



Child Protection and Safeguarding Policy 2025-2026

Table of Contents

1. Introduction	2
2. Statutory Framework	3
3. The Child Safeguarding Officer	3
4. The Governing Body	5
5. When To be Concerned	6
6. Dealing with A Disclosure	10
7. Record Keeping	13
8. Confidentiality	14
9. School Procedures	14
10. Communication with Parents	16
11. Allegations Involving School Staff	17
APPENDIX 1: Procedure After A Disclosure	19
APPENDIX 2: What To Do If You Are Worried A Child Is Being Abused:	21
APPENDIX 3: Indicators Of Abuse And Neglect	22
APPENDIX 4: What Are The 5 Rs Of Safeguarding?	29
APPENDIX 5: Hiring Process	30
APPENDIX 6: Declaration for Staff	32

1.Introduction

Safeguarding is defined as protecting children from maltreatment, preventing impairment of health and/or development, ensuring that children grow up in the provision of safe and effective care and taking action to enable all children to have the best life chances.

This Safeguarding Policy forms part of a suite of documents and policies which relate to the safeguarding responsibilities of the school.

Purpose of the policy

To provide staff and governors with the guidance they need in order to keep children safe and secure in our school and to inform parents and guardians how we will safeguard their children while they are in our care. To enable everyone to have a clear understanding of how these responsibilities should be carried out.

School Staff Responsibility

All school staff have a responsibility to provide a safe environment in which children can learn.

School staff are particularly well placed to observe outward signs of abuse, changes in behavior and failure to develop because they have daily contact with children.

All school staff will receive appropriate safeguarding children training (which is updated regularly – so that they are knowledgeable and aware of their role in the early recognition of the indicators of abuse or neglect and of the appropriate procedures to follow. In addition, all staff members should receive safeguarding and child protection updates (for example, via email, e-bulletins and staff meetings), as required, but at least annually, to provide them with relevant skills and knowledge to safeguard children effectively.

Temporary staff will be made aware of the safeguarding policies and procedures by the Child Safeguarding Officer-including the Child Protection Policy and staff behavior policy (code of conduct).

Policy Mission Statement

Establish and maintain an environment where children feel secure, are encouraged to talk, and are listened to when they have a worry or concern. We recognize that children have this right and cannot learn effectively unless they feel secure.

Establish and maintain an environment where school staff feel safe, are encouraged to talk, and are listened to when they have concerns about the safety and well-being of a child.

Ensure children know that there are adults in the school whom they can approach if they are worried.

Ensure that children who have additional/unmet needs are supported appropriately. This could include referral to early help services or specialist services if they are a child in need or have been / are at risk of being abused and neglected.

Consider how children may be taught about safeguarding, including online, through teaching and learning opportunities, as part of providing a broad and balanced curriculum.

Staff members working with children are advised to maintain an attitude of 'it could happen here' where safeguarding is concerned. When concerned about the welfare of a child, staff members should always act in the interests of the child.

Ensure that allegations or concerns against staff are dealt with in accordance with the Ministry of Education and The Community Development Authority policies and procedures.

Establish the practice of safe recruitment in checking and recording staff to work with children.

Implementation, Monitoring, and Review of the Safeguarding Policy

The policy will be reviewed annually by the governing body. It will be implemented through the school's induction and training program, and as part of the day-to-day practice. Compliance with the policy will be monitored by the Child Safeguarding Officer and through staff performance measures.

2. Statutory Framework

In order to safeguard and promote the welfare of children, the school will seek guidance in accordance with UAE Federal Law No. 3 of 2016 on Child Rights (Wadeema's Law):

UAE Federal Law No. 3 of 2016 on Child Rights (Wadeema's Law) shall guarantee that the child has all the rights decided thereunder and under the other legislations in force at the State and shall protect the child without discrimination because of origin, sex, home country, religion, social status or disability.

Schools will also ensure that we have appropriate procedures in place for responding to situations in which:

- (a) a child may have been abused or neglected or is at risk of abuse or neglect
- (b) a member of staff has behaved in a way that has or may have harmed a child or that indicates they would pose a risk of harm.

3. The Child Safeguarding Officer

The school will have an appropriate senior member of staff to take lead responsibility for child protection. This person should have the status and authority within the school to carry out the duties of the post including committing resources and, where appropriate, supporting and directing other staff.

During term time the child safeguarding officer and or a deputy will always be available (during school hours) for staff in the school to discuss any safeguarding concerns and individual arrangements for out-of-hours out- of-term activities will be:

The Child Safeguarding Officer for Child Protection in this school is: Basma Ahmed

The Deputy Child Safeguarding Officer for Child Protection in this school is: Syed Muhammad

The broad areas of responsibility for the Child Safeguarding Officer are:

- Managing referrals and cases [via Incident Report Services (IRS) or Cause for Concern (CFC) forms]
- Refer all cases of suspected abuse or neglect to the Local Authority Children's Services (Safeguarding and Specialist Services). Police (cases where a crime may have been committed)
- Liaise with the Principal to inform him/her of issues who will refer to MAS.
- Act as a source of support, advice, and expertise to staff on matters of safety and safeguarding and when deciding whether to make a referral by liaising with relevant agencies.
- **Training**

The Child Safeguarding Officer should undergo formal training every two years. The CSO should also undertake safeguarding awareness training. In addition, to this training, their knowledge and skills should be refreshed (for example via e-bulletins, meeting other CSOs, or taking time to read and digest safeguarding developments) at least annually to:

1. Understand the assessment process for providing early help and intervention, for example through locally agreed common and shared assessment processes such as early help assessments.
2. Have a working knowledge of how local authorities in Dubai conduct child protection case conference and a child protection review conference and be able to attend and contribute to these effectively when required to do so.
3. Ensure each member of staff has access to and understands the school's safeguarding and child protection policy and procedures, especially new and part-time staff.
4. Be alert to the specific needs of children in need, those with special educational needs.

