



Warwick Academy

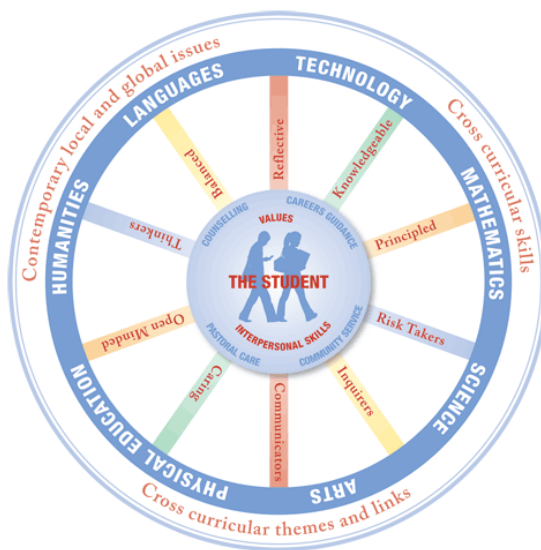
'so much more than a place to learn'

Child Protection Policy Abuse/Neglect Prevention Programme

Mission Statement

Building on centuries of excellence, we provide an international educational environment designed for our diverse student body. Our innovative curriculum is delivered with a commitment to personalised pastoral care and enhanced by a dynamic co-curricular programme. We strive to create a culture of collaboration so that our students can become lifelong learners, global thinkers and successful leaders.

CURRICULUM MODEL



NOTES

To be reviewed: April 2026

Staff involved: CPL, ST

Dated: April 2025

Introduction

Warwick Academy is committed to working together to safeguard and promote the welfare of all our students with dignity and respect.

This Policy is governed by:

- Bermuda Law: The Children Act 1998. Key articles are:
 - Meaning of significant harm.
 - Offences related to child abuse.
 - Mandatory reporting of child abuse.
- International Law and the United Nations Convention on the Rights of the Child, key articles are:
 - Article 19: Protection from abuse and neglect.
 - Article 34: Protection from sexual exploitation.

Purpose

- To guard against abuse and establish the responsibility of all to protect our students and their rights.
- Maintain a safe and secure environment for all students who are entrusted to our care and foster healthy relationships.
- Clear and shared guides to appropriate behaviour by staff and volunteers as they relate to students.
- Clear protocol for reporting abuse/neglect or suspected abuse/neglect.

Aims

- Staff, Board Members, Parents, External Service Providers, and Volunteers:
 - Have access to this policy through public-facing websites, parent and staff pages, student applications, and staff employment applications.
 - Are aware and held accountable to this policy, highlighting mandated reporting protocol and code of conduct.
 - Raise awareness and understanding as to types of abuse and possible signs of abuse and neglect. **(Appendix 1).**
- From The Children Act: Mandatory reporting of child abuse: Children Act 1998
 - Every person who has information indicating that a child is suffering or has suffered significant harm, **shall forthwith report** that information to the Director (DCFS).
 - Notwithstanding subsection (1) or any statutory provision, a person who performs professional or official duties with respect to a child, including—
 - a physician, nurse, dentist, pharmacist, psychologist or other health care professional.
 - a school principal, teacher, counsellor, social worker, youth or recreational leader, member of the clergy or childcare worker; or police officer, probation officer or youth care worker.
 - As mandated reporters we cannot remain anonymous.
- Ensure continued professional development and communication surrounding the content of this policy and the safeguarding and protection of the welfare of students.
- Yearly review of Child Protection Policies with all staff.
- **SCARS (Saving Children and Revealing Secrets)** training for current staff every 3 years.
- Ensure **prevention education** for all students, regularly monitored, and evaluated. **(Appendix 5).**
- Keep disclosures/discussions **confidential**.

