



IDEAL ENGLISH SCHOOL, RAK

CHILD PROTECTION AND SAFEGUARDING POLICY (2022 -2023)



Child protection and safeguarding policy

Designated Child protection Lead	Mrs.Reena.M.R Mrs.AkhilaSanthosh Mr. PremKumar
Designated Safeguarding lead	Mrs.Shazalia
Principal	Dr.Prasanna Bhaskar
Date of Review	January 2020
Next Review	January 2022



INTRODUCTION

The health, safety and wellbeing of all our children is of paramount importance to all the adults who work in our school. Our children 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 on a child enrolled in our school which is committed by a parent, guardian or any other person and which results in neglect, physical or emotional injury or sexual harm.

We are fully committed to promoting a safe and welcoming environment for all students, where the students feel respected and valued. All staff are trained to understand the best practices related to protection and safeguarding of all students and appropriate actions to be taken to protect them.

It is the duty of all staff to report all suspected or disclosed child protection issues to the Designated Safeguarding Lead (DSL). If the threat is immediate or on-going it will be reported to the appropriate local safeguarding authorities, as set in place by the UAE.



KEY PERSONNEL

KEY CONTACT WITHIN THE SCHOOL

CHILD PROTECTION LEADS	: Mrs.Reena .M.R
CHILD PROTECTION & SAFEGUARDING TEAM	: Mrs.AKHILA SANTHOSH,MrPREM KUMAR
SCHOOL COUNSELLOR	: Mrs.REENA M.R
PRINCIPAL	: DR.PRASANNA BHASKAR

KEY CONTACT WITHIN THE LOCAL AREA:

The RAK POLICE CHILD PROTECTION HOTLINE for confidentiality and advice.
CONTACT NUMBER: **07-2356666**

POLICY STATEMENT

- ❖ 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.
- ❖ Children who are safe and feel safe are better equipped to learn .
- ❖ This school is committed to safeguarding and promoting the welfare of children and young people and expects all staff to share this commitment.
- ❖ All staff have an equal responsibility to act on any suspicion or disclosure that may suggest a child is at risk of harm at home, in the community or at school
- ❖ If, at any point, there is a risk of immediate serious harm to a child, a referral will be made to relevant statutory body and public services. Anybody can make a referral. If the child's situation does not appear to be improving, any staff member with concerns should press for reconsideration. Concerns should always lead to help for the child at some stage
- ❖ Students and staff involved in child protection issues will receive appropriate support
- ❖ This policy will be reviewed at least annually unless an incident, new legislation or guidance suggests the need for an interim review.

Purpose/Aim :

- 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 across the wider network of IES.
- To demonstrate the school's commitment with regard to safeguarding and child protection to students, parents and other partners
- To establish a safe environment at school where all students feel safe, cared for, protected and nurtured.

ROLES AND RESPONSIBILITIES OF THE CHILD PROTECTION OFFICER

- Takes lead responsibility for safeguarding and child protection in the school
- Is appropriately trained and updates their knowledge and skills to keep up with any developments relevant to their
- Acts as a source of support and expertise to the school community
- Provides advice and support to the staff
- Encourages a culture of listening to children and taking account of their wishes and feelings
- Is alert to the specific needs all children including the SEND.
- Maintains relevant records of incidents confidentially and safely in a locked cabinet
- Refers cases of suspected abuse to Children's Social Care, or the Police as appropriate
- Attends child protection conferences
- Is an active member of the school Health and safety committee
- Ensures that all staff are trained in child protection and safeguarding
- Ensures that all staff have signed to indicate that they have read and understood the child protection and safeguarding policy
- Ensures that the child protection and safeguarding policy and procedures are regularly reviewed and updated annually, working with the whole school community
- Makes the child protection and safeguarding policy available publicly, i.e. on the school's website and portal
- Ensures parents are aware of the school's role in safeguarding.

**Keeping
children safe
is everyone's
responsibility**



Designated Safeguarding Lead(DSL)

The Designated Safeguarding Leads(DSL) main tasks are to:

- Ensure that the Principal is kept fully informed of any concerns
- Ensure all staff are aware who the DSL is and their role and contact details
- Ensure that all staff are aware of these procedures and what to do in the event they are concerned about a pupil .
- Ensure that the safeguarding procedures are followed in the School.
- Ensure that appropriate training and support is provided to all staff.
- Decide whether to take further action about specific concerns.
- Ensure that accurate records are maintained on individual cases and these are kept in a secure and locked location..
- Provide guidance to parents and staff about obtaining support.
- Inform parents of any concerns and work with them to try and facilitate change, unless this would place the pupil at greater risk
- Develop effective links with relevant agencies.