5. Be able to keep detailed, accurate, secure written records of concerns and referrals.
6. Obtain access to resources and attend any relevant or refresher training courses.
7. Encourage a culture of listening to children and taking account of their wishes and feelings among all staff, in any measures the school may put in place to protect them.

➤ **Raising Awareness**

- The child safeguarding officer should ensure the school's policies are known, understood, and used appropriately.
- Ensure the school's safeguarding and child protection policy is reviewed once each year and the procedures and implementation are updated and reviewed regularly, and work with governing bodies or proprietors regarding this.
- Ensure the safeguarding and child protection policy is available publicly and parents know referrals about suspected abuse or neglect may be made and the role of the school in this.
- When children leave the school, ensure the file for safeguarding and any child protection information is sent to any new school as soon as possible but transferred separately from the main pupil file. (Subject to KHDA rules)
- Schools should obtain proof that the school/education setting has received the safeguarding file for any child transferring and then destroy any information held on the child in line with data protection guidelines.

4. The Governing Body

Governing bodies and proprietors must ensure that they comply with their duties under legislation. They must also have regard to this guidance to ensure that the policies, procedures and training in their schools are effective and always comply with the law.

The nominated governor for child protection is: Basma Ahmed

The responsibilities placed on governing bodies and proprietors include:

- Their contribution to inter-agency working, which includes providing a coordinated offer of early help when additional needs of children are identified.
- Ensuring that an effective safeguarding policy is in place, together with a staff behavior policy.

- Ensuring that staff induction is in place with regards to child protection and safeguarding.
- Appointing an appropriate senior member of staff to act as the Child Safeguarding Officer. It is a matter for individual schools as to whether they choose to have one or more Deputy Child Safeguarding Officer.
- Ensuring that all the Child Safeguarding Officers (including deputies) should undergo formal child protection training every two years and receive regular (annual) safeguarding refreshers (for example via e-bulletins, meeting other CSOs, or taking time to read and digest safeguarding developments).
- Prioritizing the welfare of children and young people and creating a culture where staff are confident to challenge senior leaders over any safeguarding concerns
- Ensuring that children are taught about safeguarding in an age-appropriate way
- Ensuring appropriate filters and appropriate monitoring systems are in place to safeguard children from potentially harmful and inappropriate online material.
- Having a senior board level leads to take leadership responsibility for the organization's safeguarding arrangements.

5. When To be Concerned

A child-centered and coordinated approach to safeguarding:

Safeguarding and promoting the welfare of children is **everyone's responsibility**. In order to fulfil this responsibility effectively, all professionals should make sure their approach is **child centered**. This means that they should consider, always, what is in the best interests of the child.

Responsibilities of adults within the school community:

- All adults are required to be aware of and alert to the signs of abuse.
- If an adult identifies that a child may be in an abusive situation, they should record their concerns and report them to the CSO as soon as practical.
- If a child discloses allegations of an adult, they will follow the procedures attached to this policy.
- If the disclosure is an allegation against a member of staff, they will follow the allegations procedures attached to this policy.

As a school, we will educate and encourage Students to Keep Safe through:

- The content of the curriculum.
- A school ethos that promotes a positive, supportive and secure environment and gives students a sense of being valued.
- A “Rights, Respect and Responsibility” agenda
- The creation of a culture that helps children to feel safe and able to talk freely about their concerns, believing that they will be listened to and valued.

Children who may require early help

Staff working within the school will be expected to be alert to the potential need for early help for children also who are more vulnerable. For example:

- **Children with a disability and/or specific additional needs.**
- **Children with special educational needs.**
- **Children who are acting as a young career.**
- **Children who are showing signs of engaging in anti-social or criminal behavior.**
- **Children whose family circumstances present challenges, such as substance abuse, adult mental health or learning disability, domestic violence**
- **Children who are showing early signs of abuse and/or neglect.**

The school’s staff members are expected to be aware of the main categories of Abuse: **physical abuse, emotional abuse, sexual abuse, and neglect**. They will also be aware of the indicators of maltreatment and **specific safeguarding issues** so that they are able to identify cases of children who may need help or protection.

See Appendix 4 for information on indicators of abuse and Appendix 1 for specific safeguarding issues.

Children with special educational needs and disabilities:

Additional barriers can exist when recognizing abuse and neglect in this group of children. This can include:

- ❖ Assumptions that indicators of possible abuse such as behavior, mood and injury relate to the child’s impairment without further exploration.
- ❖ Assumptions that children with SEND and disabilities can be disproportionately impacted by things like bullying- without outwardly showing any signs.
- ❖ Communication barriers and difficulties.

- ❖ Reluctance to challenge careers, (professionals may over empathize with careers because of the perceived stress of caring for a disabled child).
- ❖ Disabled children often rely on a wide network of careers to meet their basic needs and therefore the potential risk of exposure to abusive behavior can be increased.
- ❖ A disabled child's understanding of abuse.
- ❖ Lack of choice/participation
- ❖ Isolation

Peer on peer abuse

If one child or young person causes harm to another, this should not necessarily be dealt with as abuse. When considering whether behavior is abusive, it is important to consider:

- Whether there is a large difference in power (for example age, size, ability, development) between the young people concerned; or
- Whether the perpetrator has repeatedly tried to harm one or more other children; or
- Whether there are concerns about the intention of the alleged perpetrator.

Staff should recognize that children can abuse their peers and should not be tolerated or passed off as “banter” or “part of growing up”.

