

Child Protection and Safeguarding Policy

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KEY CONTACT WITHIN THE LOCAL AREA

Dubai foundation for women and children

Address: P.O. Box 97727 Dubai,

United Arab Emirates Helpline 800 111

Website: www.dfwac.ae Email id: <u>help@dfwac.ae</u>

Community Development Authority-CDA

Address: Floor no. 4 & 5, Al Hudaibah Building,

Dubai, United Arab Emirates

P.O.Box 212288 Helpline 800 988

Website: https://www.cda.gov.ae

Email id: child@cda.gov.ae

Kanaf-Child protection centre in Sharjah

Address: Child Safety Department Supreme Council for Family Affairs

Sharjah

Helpline 800 700

Website: https://childsafety.gov.ae/kanaf

Latifa Hospital Child Welfare Unit

Address: PO Box 4115 Dubai, UAE

Tel: 04 2193000

APS Helpline email:

counsellor@amitysharjah.ae



Child Protection and Safeguarding Policy

1. INTRODUCTION

The safeguarding of children and young people from harm is the highest priority at Amity Private School, Sharjah. Our students have a right to feel safe and protected from significant physical and emotional harm both inside and outside of school. The students have the right to protection, regardless of age, gender, race, culture or disability. They have a right to be safe in our school.

Protecting children is everyone's responsibility at our school and this includes reporting any act committed by a parent, guardian or any other person, to a child enrolled in the school, which results in neglect, physical or emotional injury or sexual harm. All staff have a duty and will report any suspected or disclosed issues of child protection to the Designated Child Protection Officer (DCPO).

2. DEFINITIONS

Safeguarding and promoting the welfare of children means:

- Protecting children from maltreatment
- Preventing impairment of children's mental and physical health or development
- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- Taking action to enable all children to have the best outcomes

Child protection is part of this definition and refers to activities undertaken to prevent children suffering, or being likely to suffer, significant harm.

Abuse is a form of maltreatment of a child, and may involve inflicting harm or failing to act to prevent harm. (Refer Appendix A)

Neglect is a form of abuse and 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.

Sharing of nudes and semi-nudes (also known as sexting or youth produced sexual imagery) is where children share nude or semi-nude images, videos or live streams.

Children includes everyone under the age of 18.

3. AIM

This policy ensures that all staff in our school can follow the necessary procedures with regard to a child protection issue.

It aims:

- To raise awareness and identify responsibility in reporting possible cases of abuse;
- To ensure effective communication between all staff when dealing with child protection issues;
- To inform all parties about the correct procedures to use in the case of a child protection issue. (Appendix A -Categories of Abuse).



4. ROLES AND RESPONSIBILITIES

Safeguarding and child protection is **everyone's** responsibility. This policy applies to all staff, volunteers and visitors to school including school administration, bus drivers, cleaners and classroom assistants. Our policy and procedures also apply to extended school and off-site activities.

All staff must report any suspected incidents of child abuse to the Designated Child Protection Officer (DCPO).

Child Protection Committee		
Chair	Principal	Ms. Archana Sagar
DCPO	Vice Principal	Mr. Himanshu Yadav
Deputy	Head of Primary	Ms. Suja Udaikumar
	Inclusion Champion	Ms. Nudrat Azam
	Counsellors	Ms. Chithu Elsa Thomas
		Ms. Karen Cabantug
	Head Operations	Mr. Anish Jose
Members	School Nurses	Ms. Jinu Issac
		Ms. Anjaleena Luka
	Head Of Physical Education	Ms. Reena Choudhary
	Head Boy	Eshaan Faisal Mansuri
	Head Girl	Amal Fatima Jabir

4. 1. The Principal

The Principal is responsible for the implementation of this policy, including:

- Ensuring that staff (including temporary staff) and volunteers:
 - Are informed of our systems which support safeguarding, including this policy, as part of their induction
 - Understand and follow the procedures included in this policy, particularly those concerning referrals of cases of suspected abuse and neglect
- Communicating this policy to parents/carers.
- Ensuring that the DCPO has appropriate time, training and resources, and that there is always adequate cover if the DCPO is absent
- Ensuring that all staff undertake appropriate safeguarding and child protection training, and updating the content of the training regularly
- Acting as the 'case manager' in the event of an allegation of abuse made against another member of staff or volunteer, where appropriate.
- Ensuring the relevant staffing ratios are met, where applicable
- The Principal is responsible for reporting issues related to this policy to the CEO.



