



المدرسة المنذية العامة العليا الخاصة
Indian Public High School Private

POLICY NAME:	CHILD PROTECTION POLICY				
APPROVAL AUTHORITY:	PRINCIPAL	ADOPTED:	03.05.2017	REVIEWED:	03.10.2022
RESPONSIBLE EXECUTIVE:	CHILD PROTECTION OFFICER	REVISED:	15.4.2024	NEXT REVIEW ON:	
RESPONSIBLE OFFICE:	CHILD PROTECTION UNIT	AVAILABLE:	IN THE LIBRARY, WEBSITE, NLP		

DISTRIBUTION LIST: -

- Principal
- Vice Principal
- Supervisors
- Academic staff
- Admin staff

CHILD PROTECTION TEAM & CONTACT DETAILS

SI No.	Name	Designation	Phase	Contact detail
1	Ms. Shaima Fathima	Child Protection Officer	Whole school	Counsellor@iphsrak.com
2	Ms. Margina Selvaraj	Vice Principal	Whole school	vice-principal@iphsrak.com
3	Ms. Shammy Santhosh	Headmistress	Grade 2-8	primarys@iphsrak.com
4	Ms.Zweena Fathima	Supervisor- KG & Grade1	KG & Grade 1	kgs@iphsrak.com

ALTERNATIVE REFERRAL POLICY:

In an emergency situation for the safety and protection of a child, it is expected from the person handling the situation to make immediate referral to any member of the child protection team or to the senior leadership team.

Introduction:

The health, safety and well-being 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 committed by a parent, Staff 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 Child Protection Team. If the threat is immediate or ongoing it will be reported to the appropriate local safeguarding authorities as set in place by the UAE.

There are 4 major areas that can create long term negative effect on children:

1. Child abuse: Every action that would lead to the harm of the child
2. Child neglect: Failure of the parents to take necessary actions to preserve the child's life and needs
3. Violence against children: use of force against any child by any one that would lead to harm
4. Child pornography: child is shown in a disgraceful manner in a sexual act or sexual show

Purpose

The safeguarding of children and young people from harm is the highest priority. Our students have a right to feel safe and protected from significant physical and emotional harm both inside and outside of school. This policy is a crucial part of promoting the welfare of our students; it is designed to inform our staff regarding the signs of child abuse and to equip them with the knowledge 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.

Aims

We aim to safeguard and promote the welfare of children at the school.

This is in compliance with:

- UAE Federal Law NO. 3 of 2016 on Child Rights
- UAE Federal Law No. 3 of 1987 on Penal Cod
- To ensure effective communication between all staff when dealing with child protection issues.
- To inform all parties of the correct procedures to use in the case of a child protection issue.

Legal Requirements in the UAE:

- Crimes of abuse and penalties are defined in Federal Law (3); which was updated in June 2016 to include the Child's Rights Law. Updated article will be provided when available. Below are the specific articles pertaining to each type of abuse as listed in the previous Federal Law (3).

- **-Physical Abuse Crimes: Articles 336-343**
- **-Sexual Abuse Crimes: Articles 354, 356, 358, 363, 364**

***Article 362 pertains to the distribution of drawings, photos, films**

- **-Emotional Abuse Crimes: Articles 351, 352, 372-374**
- **-Neglect: Articles 348-350**

Child Protection procedures: When a student is exposed to any form of severe abuse, the school child protection officer, after collecting data and taking the necessary measures to protect the child, contacts the Child Protection Department and reports the case.

ROLES AND RESPONSIBILITIES

Principals will:

- Comply with the provisions of this policy.
- Every private school shall publish a Child Protection and Safeguarding policy to protect students from any abuse and neglect provided it meets the minimum requirements of what is included in this policy and does not contradict any of its provisions.
- Ensure that procedures to prevent situations that could lead to the abuse or neglect of students are in place and understood by all school staff and leaders.
- Ensure the supervision of students at all times while in school's care.