- Ensure continued clear recruitment and hiring expectations with diligent screening.
 - Must provide a current criminal police clearance certificate prior to the commencement of their employment. Any criminal offence must be immediately disclosed to the Principal.
 - Training in **SCARS** and Child Protection Policies.
- This policy is linked to strategic planning, budgeting, recruitment, performance management, whistleblowing, and risk management, etc.
- Ensure continued diligent on-campus and digital security.
 - All visitors must sign in.
 - Volunteers only work with groups of students not one-on-one sessions.
 - Lanyards and badges to be worn by all staff (blue), visitors (white) and contractors (red).
 - Child Protection Pocket Guides and Cards distributed to all staff, on view in the main office, and explained to all visitors.
 - All staff are required to provide a new criminal police clearance certificate every 5 years. Any criminal offence must be immediately disclosed to the Principal.
 - All other persons who may occasionally come into contact with students (contract cleaners, learning specialists, trainers, or coaches) must provide a criminal police clearance certificate and provide proof of identity before commencing work.
 - Device Monitoring and Management: software for network and classroom safeguarding.
 - Staff adherence to **Code of Conduct (Appendix 2)**.
- Ensure safeguarding of pupils extends to instances of abuse by one or more pupils against another pupil (**See also Anti-Bullying Policy**).
- Within the Board Compliance Committee, a team focusses on Child Protection and consists of a Governor with Child Protection oversight, the Principal, and the Child Protection Lead (CPL).
 - The CPL is
 - Responsible for completing and following the current Department of Child and Family Services (DCFS) mandated reporting protocol.
 - Provide advice/support to students, families, and staff.
 - See **Resource List (Appendix 3)**.
 - Records all DCFS referrals in CPOMS.
 - Electronic communication of all DCFS updates to Principal, HOS, HOP, and DH:P.
 - Termly/Bi-Termly communication with Strategic Team with updates and reports.
 - Annual environmental evaluation of situational risks and mitigating factors, such as shared adult/student toilet facilities, or spaces that lack visual and auditory supervision.
 - Annual review of this Policy and any child protection cases/incidences to see what lessons can be learned and evaluate if any revisions to policies or procedures are needed.
 - If the Principal is absent, any allegations made against staff shall be reported to the CPL who, in turn, will report the matter to the Head of Secondary/Head of Primary as necessary. If an allegation is made against the Principal, the CPL reports the matter to the Governor providing oversight for Child Protection. If an allegation is made against the CPL, a report is made to the Principal.

Child Protection Lead (CPL) Referral Procedure to DCFS

All below must be done as soon as possible and always done the same day.

We are **ALL MANDATED REPORTERS**.

- **If a student discloses to another staff member:**
 - Explain you cannot promise to keep what you are told a secret.
 - Try not to: question/prompt the child AND take notes of what the child is saying when they are freely recalling significant events.
 - Ask if they have told anyone else.
 - Tell the child you are pleased they have told you and it was the right thing to do.
 - After the disclosure, explain to the student what will happen next – going to talk to CPL.
 - Immediately after:
 - If possible, escort the student to CPL, if not possible send the student to CPL.
 - Same staff member type, print out, and sign a written record of the student statement.
 - i. Name, DOB, and year group of the student.
 - ii. Date, time, and location of conversation noting any visible injuries.
 - iii. As accurate as possible details of the conversation and email statement to CPL
 - CPL and reporting staff members will jointly fill out Child Protection Referral Form and follow subsequent actions listed below, under “c”.
- **If the student discloses to a CPL**
 - a. If any visible injuries are present – decide if any medical attention is needed.
 - b. Empathetically explain to the student what will happen next – have to get help for him/her.
 - c. Fill out the **Child Protection Referral Form (Appendix 4)**.
 - d. Email the completed form to DCFS with read/delivery receipt
 - e. Spend time with the student generally checking in and using best judgment as to when they will return to class. Inform them they should feel comfortable seeking out the counsellor if they need to, and the counsellor will check-in.
 - f. DCFS contacts the CPL with information regarding the investigation within 5 business days.
- Once DCFS confirms receipt of documents – no contact should be initiated to discuss the case with the student or involved parties as this could interfere with DCFS and their ability to conduct a thorough investigation. The counsellor may check in with the student in general terms.
- If DCFS comes to campus to interview students, Warwick Academy requires the following:
 - a. DCFS worker(s) must sign in at the main office.
 - b. The CPL or counsellor meet the DCFS worker(s) and then bring the student to the meeting room.
 - c. All students must be interviewed by two DCFS workers; in the case that two DCFS workers are not available the CPL or counsellor must be present with the student and the DCFS worker – no students shall be interviewed with just one DCFS worker.
 - d. DCFS to make significant contact with parents/guardians after the on-campus interview of the student: same day before the end of the school day.
- **If a staff member becomes aware of abuse of any student or child outside school hours, please refer to the Resource Section (Appendix 3) for contact numbers.**