ROLE AND RESPONSIBILITIES OF DESIGNATED SAFEGUARDING OFFICER(DSO)

FOR CHILD PROTECTION ISSUES

- Know how to identify the signs and symptoms of abuse
- Can provide advice and support to staff in matters of Child Protection
- Report allegations and suspicions to the Principal when necessary and as soon as practical
- Maintain relevant records of incident reports and follow-up
- Ensure all records are kept confidentially, separate from the main student file, and in locked locations
- Know when and how to make a referral to outside agencies/professionals
- Can contribute to and monitor a child protection plan
- Will hold monthly case conferences (Child Protection Meeting) with School Counsellors to update themselves on status of current/new concerns

Good practice guidelines and staff code of conduct

To meet and maintain our responsibilities towards students, we need to agree standards of good practice which form a code of conduct for all staff. Good practice includes:

- Treating all students with respect.
- Setting a good example by conducting ourselves appropriately.
- Involving students in decisions that affect them.
- Encouraging positive, respectful and safe behaviour among students.
- Being a good listener.
- Being alert to changes in students' behavior and to signs of abuse and neglect and exploitation.
 - Recognising that challenging behavior may be an indicator of abuse
 - Reading and understanding the school's child protection policy, Staff Behavior Policy (code of conduct) and guidance documents on wider safeguarding issues, for example bullying, behavior, physical contact, sexual exploitation, extremism, e-safety and information-sharing.
- Asking the student's permission before initiating physical contact, such as assisting with dressing, physical support during PE or administering first aid.
- Maintaining appropriate standards of conversation and interaction with and between students and avoiding the use of sexualised or derogatory language.
- Being aware that the personal and family circumstances and lifestyles of some students lead to an increased risk of abuse.
- Applying the use of reasonable force and physical intervention only as a last resort and in compliance with school procedures and IES guidance.
 - Referring all concerns about a student's safety and welfare to the DSL or, if necessary, directly to the Police or Children's Social Care.
- Following the school's rules with regard to communication and relationships with students, including via social media.

Abuse of position of trust

All school staff are aware that inappropriate behavior towards students is unacceptable and that their conduct towards students must be beyond reproach. Any relationship with a student, even if over the age of consent, is regarded as 'an abuse of a position of trust'.

The IES Staff Behavior Policy is signed by all staff members.



Support for students, families and staff involved in a child protection issue

Child abuse is devastating for the child and can also result in distress and anxiety for staff who become involved. We will support students, their families, and staff by:

- Taking all suspicions and disclosures seriously.
- Nominating a link person (usually the DSL) who will keep all parties informed and be the central point of contact.
- Where a member of staff is the subject of an allegation made by a student, separate link people will be nominated to avoid any conflict of interest.
- Responding sympathetically to any request from students or staff for time out to deal with distress or anxiety.
- Maintaining confidentiality and sharing information on a need-to-know basis only with relevant individuals and agencies.
- Storing records securely.
- Offering details of helplines, counselling or other avenues of external support.
- Following the procedures laid down in our child protection, whistleblowing, complaints and disciplinary procedures.
- Cooperating fully with relevant statutory agencies.

Complaints procedure

Our complaints procedure will be followed where a student or parent raises a concern about poor practice towards a student that initially does not reach the threshold for child protection action. Poor practice examples include unfairly singling out a student or attempting to humiliate them, bullying or belittling a student or discriminating against them in some way. Complaints are managed by the Principal, other members of the senior leadership team and governors. An explanation of the complaints procedure is included in the safeguarding information for parents and students. Complaints from staff are dealt with under the school's complaints and disciplinary and grievance procedures. Complaints which escalate into a child protection concern will automatically be managed under the school's child protection procedures.

Record Keeping

The school will maintain safeguarding (including early help) and child protection records.

The school will:

- ❖ Keep clear detailed written records of concerns about children (noting the date, event and action taken), even where there is no need to refer the matter to relevant agencies immediately;
- ❖ Keep records in a folder in a meticulous chronological order;
- ❖ Ensure all records are kept secure and in locked locations;
- ❖ Ensure all relevant child protection records are sent to the receiving school, college or other education establishment when a student moves.