In order to minimize the risk of peer-on-peer abuse the school will:

- Provide a developmentally appropriate Social Studies curriculum that develops students understanding of acceptable behavior and keeping themselves safe.
- Have systems in place for any student to raise concerns with staff, knowing that they will be listened to, believed in and valued.
- Develop robust risk assessments where appropriate (e.g., Using the Risk Assessment Management Plan and Safety and Support Plan tools).
- Have relevant policies in place (e.g., behavior policy).

Responses to Acts of Violence: Implied or Direct Threats

Procedures to respond to implied or direct threats of violence by students, teachers, other school personnel and visitors to the school:

- Use of staff trained in de-escalation or other strategies to diffuse the situation.
- Inform Principal and Manager Operations of implied or direct threat.
- Determine level of threat with Vice Principal of Operations.

- Contact appropriate law enforcement agency, if necessary.
- Monitor situations, adjust response as appropriate, include the possible use of the Emergency Response Team.

Acts of Violence

Procedures for responding to acts of violence by students, teachers, other school personnel and visitors to the school, including consideration of zero-tolerance policies for school violence:

- Determine level of threat with Manager Operations.
- If the situation warrants, isolate the immediate area and evacuate if appropriate.
- Inform Principal
- If necessary, initiate lockdown procedure, and contact appropriate law enforcement agency.
- Monitor situation; adjust response as appropriate; if necessary, initiate early dismissal, sheltering or evacuation procedures.

Response Protocols

Procedures for responding to emergencies, including bomb threats, hostage takings, intrusions and kidnapping:

- Identification of decision makers.
- Plans to safeguard students and staff.
- Procedures to provide transportation, if necessary.
- Procedures to notify parents.
- Procedures to notify media.
- Debriefing procedures.

Arrangements for Obtaining Emergency Assistance from Local Government

Procedures for the arrangements of obtaining assistance during emergencies from emergency services organizations and local government agencies:

- Principal and Manager Operations contact dispatch point or 999 for fire or EMS response
- The Principal and Manager Operations contact highest ranking local government for notification and/or assistance.

Procedures for Obtaining Advice and Assistance from Local Government Officials

Procedures for the use of obtaining advice and assistance from local government officials:

Principal and/or VP of Operations in an emergency will contact emergency management coordinator and/or the highest-ranking local government official for obtaining advice and assistance.

AMPS has identified resources for an emergency from the following agencies:

- Fire Department: 997
- **Child Protection Unit -MOE: 80085-** 04-217666
- Red Cross: 04 362 3597

- Dubai Foundation for Women & Children: 04 606 0300/ 800 111
- Dubai Police—Child & Women Protection Department: 04 609 9734/ 04 217 1552
- Child Protection Center:

Al Barsha 2,
Hadaeq Mohammad Bin Rashid
110 Al Asayel Street, Govt Building, 2nd Floor
800-988

Child Development Authority, Dubai
Block A, Floor M
Al Hudaiba Awards Building
Jumeirah Street
04 429 9888
Hotline: 800 988

If a child volunteers' information about abuse to a member of staff, it may be done obliquely, rather than directly, e.g., through play, drawings etc. Children will talk about their concerns and problems to people they feel they can trust. The person a child talks to will not necessarily be a senior member of staff. The role of the member of staff hearing this is to listen but not undertake an investigation of the potential abuse. That is the role of the child protection agencies. Legal action against a perpetrator can be seriously damaged by any suggestion that the child's words have been influenced in any way by the person they told.

When a child confides in you:

Things you should do:

- Give the child undivided attention.
- Show concern, support and warmth but don't show emotions, distress or negative reaction. Be re-assuring – (you can say 'that must have been sad/hard for you'; 'it's right to tell someone because you need help'.) Ask if the child has told his/her parents if the alleged abuse is outside the home or the other parent if one parent is implicated.
- Rather than directly questioning the child, just listen and be supportive.
- It may be appropriate to check that the child is indicating abuse or neglect.
- Check if the child is hurt or might need medical attention!
- Deal with the allegation in such a way that the child does not have to repeat the information to different people within the school; It is important to know if an incident has happened recently and whom the child is saying has hurt her/him.
- Make careful records of what was said, put the date and time when the child spoke to you, put the location and names of the people who were present, as well as what was said, using child's own language and colloquialisms. Then sign it, and hand your record to the CPLO straight away.
- Keep a copy of your notes.
- Look after yourself by seeking some support.

Things you should NOT do:

- You must not promise a child complete confidentiality – you should explain that you may need to pass information to other professionals to help keep them or other children safe.
- Malign the character of the alleged perpetrator.
- Jump to conclusions.
- Ask leading questions.
- Ask for lots of details about the alleged event(s)
- Speculate or accuse anybody yourself.
- Make promises you can't keep.
- Pre-empt or prejudice an investigation by leading the child with *closed* questions

Questioning Skills

To avoid leading questions when clarifying what a child has said, **you should use open questions** with a child rather than closed questions.

The following table gives some examples of both.

Closed Questions

- ×Do
- ×Did
- ×Can
- ×Would
- ×Could
- ×Are etc.

Open Questions

- Tell me
- Explain to me
- Describe to me
- Who
- What
- When
- Where
- How

Avoid using 'Why'? This can confuse a child and leads to feelings of guilt.

Initial Responses to child

When a child has made a disclosure, it can be a relief for them, however they are likely to feel vulnerable and confused. Here are some examples of what can be said to a child.

Do say:

'Thank you for telling me'

'I am sorry it has happened to you'

'I am going to help you, and will tell you what I am going to do' 'It should not have happened'

'You are not to blame'

Do not say:

× 'It will be all right soon'

× Anything which you will not be able to fulfil

× It is anybody's fault

Support

Dealing with disclosure from a child, and safeguarding issues can be stressful. The member of staff should, therefore, consider seeking support for him/herself and discuss this with the Designated Senior Person.

