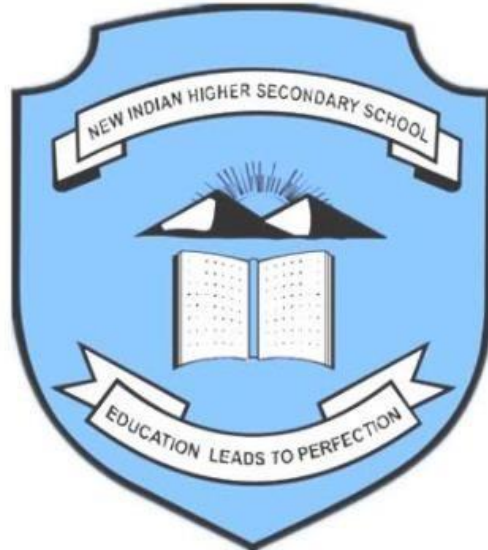


NEW INDIAN SCHOOLRAS AL KHAIMAH



CHILD PROTECTION & SAFE GUARDING POLICY 2022-2023

Signed:

Principal:



Date:04/04/2022

ICT Co-Ordinator:



Date:04/04/2022

POLICY DOCUMENT

CHILD PROTECTION AND SAFEGUARDING POLICY

FUNCTION	FOR CHILD PROTECTION
CATEGORY	STATUTORY
STATUS	IMPLEMENTED
ISSUED FOR	THE SCHOOL COMMUNITY
REVIEW SCHEDULE	ANNUAL
REVIEWED BY	INCLUSION CHAMPION
APPROVED BY	PRINCIPAL MRS.BEENA RANI
OVERVIEWED BY	CHAIR OF THE BOARD OF GOVERNOR TEAM HEAD
DATE RATIFIED	AUGUST 2021

POLICY STATEMENT

INTRODUCTION:

NIS recognizes our moral responsibility to create a safe and supportive environment for all students and to safeguard and promote their welfare. We are fully committed to promoting a safe and welcoming environment for all students, where the students feel respected and valued. All staff is trained to understand the best practices related to protection and safeguarding of all students and appropriate actions to be taken to protect them.

The procedures contained in this policy apply to all staff, volunteers and governors and are consistent with those of NIS.

- ❖ The aim of this manual is to ensure, as far as practicable, the provision of a safe and healthy environment for all our students of NEW INDIAN SCHOOL and employees, during these unprecedented times.
- ❖ This policy applies to all staff and volunteers and all adults who come into contact with children in school to make sure and safe guard which promotes their welfare and wellbeing through virtual learning.
- ❖ The school's responsibility to safeguard and promote the welfare of children is of paramount importance.
- ❖ All children, regardless of age, gender, ability, culture, race, language or religion have equal rights to protection.
- ❖ All staff has a duty of reporting any suspected or disclosed issues of child protection to the Child protection team. If the threat is immediate or ongoing it will be reported to the appropriate local safeguarding authorities a set-in place by the UAE.
- ❖ Students and staff involved in child protection issues will receive appropriate support.
- ❖ Children who are safe and feel safe are better equipped to learn.
- ❖ This policy will be reviewed at least annually unless an incident, new legislation or guidance suggests the need for an interim review.

NIS policy is derived from UAE legislation which includes the following documents:

UAE Federal Law No. 3 of 2016 on children's rights (Wadeema's Law)

UAE Department for Health, School Health Guidelines for Private Schools 2011

UAE School Inspection Framework 2016, Section 5 The protection, care, guidance and support of students

Within Dubai and the United Arab Emirates, the infrastructure of Educational Safeguarding and/or Social Care Services is under development and growth. Following cases which caused concern in the Emirati community, Sheikh Mohammed, the Ruler of Dubai, supported the drafting of a Federal law on Child Protection, 'to ensure a secure and stable future for children in the U.A.E'.

In April 2012, it was reported that Dubai had embraced a new policy to protect children against all forms of violence, abuse, exploitation and neglect and offer support and care for those in need. The policy aims 'to provide protection to Emirati and expatriate children under the age 18 who live permanently or temporarily in Dubai'. The Dubai Strategic Plan 2015 calls for the provision of proper social services to meet the requirements of the local community.

In November 2012, the UAE Cabinet approved a draft of "Wadeema's Law" to protect children in the UAE. The law includes creating special units that intervene when children are at risk and stresses that all children have rights regardless of their religion and community.