Safeguarding and child protection records will be maintained independently from the student's school file and the school file will be 'tagged' to indicate that separate information is held. Such records will only be accessible to the Designated Safeguarding Lead and school leaders who need to be aware.

Such records will include, in addition to the name, address and age of the child, timed and dated observations describing the child's behavior, appearance, statements/remarks made to staff or other children and observations of interactions between the child, other children, members of staff and/or parents/carers that give rise to concern. Where possible and without interpretation, the exact words spoken by the child or parent/carer will be recorded. Records will be signed, dated and timed by the member of staff making the record.

Records of safeguarding/child protection observations or concerns can be completed electronically or as a paper version but it is most important that all staff use one consistent system for the recording of concerns and that all records are passed to the Designated Safeguarding Leader, who should complete the form to confirm what action has been taken.

Child protection procedures

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 behaviour (eg, rocking, thumb sucking etc)
- Fear of parents being contacted

- Self-mutilation

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 organised 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, behaviours
 - Loss of appetite or compulsive eating
 - Regressive behaviours 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 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

IMPACT OF ABUSE

The impact of child abuse, neglect and exploitation should not be underestimated. Many children do recover well and go on to lead healthy, happy and productive lives, although most adult survivors agree that the emotional scars remain, however well buried. For some children, full recovery is beyond their reach and the rest of their childhood and their adulthood may be characterised by anxiety or depression, self-harm, eating disorders, alcohol and substance misuse, unequal and destructive relationships and long-term medical or psychiatric difficulties. Taking Action Any child in any family in any school could become a victim of abuse. Staff should always maintain an attitude of “It could happen here”.

Key points for staff to remember when taking action are:

1. Teacher identifies concern and documents reason for referral 2. Teacher reports to counselor 3. Counselor can then investigate the case and communicate with Divisional Principal as appropriate 4. If necessary, the concern will then be communicated to the DSL* *immediately if there is evidence of physical or sexual abuse and certainly by the end of the day • Do not start your own investigation • Share information on a need-to-know basis only – do not discuss the issue with colleagues, friends or family • Seek support for yourself if you are distressed or need to debrief.

If a member of staff or volunteer is concerned about a student's welfare

There will be occasions when staff may suspect that a student may be at risk but have no ‘real’ evidence. The student’s behavior may have changed, their artwork could be bizarre, they may write stories or poetry that reveal confusion or distress or physical but inconclusive signs may have been noticed. In these circumstances, staff will try to give the student the opportunity to talk. The signs they have noticed may be due to a variety of factors, for example a parent has moved out, a pet has died, a grandparent is very ill or an accident has occurred. It is fine for staff to ask the student if they are OK or if they can help in any way. Staff should use report these concerns to the DSL as per any other concern about a child's welfare. Concerns which do not meet the threshold for child protection intervention will be managed through the Early Help process.

If a student discloses to a member of staff or volunteer

It takes a lot of courage for a child to disclose that they are being abused. They may feel ashamed, particularly if the abuse is sexual. Their abuser may have threatened what will happen if they tell. They may have lost all trust in adults. Or they may believe, or have been told, that the abuse is their own fault. Sometimes they may not be aware that what is happening is abusive.

If a student talks to a member of staff about any risks to their safety or wellbeing, the staff member will need to let the student know that they must pass the information on – staff are not allowed to keep secrets. The point at which they tell the student this is a matter for professional judgement. If they jump in immediately the student may think that they do not want to listen but if left until the very end of the conversation, the student may feel that they have been misled into revealing more than they would have otherwise.

During their conversations with students staff will:

- Allow them to speak freely
- Remain calm and not overreact – the student may stop talking if they feel they are upsetting their listener
- Give reassuring nods or words of comfort – ‘I’m so sorry this has happened’, ‘I want to help’, ‘This isn’t your fault’, ‘You are doing the right thing in talking to me’
- Not be afraid of silences – staff must remember how hard this must be for the student
- Under no circumstances ask investigative questions – such as how many times this has happened, whether it happens to siblings too, or what does the student’s mother think about all this (however, it is reasonable to ask questions to clarify understanding and to support a meaningful referral if that is required, e.g. when did this happen, where did this happen?)
- At an appropriate time tell the student that in order to help them, the member of staff must pass the information on
- Not automatically offer any physical touch as comfort. It may be anything but comforting to a child who has been abused
- Avoid admonishing the child for not disclosing earlier. Saying things such as ‘I do wish you had told me about this when it started’ or ‘I can’t believe what I’m hearing’ may be the staff member’s way of being supportive but may be interpreted by the child to mean that they have done something wrong
- Tell the student what will happen next
- Let them know that someone (either you or another named person, e.g. the DSL) will come to see them before the end of the day
- Report verbally to the DSL
- Write up their conversation as soon as possible
- Seek support if they feel distressed or need to debrief