WHAT TO DO ON DISCLOSURE:

Stay calm

(Don't over-react, however shocked you may be)

↓

•Reassuring the child

(Let them know that they were right to tell you and they're not to blame and thank them for being brave)

↓

Listening well

(Listen carefully, take it seriously)

↓

Give time for the person to say what they want

(Don't make assumptions and don't offer alternative explanations, ask questions beginning with 'Tell me about... Explain... Describe...' Avoid 'who, what, when, where' questions)

↓

•Not keeping secrets

(don't promise the child that you'll keep their disclosure to yourself. Instead, say that you're going to get help from someone else as it's your responsibility to keep them safe.)

↓

Keeping a record of what was said

(Take factual, accurate notes and store these somewhere secure.)

If a staff member receives a disclosure about potential harm caused by another staff member, they should see section 11 of this policy– *Allegations involving school staff*.

7.Record Keeping

All concerns, discussions and decisions made and the reasons for those decisions should be recorded in writing. If in doubt about recording requirements staff should discuss it with the designated safeguarding lead.

When a child has made a disclosure, the member of staff should:

- Record as soon as possible after the conversation. Use the school cause for concern sheet wherever possible.
- Do not destroy the original notes in case they are needed by the regulating authority
- Record the date, time, place and any noticeable non-verbal behavior and the words used by the child
- Draw a diagram to indicate the position of any injuries
- Record statements and observations rather than interpretations or assumptions

All records need to be given to the Child Safeguarding Officer promptly. No copies should be retained by the member of staff.

The Child Safeguarding Officer will ensure that all safeguarding records are managed in accordance with the Safeguarding Policy.

8. Confidentiality

Safeguarding children raises issues of confidentiality that must be clearly understood by all staff in schools.

- All staff in schools, both teaching and non-teaching staff, have a responsibility to share relevant information about the protection of children with other professionals, particularly the investigative agencies (Children's Services: Safeguarding and Specialist Services and the Police).
- If a child confides in a member of staff and requests that the information is kept secret, it is important that the member of staff tell the child in a manner appropriate to the child's age/stage of development that they cannot promise complete confidentiality – instead they must explain that they may need to pass information to other professionals to help keep the child or other children safe. This may ultimately not be in the best interests of the child.
- Staff who receive information about children and their families in the course of their work should share that information only within appropriate professional contexts.

9. School Procedures

Please see Annex 1: What to do if you are worried about a child being abused: flowchart.

The prime concern at all stages must be the interests and safety of the child. Where there is a conflict of interests between the child and parent, the interests of the child must be paramount.

These procedures should be read in conjunction with the flow chart (Annex 1).

If a member of staff suspects abuse e.g., through physical injury etc. they must:

1. Record their concerns on the **Incident Report Form**.
2. Report it to the CSO / Principal immediately
3. Consider if there is a requirement for immediate medical intervention and if so, assistance must be called for

4. Make an accurate record (which may be used in any subsequent court proceedings) as soon as possible and within 24 hours of the occurrence, of all that has happened, including details of:

- Dates and times of their observations
- Dates and times of any discussions they were involved in
- Any injuries
- Explanations given by the child / adult
- what action was taken.

The records must be signed and dated by the author.

Following a report of concerns from a member of staff, the CSO must:

1. Decide whether there are sufficient grounds for suspecting child abuse in which case a referral must be made to the Community Development Authority (CDA) Child Protection Centre via Telephone: 04 429 9888 and make a clear statement of:
 - the known facts
 - any suspicions or allegations
 - whether or not there has been any contact with the child's family

If the CSO feels unsure about whether a referral is necessary, they can phone CDA Child Protection Centre to discuss concerns and obtain advice. To do so will not constitute a child abuse referral and may well help to clarify a situation.

2. If there is no clear risk of harm the CSO will either actively monitor the situation or seek advice from the CDA Child Protection Centre.
3. The CSO must confirm any referrals in writing to CDA Child Protection Centre, within 24 hours, including the actions that have been taken. The written referral should be made using the referral form attached to this document.
4. If a child is in immediate danger and urgent protective action is required, the police should be called using the 999 services. The CSO should also notify the CDA Child Protection Centre of the occurrence and what action has been taken. The CSO should seek advice from the police / CDA Child Protection Centre about informing the parents.
5. Normally the school should try to discuss any concerns about a child's welfare with the family and where possible to seek their agreement before making a referral to CDA Child Protection Centre. However, in accordance this should only be done when it will not place the child at increased risk. The child's views should also be considered.
6. Where there are doubts or reservations about involving the child's family, the CSO should clarify with CDA Child Protection Centre or the local police whether, the parents should be told about the referral and, if so, when and by whom. This is important in cases where the police may need to conduct a criminal

investigation. Where appropriate, the CSO should help the parents understand that a referral is in the interests of the child and that the school will be involved in the police investigation.

7. When a pupil needs *urgent* medical attention and there is suspicion of abuse the CSO or head teacher should take the child to the Accident and Emergency Unit at the nearest hospital, having first notified CDA Child Protection Centre. The CSO should seek advice about what action the CDA Child Protection Centre will take and about informing the parents, remembering that parents should normally be informed that a child requires urgent hospital attention. If the suspected abuse is sexual then the medical examination should be delayed until CDA Child Protection Centre and/or the police can liaise with the hospital, unless the needs of the child are such that medical attention is the priority. If a decision is made not to inform the parents there must be a responsible adult with the child at all times, whether from the school, CDA Child Protection Centre or the police.

