



CROWN AMERICAN PRIVATE SCHOOL
مدرسة كراون الأمريكية الخاصة

**CHILD PROTECTION &
SAFEGUARDING POLICY**
AY 2022/2023



Child Protection and Safeguarding Policy

Policy Details

Policy	Child Protection and Safeguarding Policy
Function	Physical Safety & Security of All Students
Audience	Students
Implementation	Social worker
Issued for	Students & Staff
Last Review	December, 2022
Next Review	December, 2023
Responsible SLT	School Principal

Vision, Mission and Core Values

Our Vision

At CAPS, we aim to be an exceptional international school which inspires students to discover their unique talents and prepare them to become responsible, innovative and creative leaders of the global community.

Our Mission

Our mission at CAPS is to provide a challenging, progressive, and inclusive American and International educational program that empowers all students by promoting intellectual curiosity, independence, and critical thinking.

Core Values

Loyalty | Creativity | Respect | Integrity | Inclusion



Child Protection and Safeguarding Policy

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 the 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 **social worker**. If the threat is immediate or ongoing, it will be reported to the appropriate local safeguarding authorities as set in place by the UAE.

Purpose

An effective whole-school child safety and protection policy is one which provides clear direction to staff and others about prevention of illness, prevention and treatment of sickness, the physical safety of children as well as the expected behavior when dealing with child protection issues. An effective policy also makes explicit the school's commitment to the development of good practice and sound procedures. This ensures that child protection concerns, referrals and monitoring may be handled sensitively, professionally and in ways which support the needs of the child.

Definition of Child Abuse

Child abuse refers to any act committed by a parent, guardian or any other person to a child under the age of 18, which results in injury to the child. These acts include situations where there is neglect, emotional, physical or sexual harm.

Aims

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 of the correct procedures to use in the case of a child protection issue.



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

Dealing with disclosure

If a student discloses that he or she has been harmed in some way, the member of staff should:

- Listen to what is being said without displaying shock or disbelief.
- Accept what is being said.
- Allow the child to talk freely.
- Reassure the child but not make promises that may not be possible to keep.
- Not promise confidentiality, as it might be necessary to refer the case to the appropriate authority.
- Reassure the pupil that what has happened is not their fault.
- Stress that it was the right thing to tell.
- Listen rather than ask direct questions.
- Ask open questions rather than leading questions.
- Not criticize the perpetrator.
- Explain what has to be done next and who has to be told.

Procedures

When a child reports abuse, the teacher will inform the **social worker** immediately. The teacher should also inform the **social worker** as soon as possible if there is reasonable cause to believe that abuse is occurring. The **social worker** will take initial steps to gather information regarding the reported incident. At this stage 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 **social worker** will then form a school-based response team to address the report. The response team may include the school doctor, nurse, teacher, and other individuals as the **social worker** 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 **social worker** in order to gain more information
- In-class observations of the child by the teacher, or administrator
- Meetings with the family to present the school's concerns
- Consultation with local authorities

Handling complaints

- Complaints of child abuse will be dealt with by the social worker and a report will be submitted to the principal.
- Any complaint of child abuse by school staff should be referred to the principal.
- Complaints and concerns of a child protection nature must be dealt with in accordance with school child protection procedures. For example, evidence of: inappropriate online relationships; a child watching pornography or any '18' films on a regular basis; online/digital bullying, harassment or inappropriate image sharing etc.
- Complaints procedure will be informed to students and parents.

Responsibilities of the whole school staff

- There is a named person(s) in our school who is the DCPO (Designated Child Protection Officer), CAPS Principal but has delegated this responsibility to the social worker.
- 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 are expected to attend regular and relevant professional development sessions.
- All staff are 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 are 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.

Specific responsibilities of the school doctor/nurse

The school doctor/nurse 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 can provide positive encouragement to the child, liaise with family members, and 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.

Roles and Responsibilities

This policy applies to all staff, volunteers and visitors to CAPS including school administration, bus drivers, cleaners and classroom assistants and security.

The staff at CAPS have a responsibility to promote the safety and well-being of our students. All staff must report any suspected incidents of child abuse to any one of the Designated Child Protection Officer (DCPO).

The DCPO:

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

Relevant legislation or authorities

This Policy is underpinned by the fundamental principle of the United Nations Convention of the Rights of the Child (UNCRC) 1989 of which the United Arab Emirates (UAE) ratified



on the 3rd January, 1997 along with the UAE local laws (the Emirates Human Rights Association have launched a Federal Law, the Child Rights Law, which is to be established December, 2014).

School Commitment-Recruitment, Training and Selection

The school safer recruitment procedures will be followed for all staff employed by the school. 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. They will be required to give evidence of their qualifications. At least one person on an interviewing panel must have completed safer recruitment training

staff will be provided with a copy of the Child Protection and Safeguarding Policy and code of behavior and will be required to sign a document certifying that they have read it and agree to abide by its contents.

Policy Review

This policy is to be reviewed annually, though any deficiencies or weaknesses in children protection arrangements will be remedied without delay. The Principal and CEO will undertake an annual review of the school's Child Protection/ safeguarding policies and procedures and of the efficiency with which the related duties have been discharged.

SCHOOL CONTACT DETAILS:

School Number: 0507442925

Hot Line: 0507442860

Social Worker: 0564100923

SUPPORT:

- **socialworker@crownamerican.ae; social worker official email.**



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
- Overreaction to mistakes
- Fear of new situations
- Inappropriate emotional response to painful situations
- Neurotic behavior (e.g., 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'
- Overreacting to criticism
- Have outbursts of anger/irritability



APPENDIX B

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 Principal.



APPENDIX C

Crown American Private School

All forms from MOE should include:

- Name of Person Making
Allegation/Disclosure
- Time and Date
- Parent(s)' Name and
Contact Information
- Details of Disclosure