Notifying parents

The school will normally seek to discuss any concerns about a student with their parents. This must be handled sensitively and the DSL will make contact with the parent in the event of a concern, suspicion or disclosure. However, if the school believes that notifying parents could increase the risk to the child or exacerbate the problem, advice will be sought first from relevant UAE agencies.

Making a referral to Children’s Social Care

The DSL will make a referral to UAE agencies, and the police, if it is believed that a student is suffering or is at risk of suffering harm. The student (subject to their age and understanding) and the parents will be told that a referral is being made, unless to do so would increase the risk to the child or create undue delay.

Reporting to IES

All concerns relating to any aspect of a child’s safety must be logged in IES data management system .

Sexual exploitation of children

Sexual exploitation involves an individual or group of adults taking advantage of the vulnerability of an individual or groups of children or young people. Victims can be boys or girls. Children and young people are often unwittingly drawn into sexual exploitation through the offer of friendship and care, gifts, drugs, alcohol and sometimes accommodation. Sexual exploitation is a serious crime and can have a long-lasting adverse impact on a child's physical and emotional health. It may also be linked to the trafficking of children. The school teaches children about consent and the risks of sexual exploitation in the PSHE and SRE curriculum. A common feature of sexual exploitation is that the child often does not recognise the coercive nature of the relationship and does not see her/himself as a victim. The child may initially resent what she/he perceives as interference by staff but staff must act on their concerns, as they would for any other type of abuse. All staff are made aware of the indicators of sexual exploitation of children and all concerns are reported immediately to the DSL. The DSL will consider the need to make a referral to UAE agencies, and the police. Parents will be consulted and notified as above.

IES POLICY requires Designated Safeguarding Lead to ensure that the school's safeguarding and child protection policy is available publicly (e.g. via the school website and portal) and that parents are aware of the fact that referrals about suspected abuse or neglect may be made and the role of the school in that process.



Standards for Effective Child Protection Practice in Schools

1. Have an ethos in which children feel secure, their viewpoints are valued and they are encouraged to talk and are listened to.
2. Provide suitable support and guidance so that students have a range of appropriate adults to whom they can turn if they are worried or in difficulties;
3. Work with parents to build an understanding of the school's responsibilities to safeguard and promote the welfare of all children and a recognition that this may occasionally require children to be referred to investigative agencies as a constructive and helpful measure;
4. Ensure all staff are able to identify children who may benefit from early help; provide coordinated offers of early help; and ensure that children receive the right help at the right time to address concerns and risks and prevent issues escalating;
5. Are vigilant in cases of suspected child abuse, recognising the signs and symptoms, have clear procedures whereby all members of staff report such cases to the Designated Safeguarding Lead or – in her/his absence – the deputy Designated Safeguarding Lead.
6. Monitor children who have been identified as in need of early help or at risk; maintain clear records of students' progress and welfare *in a secure place*; maintain sound policies on confidentiality; provide appropriate information to other professionals; and submit reports to and attend child protection conferences;
7. Provide and support regular child protection training and updates for **all** school staff and ensure that Designated Safeguarding Leads attend refresher training every two years to ensure their skills and expertise are up to date; and ensure that targeted funding for this work is used solely for this purpose;
8. Use the curriculum to teach children about safeguarding and raise their awareness and build confidence so that students have a range of contacts and strategies to ensure their own protection and understand the importance of protecting others;
9. Provide clear policy statements for parents, staff and children and young people on this and on both positive behavior policies and the school's approach to bullying;
10. Have a clear understanding of the various types of bullying – face to face, online, physical, verbal and indirect - and act promptly and firmly to combat it, making sure that students are aware of the school's position on this issue and who they can contact for support;

11. Take particular care that students with SEN in mainstream and special schools, who may be especially vulnerable to abuse, are supported effectively with particular attention paid to ensuring that those with communication difficulties
12. Have a clear policy about the handling of allegations of abuse by members of staff, ensuring that all staff are fully aware of the procedures and that they are followed correctly at all times.
13. Have a written whole school policy, which is produced, owned and regularly reviewed by all school staff, taking into account the views of children, parents/carers and governors, and which clearly outlines the school's position and positive action in respect of the aforementioned standards;
14. Have a Single Central Record in place.