When dealing with allegations against staff and governors:

- Report any concerns about the conduct of any member of staff to the Head teacher as soon as possible and within 24 hours.
- If an allegation is made against the Head teacher, the concerns need to be raised with the local Education Authority as soon as possible and within 24 hours.
- In either event the Head teacher should contact the CDA Child Protection Centre on Telephone: 04 429 9888 or the CDA HOTLINE at 800 988.

10. Communication with Parents



MAS will ensure the Child Protection Policy is available publicly either via email or by other means.

Parents should be informed prior to referral unless it is considered to do so might place the child at increased risk of significant harm by:

- The behavioral response it prompts e.g., a child being subjected to abuse, maltreatment, or threats / forced to remain silent if the alleged abuser is informed.
- Leading to an unreasonable delay.
- Leading to the risk of loss of evidential material.

(The school may also consider not informing parent(s) where it would place a member of staff at risk).

Ensure that parents understand the responsibilities placed on the school and staff for safeguarding children.

11. Allegations Involving School Staff

An allegation is any information which indicates that a member of staff may have:

- Behaved in a way that has, or may have harmed a child
- Possibly committed a criminal offence against/related to a child
- Behaved towards a child or children in a way which indicates s/he would pose a risk of harm if they work regularly or closely with children

This applies to any child the member of staff has contact within their personal, professional or community life.

What school staff should do if they have concerns about safeguarding practices within the school:

All staff should feel able to raise concerns about poor or unsafe practices and potential failures in the school or education setting's safeguarding arrangements.

Appropriate whistleblowing procedures, which are suitably reflected in staff training and staff behavior policies, should be in place for such concerns to be raised with the school's senior leadership team.

If staff members have concerns about another staff member then this should be referred to the Principal. Where there are concerns about the Principal, this should be referred to the Chair of Governors/ Chair of the Management Committee/Proprietor as appropriate.

The Chair of Governors in this school is:

Mohamed Motwea

In the absence of the Chair of Governors, the Vice Chair should be contacted. The Vice-Chair in school is:

Syed Mudassir

In the event of allegations of abuse being made against the principal of the school or where a staff member feels unable to raise an issue with their employer or feels that their genuine concerns are not being addressed, allegations should be reported directly to CDA. Staff may consider discussing any concerns with the Child Safeguarding Officer and if appropriate make any referral via them.

The person to whom an allegation is first reported should take the matter seriously and keep an open mind. S/he should not investigate or ask leading questions if seeking clarification; it is important not to make assumptions. Confidentiality should not be promised, and the person should be advised that the concern will be shared on a 'need to know' basis only.

Actions to be taken include making an immediate written record of the allegation using the informant's words – including time, date, and place where the alleged incident took place, brief details of what happened, what was said, and who was present. This record should be signed, dated, and immediately passed on to the principal.

The recipient of an allegation must **not** unilaterally determine its validity, and failure to report it in accordance with procedures is a potential disciplinary matter.

The Principal/Chair of Governors will not investigate the allegation itself, or take written or detailed statements, but will assess whether it is necessary to refer the concern to the Authority Designated Officer (KHDA).

If the allegation meets any of the three criteria set out at the start of this section, contact should always be made with the CSO or Deputy CSO without delay.

The principal should, as soon as possible, **following a briefing** from the Authority Designated Officer inform the subject of the allegation.

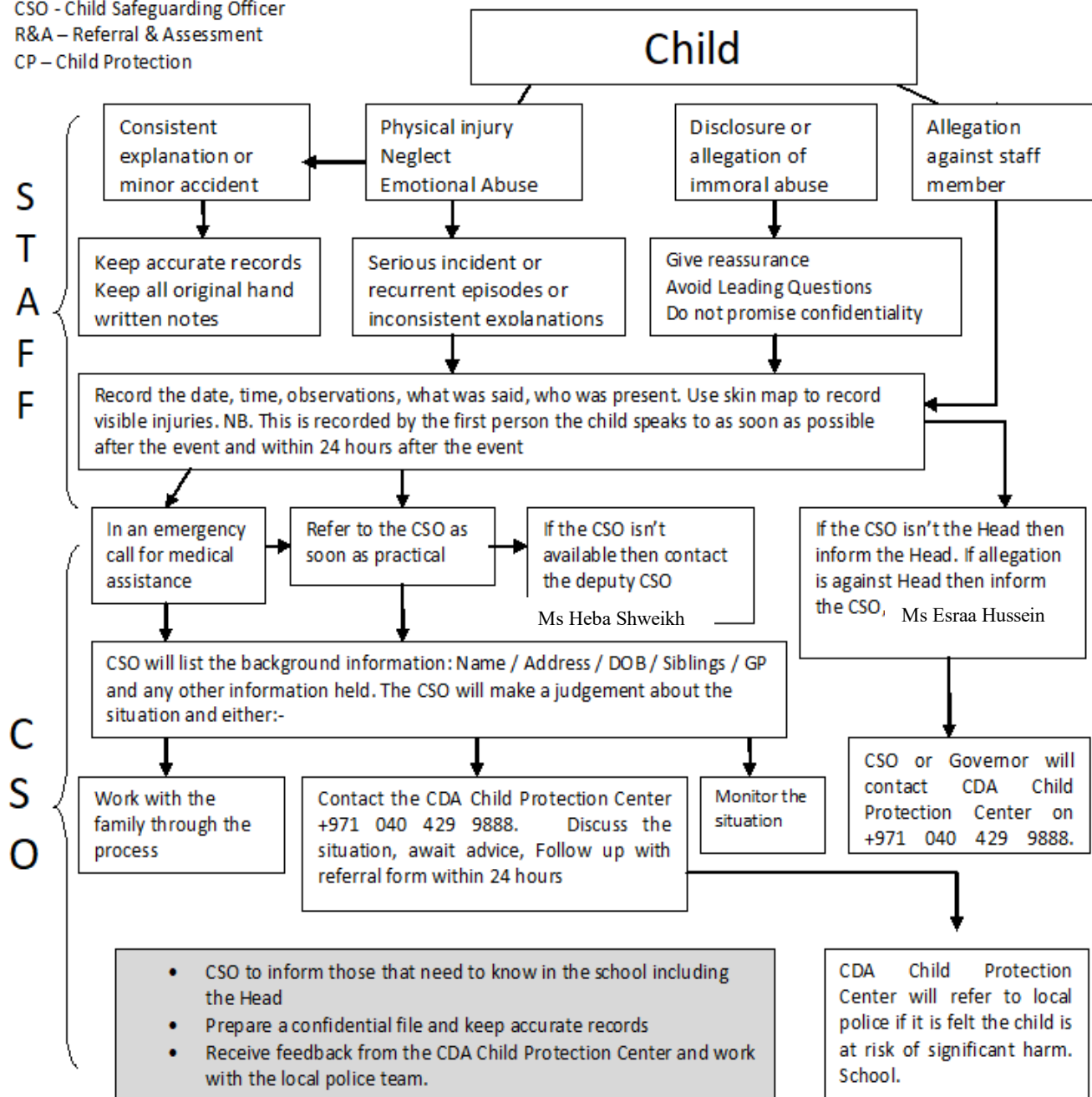
APPENDIX 1: Procedure After A Disclosure