4.2. Designated Child Protection Officer (DCPO).

The DCPO is a member of the senior leadership team. Our DCPO is Vice Principal, Mr. Himanshu. The DCPO takes lead responsibility for child protection and wider safeguarding in the school.

- During term time, the DSPO will be available during school hours for staff to discuss any safeguarding concerns.
- Out of school hours the DCPO can be contacted through mail viceprincipal@amitysharjah.ae
- When the DCPO is absent, the Deputy, Head of Primary, Suja Udaikumar will act as cover.
- The DCPO will be given the time, training, resources and support to:
 - Provide advice and support to other staff on child welfare and child protection matters
 - Take part in strategy discussions and inter-agency meetings and/or support other staff to do so
 - Refer suspected cases, as appropriate, to the relevant authority- Child Protection Centre, Sharjah- helpline number 800700, SPEA, Ministry of Interior's Child Protection Centre on 116111 CPU@moe.gov.ae and/or police.

The DCPO will also keep the Principal informed of any issues, and liaise with local authority case managers and designated officers for child protection concerns as appropriate.

- Maintain relevant records of incident reports. (Refer Appendix C)
- Keep all information confidential and safe in a locked cabinet.

4.3. All school staff:

All staff will be aware of:

- Our systems which support safeguarding, including this child protection and safeguarding policy, the staff [behaviour policy/code of conduct], the role and identity of the DCPO and Deputy, the behaviour policy.
- The early help process and their role in it, including identifying emerging problems, liaising with the DCPO, and sharing information to support early identification and assessment
- The process for making referrals to DCPO that may follow a referral, including the role they might be expected to play
- What to do if they identify a safeguarding issue or a child tells them they are being abused or neglected and how to maintain an appropriate level of confidentiality while liaising with the Child Protection Committee
- The signs of different types of abuse and neglect, as well as specific safeguarding issues, such as peer-on-peer abuse, child sexual exploitation (CSE).
- The importance of reassuring victims that they are being taken seriously and that they will be supported and kept safe.
- Regular and relevant professional development sessions.
- Keeping clear, dated, factual and confidential records of child protection concerns.



5. SCHOOL DOCTOR/NURSE AND COUNSELLOR

- The school Doctor/ Nurse or Counsellor may be requested to provide physical treatment and emotional support after a child has been abused.
- The Doctor or Nurse may be required to conduct an examination if there are physical injuries and write an initial report about the child's physical and emotional condition.
- The Doctor/ Nurse and/ or Counsellor can provide positive encouragement to the child, liaise with family members to determine how best to promote the child's safety both at school and at home.
- In some cases, the child may have to take medication because of the abuse. The School Doctor or Nurse should ensure that all standards and procedures for administering medications in the school setting are met.

6. HR DEPARTMENT AND SECURITY

All staff (both teaching and non-teaching), including volunteers who apply to work at the school, will be subject to a rigorous recruitment process to ensure, as far as possible, their suitability to work with children and eligibility to work in the UAE.

When recruiting any member of the teaching staff or support staff with access to children, all reasonable steps should be taken to ensure compliance as far as possible with the following:

- Provision of an up-to-date police 'good conduct' letter and/or criminal records check
- That two or more references are taken from previous employers with follow-up questions with regard to the applicant's compliance with any Child Protection procedures

The **Security staff** undertake to be vigilant and adhere to the procedures governing the access, detailed record keeping, provision of a Visitor's Pass to be worn for ease of identification and monitoring of visitors to the school.