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 Authority

Appendix 1

IES Safeguarding and child protection Cause for concern form	
Student's name	
Class/Year	
Date of concern	
Time of concern	
Details/Context: <i>It is essential that you distinguish between hearsay, gossips and the observation. Use the exact word of child /young person wherever possible. Give the context. for eg: People who involved ,where it took place.</i>	
Witness	
Signed	Dated
<i>For use by DSL only</i>	
Action taken by DSL (if necessary)	
Signed	

Appendix 2

Information sheet

Full Name:		DOB:	Class/Form:	Additional needs:	
Gender:		Ethnicity:			
Home Address:			Telephone:		
			E mail:		
Status of file and dates:					
OPEN					
CLOSED					
TRANSFER					
Any other child protection records held in school relating to this child or a child closely connected to him/her? YES/NO WHO?					
Members of household					
Name	Relationship to child	DOB/Age	Tel No		
Significant Others (relatives, carers, friends, childminders, etc.)					
Name	Relationship to child	Address	Tel No		
Other Agency Involvement					
Name of officer/person	Role and Agency	Tel No	Date		

Appendix 3

Logging a concern about a child's safety and welfare

PART 1(by Staff)

student's Name:	Date of Birth:	Class:
Date and Time of Incident:	Date and Time (of writing):	
Name: Print		
Signature		
Job Title:		
Record the following factually: What are you worried about? Who? What (if recording a verbal disclosure by a child use their words)? Where? When (date and time of incident)? Any witnesses?		
What is the student's account/perspective?		
Professional opinion where relevant.		
Any other relevant information (distinguish between fact and opinion). Previous concerns etc.		
What needs to happen? Note actions, including names of anyone to whom your information was passed and when.		

PART 2(By DSL)

Time and date information received, and from whom.	
Any advice sought – if required (date, time, name, role, organisation and advice given).	
<u>Action taken</u> (referral to outside agencies /monitoring advice given to appropriate staff) with reasons. Note time, date, names, who information shared with and when etc.	
<u>Parent's informed?</u> Y/N and reasons.	
<u>Outcome</u> Record names of individuals/agencies who have given information regarding outcome of any referral (if made).	
Where can additional information regarding child/incident be found (e.g. student file, serious incident book)?	
Should a concern/confidential file be commenced if there is not already one? Why?	
Signed	
Printed Name	

Appendix 4

Logging concerns/information shared by others external to the school (Pass to Designated Person)

student's Name:	Date of Birth: Class/form:
Date and Time of Incident:	Date and Time of receipt of information: Via letter / telephone etc.
Recipient (and role) of information:	
Name of caller/provider of information:	
Organisation/agency/role:	
Contact details (telephone number/address/e-mail)	
Relationship to the child/family:	
Information received:	
Actions/Recommendations for the school:	
Outcome:	
Name:	
Signature:	
Date and time completed:	
Counter Signed by Designated Safeguarding Lead	
Name:	
Date and time:	

At no time should an individual teacher/member of staff or school take photographic evidence of any injuries or marks to a child's person, the body map below should be used. Any concerns should be reported and recorded without delay to the appropriate safeguarding services, e.g. Social Care direct or Police.

When you notice an injury to a child, try to record the following information in respect of each mark identified e.g. red areas, swelling, bruising, cuts, lacerations and wounds, scalds and burns:

- Exact site of injury on the body, e.g. upper outer arm/left cheek.
- Size of injury - in appropriate centimetres or inches.
- Approximate shape of injury, e.g. round/square or straight line.
- Colour of injury - if more than one colour, say so.
- Is the skin broken?
- Is there any swelling at the site of the injury, or elsewhere?
- Is there a scab/any blistering/any bleeding?
- Is the injury clean or is there grit/fluff etc.?
- Is mobility restricted as a result of the injury?
- Does the site of the injury feel hot?
- Does the child feel hot?
- Does the child feel pain?
- Has the child's body shape changed/are they holding themselves differently?

Importantly the date and time of the recording must be stated as well as the name and designation of the person making the record. Add any further comments as required.

Ensure First Aid is provided where required and record

A copy of the body map should be kept on the child's concern/confidential file.