- Ensure that there is priority emphasis within the school on the protection of the students and for taking immediate actions when there is suspicion of cases of student abuse or neglect.
- Ensure that students can safely report their concerns about abuse and/or neglect without fear of retribution or punishment.
- Ensure that staff and others can safely report their concerns about the potential exposure of any student to abuse and/or neglect without fear of retribution or punishment.
- Gain views from students and parents regarding security and protection within the school.
- Immediately report any case of potential abuse and/or neglect of students as stated by this policy.
- Ensure that all staff and administrators targeted for student protection training are fully attend and participate in all training sessions.
- Conduct orientation sessions for parents/guardians upon student registration or enrollment and at the start of every school year to promote this policy and to inform them of their roles and responsibilities, and their rights and duties.
- Immediately suspend any staff member who is suspected of an offence involving student abuse and/or neglect on a temporary basis until the suspicion is adjudicated

Child Protection Team Will:

- Implement the child protection policy and procedures.
- Encourage good practice by promoting and championing the child protection policy and procedures.
- Monitor and review the child protection policy and procedures to ensure they remain current and fit for purpose.
- Regularly report to the Management/Committee/Board.
- Raise awareness of the Code of Conduct for working with children to parents/guardian, adults and children.
- Challenge behavior which breaches the Code of Conduct.
- Keep abreast of developments in the field of child protection by liaising with the Child Protection Officer, attending relevant training or events.
- Organize appropriate training for all adults working/volunteering with children in the club.

- Establish and maintain contact with local statutory agencies including the police and social services.
- Respond appropriately to disclosures or concerns which relate to the well-being of a child.
- Maintain confidential records of reported cases and action taken.
- Where required liaise with the Child Protection Officer and/or statutory agencies and ensure they have access to all necessary information

All School Staff will:

- Report a suspected case of abuse and/or neglect upon immediate discovery x Supervise students at all times while in school's care.
- Understand this policy to address suspected or alleged student abuse or neglect cases.
- Attend and participate in mandated student protection training.

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 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.

Specific responsibilities of the HR department and Security

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

- A declaration signed by the prospective employee on any application form and/or contract that s/he has not been convicted or undergoing court or disciplinary proceedings for any offence involving child abuse and/or breach in exercising a duty of care for children.
- 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.

Parents/Legal Guardians will:

- Cooperate with the school administration and staff, answer all inquiries related to the student's behavior, academic performance and respond to their feedback and guidance.
- Attend all scheduled school parent meetings.
- Communicate any concerns, observations, or changes in their child's behavior to the school administration or to the concerned school staff.

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.
- Regularly has unexplained injuries.
- Frequently has 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.

Recording disclosure:

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

- Make some brief notes as soon as possible after the conversation;
- Not destroy the original notes in case they are needed by a court;
- 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 bruising or other injury;
- Record statements and observations, rather than interpretations or assumptions.

APPENDIX A

DEFINITIONS:

a) **Neglect** - The persistent or severe neglect of a child which results in impairment of health or development

b) **Physical Abuse** - Actual or likely physical injury to a child, or failure to prevent physical injury or suffering

c) **Sexual** – Actual or likely exploitation of a child by involvement in sexual activities without informed consent or understanding, or that violate social taboos or family roles

d) **Emotional** – Actual or likely severe adverse effects on the emotional and behavioral development of a child by persistent or severe emotional ill-treatment or rejection

e) **Potential abuse** – situations where children may not have been abused but where social and medical assessments indicate a high degree of risk that they might be abused in the future, including situations where another child in the household has been abused, or where there is a known abuser

f) **Bullying** - any persistent and uninvited behavior which insults, hurts or intimidates someone (includes cyber bullying).

Signs of possible abuse include: (These are not exhaustive or necessarily indicative of abuse).

a) **Neglect** – constant hunger or tiredness; frequent lateness or absence, poor personal hygiene, untreated medical problems; running away, stealing, low self-esteem

b) **Physical** - unexplained injuries/bruises; improbable or evasive excuses, untreated injuries; fear of treatment or medical help, fear of physical contact, fear of going home, over aggressive or defensive tendencies, fear of removing clothes, bites, lashes, facial injuries.

c) **Sexual** - Tendency to cling, tendency to cry, genital itching, acting 'like a baby', distrust of familiar adults, wetting and/or soiling, fear of undressing, throat infections, depression, fearful/panic attacks.

d) **Emotional** – Physical, emotional, developmental delay; over-reaction to mistakes; tearful, fear of losing, fear of parents being contacted, stealing, thumb-sucking, rocking, anxiety,

Munchausen Syndrome by proxy (If a parent of child deliberately fabricates or induces illness in that child). Signs may include; perceived illness, doctor shopping, enforced illness, fabricated illness, poisoning e.g. with salt, induced seizures, suffocation, bleeding, rashes, tampering with vomit/urine. Child may exhibit unusual or unnaturally prolonged illness; symptoms/signs have a temporal association with mother's presence, mother unusually at ease in hospital environment, multiple illnesses/similar symptoms in family, unexplained death of siblings.

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 Child protection team lead & to the Principal

APPENDIX C

Indian Public High School, Rasal Khaimah.