7. WHEN TO BE CONCERNED

Staff should be concerned if a student:

- Has any injury, which is not typical of the bumps and scrapes normally associated with the child's activities;
- Has unexplained injuries regularly;
- Has frequently injuries even when apparently reasonable explanations are given;
- Offers confused or conflicting explanations about how injuries were sustained;
- Exhibits significant changes in behavior, performance or attitude;
- Indulges in sexual behavior which is unusually explicit and/or inappropriate to his or her age;
- Discloses an experience in which he or she may have been harmed.

8. DEALING WITH DISCLOSURE - REFER TO APPENDIX -B

Procedure

When a child reports abuse, the teacher will inform the Designated Child Protection Officer (DCPO) immediately.



The DCPO will take initial steps to gather information regarding the reported incident. At this stage, he/she will:

- Interview staff members as necessary and document information relative to the case.
- Consult with school personnel to review the child's history in the school.

The DCPO will then form a school-based response team to address the report. The response team may include the school doctor, nurse, counsellor, teacher, and other individuals as the DCPO sees fit. In all cases, follow-up activities will be conducted in a manner that ensures that information is documented factually and that strict confidentiality is maintained.

Based on acquired information, a plan of action will be developed to assist the child and family. Actions that may take place are:

- Discussions between the child and the DCPO in order to gain more information.
- In-class observations of the child by the teacher, counsellor, or administrator.
- Meetings with the family to present the school's concerns
- Consultation with local authorities, if required.

Subsequent to a substantiated case of child abuse or neglect, the following actions may take place:

- The DCPO will maintain contact with the child and family to provide support and guidance as appropriate.
- The DCPO will provide the child's teachers with ongoing support, and provide strategies for the teacher to use
- The School Principal refers the case to local authorities, if required, for further action.

9. SCHOOL ENVIRONMENT

- Routine security procedures are in place for efficient implementation; 24 hours campus security and surveillance cameras present on school site.
- Environmentally safe structure materials are used to construct the APS building; keeping in mind access for people with disabilities
- Ergonomic furniture used for students
- Hygiene and safety are ensured in sanitary, electrical and plumbing areas
- Safe arrival and departure of students are ensured
- All first-floor windows are locked
- Main Gates are constantly guarded during active school hours. (Including any on-ground school activities)
- Visitor's Lobby, faculty rooms, offices and all coordinator rooms are strategically placed. Ample outside lighting and parking spaces for vehicles ensures domain protection.
- Restricting access, identifying visitors, monitoring arrival and departure of visitors through entrance and exit cards

Code of Conduct

- All staff members read and sign MOE's code of conduct.
- All staff members are expected to fully comply, at all times, with the School's Professional Code of Conduct.



- All staff should be aware of their duty to raise concerns about the attitude or actions of colleagues.
- If a member of staff has concerns about the conduct of any member of SLT they should contact the senior members of Governing Council (Chairman, CEO)

10. RELEVANT LEGISLATION OR AUTHORITIES IN THE UAE.

The UAE gives top priority to children's care and development. At the federal level, the Ministry of Interior undertakes protection of children.

Social Care and Minors Affairs Foundation in Abu Dhabi and Awqaf and Minors Affairs Foundation in Dubai support the federal entities in ensuring the well-being of minors.

The UAE has initiated Wadeema's Law and several regulations and initiatives to support this.

According to Federal Law No. 2 of 2001, monthly assistance is provided to the following categories of UAE nationals residing within the UAE:

- orphans
- Children from unknown parents.

11. CHILDREN'S RIGHTS

Federal Law No. 3 of 2016 concerning child rights, also known as Wadeema's Law, stresses that all children must be provided with appropriate living standards, access to health services, education, and equal opportunities in essential services and facilities without any kind of discrimination. The law protects children against all forms of negligence, exploitation, and physical and psychological abuses.