Annex 1: flow chart

Annex 2: Cause for Concern forms

Annex 1

CSO - Child Safeguarding Officer
R&A – Referral & Assessment
CP – Child Protection



Annex 2

INCIDENT REPORT FORM

<u>Date of incident:</u>		<u>Time / lesson:</u>	
Students' Name:		Gender:	
Class/Section:		SEN Status:	
<p>➤ <u>Incident reported by: (Name and designation)</u></p>			
<p>➤ <u>Incident details:</u></p>			
Follow up / actions taken & Date:			
<p>✓ Name of person(s) responsible for following up:</p>			
<p>• <u>Additional Comments (if any):</u></p>			
Signature		Date:	

APPENDIX 2: What To Do If You Are Worried A Child Is Being Abused: ADVICE FOR PRACTITIONERS

Be alert

- Be aware of the signs of abuse and neglect
- Identify concerns early to prevent escalation.
- Know what systems the school have in place regarding support for safeguarding e.g. induction training , staff behaviour policy / code of conduct and the role of the Child Protection Officer (CSO)/Designated Safeguarding Lead (DSP).

Question behaviors

- Talk and listen to the views of children, be non - judgemental.
- Observe any change in behaviours and question any unexplained marks / injuries
- To raise concerns about poor or unsafe practice , refer to the CSO, if the concerns is about the HT or Principal, report to Chair of Governors. Utilise whistleblowing procedure.

Ask for help

- Record and share information appropriately with regard to confidentiality
- If staff members have concerns, raise these with the school's Child Protection Officer (CSO)
- Responsibility to take appropriate action, do not delay.

Refer

- CSO will make referrals to Children's Services on 04 429 9888 .

APPENDIX 3: Indicators Of Abuse And Neglect

Annex 3: Indicators & Definitions

The framework for understanding children's needs:

Annex 3: What is Child Abuse?

What is abuse and neglect?

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by 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. They may be abused by an adult or adults, or another child or children.

4 Main Categories of Abuse

1. Physical abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

2. Emotional abuse

Emotional abuse is the persistent emotional maltreatment of a child to cause severe and persistent adverse effects on the child's emotional development.

- A level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.
- These may include interactions that are beyond a child's developmental capability, as well as over-protection and limitation of exploration and learning or preventing the child participating in normal social interaction.

3. Sexual abuse

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, including prostitution, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative (e.g., rape, buggery or oral sex) or non-penetrative acts. They may include non-contact activities, such as involving children in looking at, or in the production of, sexual online images, watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

4. 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 a child is born, neglect may involve a parent or carer failing to:

- provide adequate food, clothing and shelter (including exclusion from home or abandonment)
- protect a child from physical and emotional harm or danger.
- ensure adequate supervision (including the use of adequate caregivers)
- ensure access to appropriate medical care or treatment.

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Indicators of Abuse

NEGLECT

The nature of neglect

Neglect is a lack of parental care, but poverty and lack of information or adequate services can be contributory factors.

Neglect can include parents or carers failing to:

- provide adequate food, clothing and shelter.
- protect a child from physical and emotional harm or danger.
- ensure adequate supervision or stimulation.
- ensure access to appropriate medical care or treatment.

Research has highlighted the following examples of the neglect of children under 12.

- frequently going hungry
- frequently having to go to school in dirty clothes.
- regularly having to look after themselves because of parents being away or having problems such as drug or alcohol misuse.
- being abandoned or deserted
- living at home in dangerous physical conditions
- not being taken to the doctor when ill
- not receiving dental care.

Neglect is a difficult form of abuse to recognize and is often seen as less serious than other categories. It is, however, very damaging: children who are neglected often develop more slowly than others and may find it hard to make friends and fit in with their peer group.

Neglect is often noticed at a stage when it does not pose a risk to the child. Research would suggest that an appropriate intervention or conversation at this early stage can address the issue and prevent a child continuing to suffer until it reaches a point when they are at risk of harm.

Neglect is often linked to other forms of abuse, so any concerns school staff have should at least be discussed with the designated CSO.