December 2015 - The Childs Rights Law (previously Wadeema's Law) was passed by the Federal National Council.

March 2016 – Federal Law No 3 2016, Law on the Rights of a Child was in immediate effect.

KEY PERSONNEL:

KEY CONTACT WITHIN THE SCHOOL

CHILD PROTECTION LEADS

MRS. SAFEERA AMIN

MRS.MEHJABIN ANSARY

MRS. SEENA JAHFER

MRS.HELEN

CHILD PROTECTION TEAM:

Sl.no	NAME	MAIL ID
1	Mrs. Safeera	safeeramin@newindianschool.com
2	Mrs. Mehjabin	mehjabin@newindianschool.com
3	Mrs. Azal	azal@newindianschool.com
4	Mrs. Rimsi	rimsi@newindianschool.com
5	Mrs. Seena	seena@newindianschool.com
6	Mrs. Shoukeela	shoukeela@newindianschool.com
7	Mrs. Neethu	neethu@newindianschool.com
8	Mrs. Jafeena	jafeena@newindianschool.com
9	Mrs. Fathima	fathimas@newindianschool.com
10	Mrs. Basma	basma@newindianschool.com
11	Mrs. Daliya	daliya@newindianschool.com
12	Mrs. Ahsana	ahsana@newindianschool.com

SCHOOL COUNSELLOR: MRS. JEETHU

PRINCIPAL: MRS.BEENA RANI RAJMOHAN

KEY CONTACT WITHIN THE LOCAL AREA

The RAK POLICE CHILD PROTECTION HOTLINE for confidentiality and advice.

CONTACT NUMBER: 072356666

WEBSITE: www.rakpolice.gov.ae

AL AMEEN SERVICE CONTACT NUMBER: 800-4-888ALTERNATIVE REFERRALS

When members of the school have URGENT and IMMEDIATE concerns for the safety and welfare of a child or young person during school hours they should make an immediate referral to a member of the Child Protection Team or any accessible member of the Senior Leadership Team.

PURPOSE/ AIMS OF THE POLICY:

- ❖ The safeguarding of children from harm is the highest priority here at THE NEW INDIAN SCHOOL. Our students have a right to feel safe and protected from significant physical and emotional harm both inside and outside the school. This policy is crucial part of the promoting welfare of our students. It is on what to do in the event of suspected abuse.
- ❖ This policy defines abuse, outlines signs of abuse and explains the procedures for investigating and reporting suspected cases.
- ❖ To provide all staff with the necessary information and training to enable them to meet their safeguarding and child protection responsibilities.
- ❖ To ensure consistent good practice of policy across the wider network of NIS.

OUR VISION:

- ❖ Providing education in a safe and non-threatening environment by bringing awareness and support during the Pandemic.

Principles upon which the Safeguarding Children Policy is based:

- ❖ The welfare of a child or young person will always be paramount.
- ❖ The welfare of families will be promoted.
- ❖ The rights wish and feelings of children, young people and their families will be respected and listened to.
- ❖ Keeping children safe from harm requires people who work with children to share information.

We recognize that for these commitments to be effective, teaching and non-teaching staff and students throughout the NEW INDIAN SCHOOL must play their part in the creation of a safeguarding culture.

PROCEDURES:

When a child reports abuse, the teacher will inform the Designated Child Protection Officer (DCPO) immediately. The teacher should also inform the DCPO as soon as possible.

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.
- Referral of the student and family to external professional counselling.
- Consultation with local authorities.

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 DCPO will maintain contact with outside therapists, in order to update the therapist about the progress of the child in school, and to keep the school informed

about the progress of the therapy.

- The School Principal refers the case to local authorities for further action.

Roles and Responsibilities

This policy applies to all staff, volunteers and visitors to NIS.

The staff at NIS has a responsibility to promote the safety and well-being of our students.

Responsibilities of the whole school staff

- There is a named person(s) in our school who is the DCPO.
- All members of the school staff have a responsibility to identify and report suspected abuse and to ensure the safety and wellbeing of the students in the school. In doing so, they should seek advice and support as necessary from the DCPO.
- All staff is expected to attend regular and relevant professional development sessions.
- All staff is expected to provide a safe and caring environment in which children can develop the confidence to voice ideas, feelings and opinions. Children should be treated with respect within a framework of agreed and understood behavior.
- All staff is expected to
 - ✓ be aware of symptoms of abuse.
 - ✓ Report concerns to DCPO as appropriate.
 - ✓ Keep clear, dated, factual and confidential records of child protection concerns.