Appendix 1:

CHILD PROTECTION

A broad term used to describe philosophies, policies, standards, guidelines, and procedures to protect children from both intentional and unintentional harm. In this document, the term “child protection” applies to the protection of children in international schools. Please note that this definition also includes harm to self. Child protection concerns include suspected, alleged, self-disclosed, or witnessed abuse of a child by anyone associated within or outside the school which must be investigated and followed by appropriate action.

CHILD ABUSE

According to the World Health Organization, child abuse constitutes, “all forms of physical and/or emotional ill-treatment, sexual abuse, neglect or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child’s health, survival, development or dignity in the context of a relationship of responsibility, trust or power.”

A person may abuse a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional (e.g. school) or community setting; children may be abused by individuals known to them, or more rarely, by a stranger. Often children may experience multiple forms of abuse simultaneously, further complicating the problem.

Most child abuse is inflicted by someone the child knows, respects or trusts. International school communities have unique characteristics of which school personnel must be aware in terms of the individuals who are around our children. School personnel should be knowledgeable of the potential reasons why children may not be able to talk about any victimization they might have experienced.

PHYSICAL ABUSE

Physical abuse may involve hitting, punching, shaking, throwing, poisoning, biting, burning or scalding, drowning, suffocating or otherwise causing intentional physical harm to a child.

Signs of physical abuse:

- Bruises, burns, sprains, dislocations, bites, cuts.
- Improbable excuses are given to explain injuries.
- Injuries which have not received medical attention.
- Injuries that occur to the body in places that are not normally exposed to falls, rough games, etc.
- Repeated urinary infections or unexplained stomach pains.
- Refusal to discuss injuries.
- Withdrawal from physical contact.
- Arms and legs are kept covered in hot weather.
- Fear of returning home or of parents being contacted.
- Showing wariness or distrust of adults.
- Self-destructive tendencies.
- Being aggressive towards others.
- Being very passive and compliant
- Chronic running away.

EMOTIONAL ABUSE

Emotional abuse is the persistent emotional ill-treatment of a child to cause severe and adverse effects on a child's emotional development. It may involve conveying to children that they are worthless or unloved; that they are inadequate or valued only insofar as they meet the needs of another person; age or developmentally inappropriate expectations being imposed on children; causing children frequently to feel frightened; or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of ill-treatment of a child, though it may also occur alone.

Signs of emotional abuse:

- Physical, mental and emotional development is delayed.
- Highly anxious.
- Showing delayed speech or sudden speech disorder.
- Fear of new situations.
- Low self-esteem.
- Inappropriate emotional responses to painful situations.
- Extremes of passivity or aggression.
- Drug or alcohol abuse.
- Chronic running away.
- Compulsive stealing.
- Obsessions or phobias.
- Sudden underachievement or lack of concentration.
- Attention-seeking behaviour.
- Persistent tiredness.
- Lying.

SEXUAL ABUSE

Sexual abuse involves forcing or enticing a child to take part in sexual activities, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative (i.e. rape) or non-penetrative acts. They may include non-contact activities, such as involving children in the production or viewing of pornographic material or encouraging children to behave in sexually inappropriate ways. Children involved in commercial sex work are victims of sexual abuse, whether they perceive themselves as victims or not.

Signs of sexual abuse:

- Pain or irritation to the genital area: discharge, bleeding, infection, STDs, difficulty with urination.
- Fear of people or places.
- Regressive behaviours: bed wetting or stranger anxiety.
- Excessive masturbation/sexually provocative.
- Stomach pains or discomfort walking or sitting.
- Being unusually quiet and withdrawn or unusually aggressive.
- Suffering from what seem like physical ailments that can't be explained medically.
- Showing fear or distrust of a particular adult.

- Mentioning receiving special attention from an adult or a new “secret” friend.
- Refusal to continue with school or usual social activities.
- Age-inappropriate sexualized behaviour or language.