In addition, smoking in public and private vehicles and indoor facilities where children are present is also prohibited under the law.

The law allows childcare specialists to remove children from their homes against parents' wishes and without judicial permission in cases of imminent danger. In less severe cases, specialists may intervene by visiting the child regularly, providing social services and mediating a solution between the family and the child.

Those who put children in danger, abandon them, neglect them, leave them without supervision, do not enroll them in school or register them upon their birth will be subject to a prison sentence or a fine. The law applies to all children up to the age of 18.



12. APPENDIX A

12.1. Categories of Abuse

12.1.1. Physical abuse and likely behaviour changes, but not limited to

- Is actual or attempted physical injury to a child where there is definite knowledge, or reasonable suspicion that the injury was inflicted or knowingly not prevented.
- Unexplained injuries or burns (particularly if they are recurrent)
- Improbable excuses given to explain injuries
- Refusal to discuss injuries
- Fear of parents being contacted
- Withdrawal from physical contact
- Fear of returning home
- Fear of medical help
- Aggression towards others
- Self-destructive tendencies

12.1.2. Emotional abuse and likely behavior changes, but not limited to

- Failure to provide for the child's basic emotional needs such as having a severe effect on the behaviour and development of the child. This includes conveying to children the feeling that they are worthless or unloved.
- Physical/mental/emotional developmental lags
- Admission of punishment which may be excessive
- Overreact to mistakes
- Fear of new situations
- Inappropriate emotional response to painful situations
- Neurotic behaviour (e.g., rocking, thumb sucking etc.)
- Fear of parents being contacted
- Self-mutilation
- Extremes of passivity or aggression

12.1.3. Sexual abuse and likely behavior changes, but not limited to

Where a child may be deemed to have been sexually abused when any person(s), by design or neglect, exploits the child, directly or indirectly, in any activity intended to lead to the sexual arousal or other forms of gratification of that person or any other person(s) – including organized networks. This definition holds whether or not there has been genital contact and whether or not the child is said to have initiated the behaviour.

Signs and Symptoms

- Age-inappropriate sexual knowledge, language or behaviours
- Loss of appetite or compulsive eating
- Regressive behaviours such as thumb sucking, needing previously discarded cuddly toys
- Becoming withdrawn or isolated
- Inability to focus
- Reluctance to go home
- Bed-wetting
- Drawing sexually explicit pictures
- Trying to be 'extra good'



- Over-reacting to criticism
- Have outbursts of anger/irritability

12.1.4. Neglect and likely behavior changes, but not limited to

Refers to persistent or deliberate failure to meet a child's physical or psychological needs e.g. a failure to provide adequate food, clothing or shelter, failure to protect a child or failure to provide adequate medical care. It may also involve neglect or failure to give adequate response to a child's emotional needs.

- Constant hunger
- Poor personal hygiene
- Constant tiredness
- Poor state of clothing
- Frequent lateness and/or unexplained non-attendance
- Untreated medical problems
- Low self-esteem
- Poor peer relationships
- Stealing

12.2 PEOPLE WHO COULD BE INVOLVED IN CHILD ABUSE

- 1. Students
- 2. Parents
- 3. Staff members (Teaching/Non-teaching)
- 4. Outsiders

12.2.1 Abuse by a student:

- a. Students report the case of abuse to the class teacher.
- b. Class teacher reports the case to the Counsellor/Co-coordinators/Vice-Principal
- c. Minor issues are settled by the Counsellor speaking to the students involved in the case.
- d. In major issues, the matter is taken up by the Principal.
- e. Students are sent for counselling and for medical check-ups to the clinic if required.
- f. Parent is informed by the concerned staff.
- g. The affected student is monitored by the Counsellor/Co-coordinators/Vice-Principal for a period of time.
- h. The record is maintained for the same

The student who has been the victim can refer the case directly or by the help of a student, to the Counsellor.