DISCLOSURE OF ABUSE FORM

Name of Person Making Allegation/Disclosure:

Time and Date:

Parent(s) Name and Contact Details:

Nature of Disclosure:

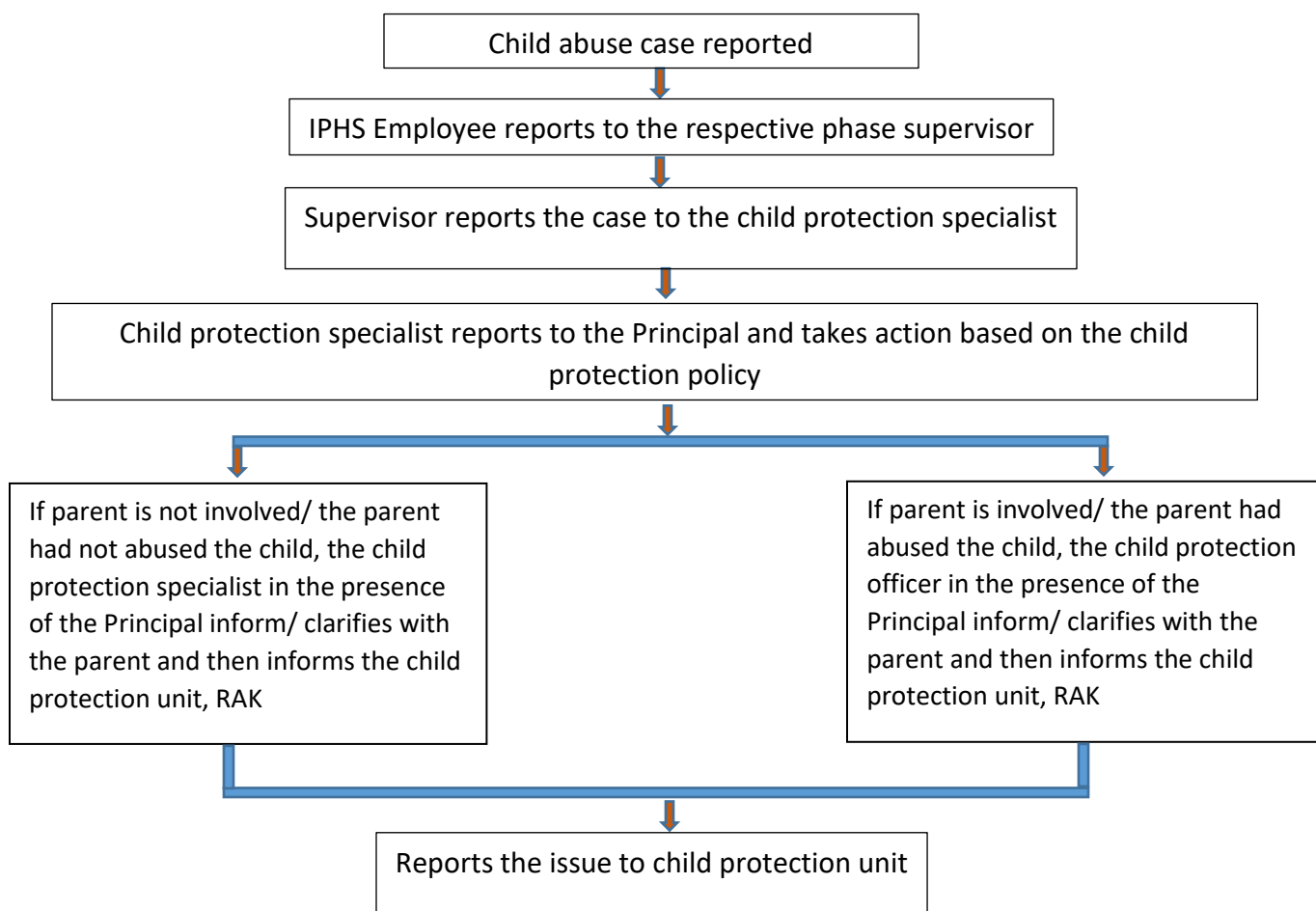
(Continue on separate sheet as required, recording as close to verbatim as possible)

Name and Signature:

Role:

Date and Time:

CHILD ABUSE- ESCALATION MATRIX



Child protection unit, RAK phone number: 80085
Ministry of Education phone number: 800 51115
Ministry of Education CPU Email: CPU@moe.gov.ae
Ministry of Interior Email: childprotection@moi.gov.ae