Responsibilities of the DCPO:

The DCPO's will:

Follow the agreed procedures (refer to Appendix B What to do on Disclosure)

- Know how to identify the signs and symptoms of abuse (refer to Appendix A)
- Provide advice and support to staff
- Maintain relevant records of incident reports (refer Appendix C)
- Keep all information confidentially and safe in a locked cabinet
- Know when and how to submit a referral to outside agencies (refer Appendix D)

Specific responsibilities of the 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 determine how best to promote the child's safety both at school and at home.
- Child abuse can leave deep emotional scars and the School Doctor or Nurse should recognize these and help develop a rehabilitation plan in liaison with the DCPO and other appropriate staff in the case team.
- In some cases, the child may have to take medication as a result of the abuse. The School Doctor or Nurse should ensure that all standards and procedures for administering medications in the school setting are met.

POLICY REVIEW

This policy is to be reviewed annually, though any deficiencies or weaknesses in children protection arrangements will be remedied without delay.

DATE FOR REVIEW

August, 2021

APPENDIX A

CATEGORIES OF ABUSE PHYSICAL ABUSE:

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.

EMOTIONAL ABUSE:

Failure to provide for the child's basic emotional needs such as to have a severe effect on the behavior 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 seems excessive.
- Over reaction to mistakes.
- Fear of new situations.
- Inappropriate emotional response to painful situations.
- Neurotic behavior (eg, rocking, thumb sucking etc.)
- Fear of parents being contacted.
- Self-mutilation.
- Extremes of passivity or aggression.

SEXUAL ABUSE:

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 behavior.

Signs and Symptoms:

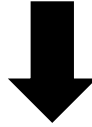
- Age-inappropriate sexual knowledge, language, behaviors
- Loss of appetite or compulsive eating
- Regressive behaviors such as thumb sucking, needing previously discarded cuddly toys
- Becoming withdrawn, isolated
- Inability to focus
- Reluctance to go home
- Bed-wetting
- Drawing sexually explicit pictures
- Trying to be ‘extra good’
- Over-reacting to criticism
- Have outbursts of anger/irritability

NEGLECT: Refers to persistent or deliberate failure to meet a child’s physical or psychological needs eg. 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.

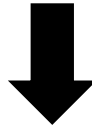
- Constant hunger
- Poor personal hygiene
- Constant tiredness
- Poor state of clothing
- Frequent lateness and/or unexplained non-attendance
- Untreated medical problems
- Low self-esteem
- Poor peer relationships
- Stealing

APPENDIX B
WHAT TO DO ON DISCLOSURE

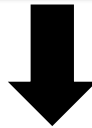
Stay calm (Don't over-react, however shocked you may be)



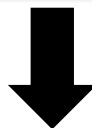
Listen, hear and believe (Listen carefully, take it seriously)



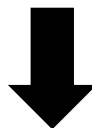
Give time for the person to say what they want (Don't make assumptions and don't offer alternative explanations, ask questions beginning with Tell me about...Explain...Describe... Avoid 'who, what, when, where' questions)



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)



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)



Report to the DCPO

APPENDIX C
NEW INDIAN SCHOOL
DISCLOSURE OF ABUSE FORM

Name of Person Making Allegation/Disclosure: _____

Time and Date: _____

Parent(s) Name and Contact Details:

Nature of Disclosure:

(Continue on separate sheet as required, recording as close to verbatim as possible)

Name and Signature: _____

Role: _____

Date and Time: _____

APPENDIX D

INVOLVEMENT OF OUTSIDE AGENCIES

Dubai Foundation for Women and Children (DFWAC)

The first licensed non-profit shelter in the UAE for women and children who are victims of domestic violence, child abuse and human trafficking. It was established in July, 2007 by His Highness Sheikh Mohammed bin Rashid Al Maktoum, Vice President and Prime Minister of the UAE and Ruler of Dubai, to offer victims immediate protection and support services in accordance with international human rights obligations. The Foundation provides a helpline, emergency shelter, and support services to women and children victims. DFWAC aims to protect physically, sexually and emotionally abused women and children, prevent ongoing abuse and the escalation of violence and promote social awareness through education and outreach.

DFWAC provides:

- A safe shelter
- Case management
- Medical care
- Psychological support
- Counselling
- Legal, consular and immigration assistance
- Helpline 800 111 or email help@dfwac.ae
- Website – www.dfwac.ae