12.2.2 Abuse by the parent:

- a. Student reports to the Class Teacher/Counsellor/Co-coordinators.
- b. The matter is brought to the notice of the Vice-Principal/Principal.
- c. The parent is called to the school and advised.
- d. The student is sent for Counselling to the school Counsellor.



12.2.3 Abuse by the teacher:

- a. Student reports to the Parent/Counsellor/Co-coordinator/Vice-Principal.
- b. Parent/Counsellor/Co-coordinators/V.P. informs the Principal.
- c. The teacher concerned is called by the Vice-Principal/Principal and enquires his/her views on the matter.
- d. A memo is issued to the concerned teacher by the Principal after verification and confirmation of the incident.
- e. Parents are informed by the Principal and assured that action will be taken against the teacher and no such incident will occur henceforth.
- f. In the case of the teacher resorting to abuse/harassment in spite of the repeated warnings, strict action will be taken by the Principal/CEO.
- g. The student is counselled by the counsellor.

12.2.4 Abuse by the support staff:

- a. Student reports the case to the Parent/Class Teacher/Counsellor/Co-coordinators/V.P.
- b. The Class Teacher/Counselor/Co-coordinators/AVP/Parent informs the same to the Principal. The issue is taken up by the Principal and the concerned staff is warned.
- c. In extreme cases, the person may be terminated by the Principal/School Governing Council.

12.2.5 Abuse by the Relative:

- a. Student report to the Class Teacher/Counsellor/Co-coordinator.
- b. The matter is brought to the notice of the Phase Heads /Principal.
- c. The parent is called to the school and the matter is discussed for further action.
- d. The student is sent to the School Counsellor.

12.2.6 Abuse by Outsiders (During field trips, picnics etc.):

- a. The student reports to the Class Teacher/Counsellor/Co-coordinator.
- b. The matter is brought to the notice of Phase Heads/Principal.
- c. The teacher in charge also reports to the concerned authorities where the trip/picnic takes place.
- d. The parent is informed about the issue.
- e. The student is sent to the Counsellor for counselling.

12.2.7 Abuse by Workers Other Than Staff (e.g. Contractors, etc.)

- a. The student reports to the Class teacher/Counsellor.
- b. The matter is brought to the notice of the Phase Heads/Principal.
- c. The Principal takes up the issue with the concerned head of the Staff.
- d. The accused is called and warned by the concerned head.
- e. If the issue continues and no action is taken by the concerned head, the Principal/ School Governing Council can take strict action, which may lead to the cancellation of the School's contract with them.

This policy should be read in conjunction with:

- Behavior Policy
- Anti-Bullying policies.



13. APPENDIX B

What to Do on Disclosure

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

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Listen, hear and believe (Listen carefully, take it seriously)

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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)

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Reassure and explain that they have done the right thing in telling.

(Do not promise confidentiality; explain that only those professionals who need to know will be informed)

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Record in writing as near verbatim as possible and as soon as possible on a Disclosure Form (Use the child's own words, make your record as soon as possible after the event, so that you don't forget anything, and include information about what action was taken afterwards)

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Report to the DCPO



14. APPENDIX C

Disclosure of Abuse Form

(ANY CONCERN REGARDING A STUDENT MUST BE RECORDER AND PASSED ON. STAFFS SHOULDNOT MAKE ANY UNDERTAKINGS TO ABSOLUTE CONFIDENTIALITY)

	n Making Allegation/ Disclosure:	
Time:	Date:	
Parents Name:		
Contact Details:		
Nature of Disclosur		
	ate sheet as required, recording as close to verbatim as possible. Draw a	
diagram to indicate	the position of any bruising or any other injury)	
Name of the DCPO	/ Alternative Staff:	
Designation:		
Time:	Date:	
Signature:		