Indicators of neglect

The following is a summary of some of the indicators that may suggest a child is being abused or is at risk of harm. It is important to recognise that indicators alone cannot confirm whether a child is being abused. Each child should be seen in the context of their family and wider community and a proper assessment carried out by appropriate persons. What is important to keep in mind is that if you feel unsure or concerned, do something about it. Don't keep it to yourself.

Physical indicators of neglect

- Constant hunger and stealing food.
- Poor personal hygiene - unkempt, dirty or smelly

- Underweight
- Dress unsuitable for weather
- Poor state of clothing
- Illness or injury untreated
- Looking sad, false smiles

Behavioural indicators of neglect

- Constant tiredness
- Frequent absence from school or lateness
- Missing medical appointments
- Isolated among peers.
- Frequently unsupervised
- Stealing or scavenging, especially food
- Destructive tendencies

EMOTIONAL ABUSE

The nature of emotional abuse

Most harm is produced in *low warmth, high criticism* homes, not from single incidents. Emotional abuse is difficult to define, identify/recognise and/or prove.

Emotional abuse is chronic and cumulative and has a long-term impact.

All kinds of abuse and neglect have emotional effects although emotional abuse can occur by itself. Children can be harmed by witnessing someone harming another person – as in domestic violence.

It is sometimes possible to spot emotionally abusive behavior from parents and carers to their children, by the way that the adults are speaking to, or behaving towards children. An appropriate challenge or intervention could affect positive change and prevent more intensive work being carried out later on.

Indicators of Emotional

Abuse Developmental issues

- Delays in physical, mental and emotional development
- Poor school performance
- Speech disorders, particularly sudden disorders or changes.

Behaviour

- Acceptance of punishment which appears excessive.
- Over-reaction to mistakes
- Continual self-deprecation (I'm stupid, ugly, worthless etc)
- Neurotic behaviour (such as rocking, hair-twisting, thumb-sucking)
- Self-mutilation
- Suicide attempts
- Drug/solvent abuse
- Running away

- Compulsive stealing, scavenging.
- Acting out
- Poor trust in significant adults
- Regressive behaviour – e.g., wetting.
- Eating disorders
- Destructive tendencies
- Neurotic behaviour
- Arriving early at school, leaving late

Social issues

- Withdrawal from physical contact
- Withdrawal from social interaction
- Over-compliant behaviour
- Insecure, clinging behaviour
- Poor social relationships

Emotional responses

- Extreme fear of new situations
- Inappropriate emotional responses to painful situations (“I deserve this”)
- Fear of parents being contacted.
- Self-disgust
- Low self-esteem
- Unusually fearful with adults
- Lack of concentration, restlessness, aimlessness
- Extremes of passivity or aggression

PHYSICAL ABUSE

The nature of physical abuse

Most children collect cuts and bruises quite routinely as part of the rough and tumble of daily life. Clearly, it is not necessary to be concerned about most of these minor injuries. But accidental injuries normally occur on the *bony prominences* – e.g., shins. Injuries on the *soft* areas of the body are more likely to be inflicted intentionally and should therefore make us more alert to other concerning factors that may be present.

A body map (annex2) can assist in the clear recording and reporting of physical abuse. The body map should only be used to record observed injuries and no child should be asked to remove clothing by a member of staff of the school.

Indicators of physical Abuse / Factors that should increase concern.

- Multiple bruising or bruises and scratches (especially on the head and face).
- Clusters of bruises – e.g., fingertip bruising (caused by being grasped).
- Bruises around the neck and behind the ears – the most common abusive injuries are to the head.
- Bruises on the back, chest, buttocks, or on the inside of the thighs.

- Marks indicating injury by an instrument – e.g., linear bruising (stick), parallel bruising (belt), marks of a buckle.
- Bite marks
- Deliberate burning may also be indicated by the pattern of an instrument or object – e.g., electric fire, cooker, cigarette.
- Scalds with upward splash marks or *tide marks*
- Untreated injuries
- Recurrent injuries or burns.
- Bald patches.

In the social context of the school, it is normal to ask about a noticeable injury. The response to such an enquiry is generally light-hearted and detailed. So, most of all, concern should be increased when:

- the explanation given does not match the injury.
- the explanation uses words or phrases that do not match the vocabulary of the child (adults' words)
- no explanation is forthcoming.
- the child (or the parent/carer) is secretive or evasive.
- the injury is accompanied by allegations of abuse or assault.

You should be concerned if the child or young person:

- is reluctant to have parents/carers contacted.
- runs away or shows fear of going home.
- is aggressive towards themselves or others.
- flinches when approached or touched.
- is reluctant to undress to change clothing for sport.
- wears long sleeves during hot weather.
- is unnaturally compliant in the presence of parents/carers.
- has a fear of medical help or attention.
- admits to a punishment that appears excessive.

Sexual ABUSE

The nature of sexual abuse

Sexual abuse is often perpetrated by people who are known and trusted by the child – e.g., relatives, family friends, neighbours, babysitters, people working with the child in school, faith settings, clubs or activities.

Characteristics of child sexual abuse:

- it is often planned and systematic – people do not sexually abuse children by accident, though sexual abuse can be opportunistic.
- grooming the child – people who abuse children take care to choose a vulnerable child and often spend time making them dependent.
- grooming the child's environment – abusers try to ensure that potential adult protectors (parents and other carers especially) are not suspicious of their motives.

Most people who sexually abuse children are men, but some women sexually abuse too.