NEGLECT

Neglect is the persistent failure to meet a child’s basic physical or physiological needs, likely to result in serious impairment of the child’s health or development.

Some indicators of neglect:

- Medical needs unattended.
- Lack of supervision.
- Consistent hunger.
- Inappropriate dress.
- Poor hygiene.
- Inadequate nutrition.
- Fatigue or listlessness.
- Self-destructive.
- Extreme loneliness.
- Extreme need for affection.
- Failure to grow.
- Frequent lateness or non-attendance at school.
- Low self-esteem.
- Poor social relationships.

LONG-TERM IMPACT OF UNMITIGATED CHILD ABUSE

The impact of child abuse can persist for a lifetime after the abuse has been committed. Some victims of abuse are resilient and thus manage to function and survive. Much research has established the relationship between long-term child abuse and lifetime health and well-being, especially if the children do not get appropriate support to help them cope with the trauma.

The most important point to consider is that children often are exposed to multiple forms of abuse and suffer a myriad of symptoms. Furthermore, all forms of abuse have the potential for long-term impact on the victims and can affect the victim's ability to function as a human being. Abuse challenges the self-value, self-esteem, and sense of worth of its victims, rendering them hopeless, helpless, and unable to live a complete life.

The long-term impact of child abuse:

- Poor educational achievement.
- Inability to complete responsibilities.
- Inability to live according to plan/ability.
- Inability to care for self.
- Inability to coexist, cooperate or work with others.
- Lack of self-confidence, prone to addiction.
- Inability to express love / or accept love.

- Inability to lead family, constant health problems.
- Prone to mental health problems.
- Low self-esteem, depression, and anxiety.
- Post-traumatic stress disorder (PTSD).
- Attachment difficulties.
- Eating disorders.
- Poor peer relations, or self-injurious behaviour (e.g., suicide attempts).

In addition to knowing the signs of victimization, below are some early warning signs to look out for in potential offenders:

Signs of offenders (students):

- Unusual interest in sex, sexualizing inanimate objects and activities.
- Does not stop sexual misbehaviour when told to stop.
- Uses force and coercion in social situations.
- Unusual intensity when discussing sex and sexuality.
- Socializes with children much younger.
- Gives gifts and requires secrecy in relationships.

Signs of offenders (adults):

- Has a “favourite” student or child.
- Attempts to find ways to be alone with children.
- Inappropriate language, jokes and discussions about students/children.
- Sexualized talk in the presence of students/children.
- Gives private gifts or has private chats via social media/messaging apps.

Appendix 2:

Code of Conduct (section 2:2 of the Staff Handbook)

- All staff will respond to each other and to students with respect and consideration and treat all with equality regardless of gender, race, religion, sexual identity, or culture.
- Only touch students for professional reasons, and when this is necessary and appropriate for the student's well-being or safety. Any type of abuse will not be tolerated and is cause for dismissal.
- Staff will respect a student's right to not be touched in ways that make them feel uncomfortable. A child's right to say "no" is to be encouraged and respected.
- Staff will practice caution when students are changing clothes and should never be alone with just one student.
- Staff will use designated staff bathrooms and students will use designated student bathrooms during the school day.
- It is understood that some meetings with students require privacy, but always err on the side of caution; keep your door open whenever possible or have an uncovered window (that is visible on a walkway) or a half-drawn blind.
- Do not use profanity or inappropriate jokes when speaking with students.
- Staff will not give gifts or special favours to individual students or show preferential treatment to a student or a group of students to the exclusion of others.
- Do not accept current students as 'friends' or 'tag' them on social networking platforms (such as Facebook, Instagram or TikTok).
- Do not post photos taken of students/staff/activities during the school day to social networking platforms or online. These should be filtered and posted by the Development Office, Principal or the Director of Staff and Student Development.
- Do not make comments online or on social networking platforms which bring the school into disrepute or in some way draw negative inferences about our students, staff or leadership.
- Review our Media Use Policy when showing visual content to students in your lesson/assembly/event.
- Do not make social arrangements to contact, communicate or meet with students outside your work (this includes the use of email, text and other messaging systems), without prior knowledge of the parent.
- Do not develop intimate or sexual relationships with students.
- The consumption of alcohol or drugs or being under the influence of alcohol or drugs during the school day is not permitted.
- No smoking/vaping on campus is permitted at any time.
- Staff will refrain from intimate displays of affection with other staff or adults on campus.