Indicators of Sexual abuse

Physical observations

- Damage to genitalia, anus or mouth
- Sexually transmitted diseases
- Unexpected pregnancy, especially in very young girls
- Soreness in genital area, anus or mouth and other medical problems such as chronic itching
- Unexplained recurrent urinary tract infections and discharges or abdominal pain

Behavioural observations

- Sexual knowledge inappropriate for age
- Sexualised behaviour or affection inappropriate for age
- Sexually provocative behaviour/promiscuity
- Hinting at sexual activity
- Inexplicable decline in school performance
- Depression or other sudden apparent changes in personality such as becoming insecure or clinging
- Lack of concentration, restlessness, aimlessness
- Socially isolated or withdrawn.
- Overly compliant behaviour
- Acting out, aggressive behaviour
- Poor trust or fear concerning significant adults.
- Regressive behaviour, Onset of wetting, by day or night; nightmares
- Onset of insecure, clinging behaviour
- Arriving early at school, leaving late, running away from home
- Suicide attempts, self-mutilation, self-disgust
- Suddenly drawing sexually explicit pictures
- Eating disorders or sudden loss of appetite or compulsive eating
- Regressing to younger behaviour patterns such as thumb sucking or bringing out discarded cuddly toys
- Become worried about clothing being removed.
- Trying to be 'ultra-good' or perfect; overreacting to criticism.

Myths About Abuse

1. Most abuse is perpetrated by a stranger	False
2. Most victims of abuse will tell someone without prompting	False
3. Abusers fit common stereotypes and are easy to identify	False
4. Sexual abuse is the most common form of abuse	False
5. Abuse is more prevalent in lower income or poorly educated families	False

APPENDIX 4: What Are The 5 Rs Of Safeguarding?

The 5 Rs of safeguarding provide an easy-to-remember process for keeping children safe.

The 5 Rs of safeguarding are:

- **Recognise**: You must have a clear understanding of the what the different signs and symptoms of potential abuse, harm and neglect can be.
- **Respond**: If you do have a safeguarding concern, it is essential that you respond appropriately and do not ignore the situation.
- **Report**: Safeguarding concerns need to be reported without delay. Confidentiality is important, so only share information with those who are a part of the safeguarding process. Ensure that everyone in your workplace.
- **Record**: This is the who, what, why, when and where of safeguarding. Take precise, comprehensive notes that detail *everything* about your safeguarding concern. For example, who it involves, what happened, and include times and dates. You should do this as soon as possible.
- **Refer**: It is usually the responsibility of the DSL or management to pass on safeguarding concerns to the appropriate authorities. However, if the safeguarding risk is more urgent and you suspect somebody is under immediate or severe threat, you should contact the relevant local authority or police services.

APPENDIX 5: Hiring Process

Annex 4: Child Protection Vetting

Annex 5: Briefing for Temporary Staff

Annex 4

Child Protection Vetting

At this school, we strongly recognise the need for vigilant awareness of child protection issues. It is important that all staff have appropriate training and induction so that they understand their roles and responsibilities and are confident about carrying them out. Staff, students, and parents should feel secure that they can raise any issues or concerns about the safety or welfare of children and know that they will be listened to and taken seriously. This will be achieved by maintaining an ethos of safeguarding and promoting the welfare of children and young people and protecting staff. This is supported by having clear child protection policies, appropriate induction, and training, briefing and discussion of relevant issues and relevant learning. Vetting applicants working with children to ensure they are not unsuitable is a very important aspect of child protection.

In keeping with the above safeguarding statement, the school requires that all persons having regular or unsupervised access to children will be required to produce proof of their having no history of committing any offence that would suggest they present a risk to children. The proof of such should be provided by a recognized law enforcement agency with contact details being provided for verification purposes. Safe recruitment procedures

Annex 5

Briefing Sheet for Temporary Staff

For staff on short contracts in MAS

While working in Al Maaref American School, you have a duty of care towards the children /students here. This means that at all times you should act in a way that is consistent with their safety and welfare.

In addition, if at any time you have a concern about a child or young person, particularly if you suspect or think they may be at risk of abuse or neglect, it is your responsibility to share that concern with the school Child Safeguarding Officer (CSO), who is Basma Ahmed.

This is not an exhaustive list, but you may have become concerned as a result of:

- observing a physical injury, which you think may have been non-accidental.
- observing something in the appearance of a child or young person which suggests they are not being sufficiently well cared for.
- observing behavior that leads you to be concerned about a child or young person.
- a child or young person telling you that they have been subjected to some form of abuse.

In any of the circumstances listed here, you must write down what you saw or heard, date and sign your account, and give it to the CSO. This may be the beginning of a legal process – it is important to understand that legal action against a perpetrator can be seriously damaged by any suggestion that the child has been led in any way.

If a child talks to you about abuse, you should follow these guidelines:

- Rather than directly questioning the child, just listen and be supportive.
- Never stop a child who is freely recalling significant events, but don't push the child to tell you more than they wish.
- Make it clear that you may need to pass on information to staff in other agencies who may be able to help – do not promise confidentiality. You are obliged to share any information relating to abuse or neglect.
- Write an account of the conversation immediately, as close to verbatim as possible. Put the date and timings on it, and mention anyone else who was present. Then sign it and give your record to the designated person/child protection officer, who should contact children's social care if appropriate.

The school has a policy on safeguarding children and young people which you can find, together with the local procedures to be followed by all staff, in the Principal's Office.

Remember, if you have a concern, discuss it with the CSO.

APPENDIX 6: Declaration for Staff

School name Academic Year

Please sign and return to (CSO) by<insert date>.....

I, _____ have read and am familiar with the contents of the following documents and understand my role and responsibilities as set out in these document(s):

(1) The School's Child Protection and Safeguarding Policy

I am aware that the CSO and Deputy CSO are:

.....

.....

.....

.....

I am able to discuss any concerns that I may have with them.

Signed _____ Date _____