Appendix 3:

Resources

To Report Abuse

Call 911 if in immediate danger

Child & Family Services:

278-9111 or 294-5882

Bermuda Police Service:

211 or 295-0011

www.bermudapolice.bm

To report a Cybercrime call:

800-8477

www.cybertips.bm

Child & Family Services Hotline (After hours)

295-0011

(This is the Police Service – they will contact an on-call social worker from Child & Family Services)

Child & Adolescence Services (MAWI)

239-6344 or 236-3770

Centre Against Abuse Domestic Violence & Sexual Assault Victim 24-hour Hotline (male & female)

297-8278 www.abusefree.org

The Family Centre (9:00 am – 6:00 pm)

232-1116 www.tfc.bm

The Coalition for the Protection of Children

295-1150 www.coalition.bm

Womens Resource Centre

295-3882 www.wrcbermuda.com

Sexual Assault Response Team (SART)

911



Department of
Child & Family
Services

Tele: 278-9111 / FAX : 295-1337

EMAIL TO: mtrew@gov.bm; ltalbot@gov.bm; lewsmith@gov.bm

Child Protection Referral Form

The Children Act 1998: Mandatory Reporting of Child Abuse: Section 20 (1)

Every person who has information indicating that a child is suffering or has suffered significant harm, shall forthwith report that information to the Director. Professionals are mandated to report and can be fined or imprisoned if they fail to report.

Duty of Director to investigate: Section 42 8(e)

Where the Director or a person authorized by him to act on his behalf makes an enquiry under this section and imposes a requirement on any person to— “refrain, in any way, from obstructing the enquiry, including refraining from informing any person that an enquiry will be, is being, or has been conducted,”

Child's Name:		DOB: Click here	M/F? CLICK HERE
Address:		Cell #:	
School:			
Does the child have any special needs?			
Are there any valid custody/access/other court orders in place? If so describe?			

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Mother's Name:				DOB: Click here
Address:				
Telephone:	(w)	(h)	(c)	
Email:				
Place of employment:				Alleged Perpetrator? CLICK HERE

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Father's Name:				DOB: Click here
Address:				
Telephone:	(w)	(h)	(c)	
Email:				
Place of employment:				Alleged Perpetrator? CLICK HERE

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Legal Guardian's Name:				DOB: Click here
Address:				

Appendix 5:

International Center for Missing and Exploited Children: Abuse Prevention Education

The expectations of the International Task Force for Child Protection state that schools shall have in place formal learning programs throughout the school experience related to child protection. The same learning objectives that help reduce the risk of abuse may also prevent the development of abusive behaviours.

Abuse prevention curriculum should cover developmentally appropriate topics such as personal rights, body autonomy, boundaries and consent, identification of trusted adults, online safety and digital literacy, healthy relationships, healthy sexual behaviour, staying safe away from home, commercial exploitation, and support for disclosing abuse through research-supported methods of instruction using anatomically correct language.

- Whole school, whole child, whole community (WSCC) preventative approach that considers skills, awareness, and services.
- Research-informed instructional approaches that go beyond awareness raising.
- Comprehensive in scope, developmentally appropriate to student maturity and needs, inclusive of differences and socio-culturally relevant.
- Well-trained, supported teaching staff.
- Research-based theory-driven content that is progressive over time and builds on previous knowledge.
- Positive empowering approach to avoid scare tactics and confrontation.
- Clear goals and outcomes stated and effective assessment, monitoring, and evaluation designed.
- Supported by school staff, leadership, local authorities, and the parent community.
- Interventions are of sufficient quality and quantity.

Works Cited:

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<https://www.icmec.org/education-portal/school-policies/>

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<https://aisa.or.ke/what-we-offer/programmes/child-protection/>

<https://www.scarsbermuda.com/resources/>

<http://www.bermudalaws.bm/Laws/Consolidated%20Laws/Children%20Act%201998.pdf>

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