Child Protection and Safeguarding Policy

Rationale

The purpose of the Safeguarding Policy is to provide clear direction to children, staff and any visitors to Arcadia School about expectations, procedures and practice in relation to all safeguarding matters. All adults working at the school are aware of their responsibility to safeguard and promote the welfare of every pupil and there is a positive commitment to ensure the satisfactory development and growth of every child. This policy makes explicit the commitment to the development of good practice in order that all safeguarding issues may be handled sensitively, professionally and in ways that support the needs of the child.

Aims and Objectives

We are committed to:

- Supporting the children and adults of Arcadia School to feel safe at all times
- Ensuring all adults who have contact with pupils have received appropriate checks and have been adequately trained and recruited using safe recruitment methods
- Raising awareness of child protection issues and equipping children with the skills needed to keep them safe
- Safeguarding procedures are understood and adhered to at all times by everybody in school
- Developing and implementing procedures for identifying and reporting cases, or suspected cases, of abuse
- Supporting pupils in school who may be a victim of abuse
- Establishing a safe environment in which children can learn and develop

Arcadia School believes in keeping children safe at all times which is achieved by high-quality leadership and management that makes safeguarding a priority across all aspects of a school's work. We ensure that we have designated members of staff for child protection who have received appropriate training and support for the role and we have a nominated Governor for Safeguarding.

We will ensure that:

- Stringent vetting procedures are in place for staff and other adults to ensure suitability to work with children including robust arrangements for site security, background checks of all adults working in school and appropriate procedures expected of all visitors
- Safeguarding practice and procedures are in place to ensure that child protection arrangements are known and accessible to everyone, allowing pupils and adults aware of who they can talk to if they are worried and which procedures they should take
- Maintain thorough communication systems with up-to-date information records that can be accessed and shared by those who need it, adhering to confidentiality where expected
- A high priority is given to staff training in all safeguarding areas, extending expertise widely and building internal capacity to handle sensitive issues and situations
- Teachers deliver a curriculum that promotes safeguarding, teaching pupils how to protect themselves from harm and how to take responsibility for their own and others' safety. Pupils will take part in health education lessons to help learn how to keep themselves safe.

We expect courteous and responsible behaviour by the pupils, enabling everyone to feel secure and well-protected and have developed well thought out and workable day-to-day arrangements to

protect and promote pupils' health and safety. The school will maintain rigorous monitoring of child absence with appropriate follow-up actions to ensure that pupils attend regularly and are monitored accordingly.

The school will support its pupils through:
- The content of the curriculum
- The school ethos, which promotes a positive, supportive and secure environment and gives pupils a sense of being valued
- School policies, which are aimed at supporting vulnerable pupils in the school. The school will ensure that pupils know that certain types of behaviour are unacceptable.

Staff Roles and Responsibilities
The Designated Safeguarding Lead (DSL) at Arcadia School is:
Kephren Sherry, kephren.sherry@arcadia.sch.ae

The Designated Safeguarding Lead Governor is:
Navin Valrani, navin.valrani@arcadia.sch.ae

The DSL will:
- Update his/her training every two years
- Ensure the school's Child Protection Policy is updated and reviewed annually, working with the designated Governor for child protection
- Keep confidential, detailed, accurate, secure written records of referrals /concerns
- Make themselves known to all staff, volunteers and governors (including new starters and supply teachers)
- Ensure each member of staff has access to and is aware of the school's Child Protection & Safeguarding Policy and associated procedures. This is also essential in respect of any members of staff who work part time or work with more than one school, such as peripatetic music teachers
- Act as a source of advice
- Ensure prompt and appropriate contact is made as required with child care agencies and police as necessary
- Ensure the curriculum and assemblies include teaching about safeguarding, e-safety
- Ensure that any new or key messages are passed to other staff, volunteers and governors

School Environment
The risk of the physical environment of the school must be considered and everything possible done to minimise the risk to children.

Social Media
Staff should read and abide by the staff code of conduct at all times. Staff may not communicate with students via social media and must be aware of UK regulations on 'breach of trust' and that relationships with any students are not permitted.

Staff Recruitment
In order to protect children, Arcadia has strict procedures for appointing staff. These are contained in a separate policy, which is regularly reviewed and updated. All local staff undergo a local police check.

All expatriate staff have to provide a police check from the country they are coming from as well as a DBS check.

Staff should be aware of the guidance from the DfE on disqualification by association with effect from February 2015.

Safeguarding Procedures

Safeguarding procedures following an allegation: **RECORD & REPORT**

- **Make a note immediately** of what has been said or observed, date, time and sign using pen
- Later this can be added to the My Concern portal but original notes should be kept
- DO NOT use prompts or ask leading questions. Ideally try to have a second person listening in if a person/child is making a disclosure. (Never promise a child to keep a secret).
- **Report** the incident to the designated safeguarding lead in school (the Head of Primary) using My Concern
- Share with school nurse in order to keep health records up to date, if appropriate
- Where appropriate, share your actions with the child and parent. A team around the child meeting may be helpful involving all of the support available.
- If the allegation is made about a member of staff, parent or anyone else follow the procedure
- If the allegation is made about the Head of Primary, report to a member of the school board

If a child arrives with a bruise or injury of any kind this should always be documented and school nurse informed. **Record:** time noticed, child's explanation, exact area, appearance of injury (factual colours, size), a body form can be completed, if appropriate school nurse to contact parents, in some situations home safety advice given.

Be child centered! Always keeping the child's safety in mind throughout this procedure is paramount.

Useful Numbers

- Emergency services: **999**
- Arcadia Primary School: **04 552 2600**
- School Nurse: **050 899 2063**/Clinic extension **223**
- Child Protection Agency Dubai/Social services: **800 2121/ 04 429 988**
- Emergency referrals social services: **800 988**
- UAE Ministry of Interior: **+971 2 333 3999**, Email: childprotection@moi-cpc.gov.ae

Appendix (i)

Types of Abuse and Neglect

All school staff should be aware that abuse, neglect and safeguarding issues are rarely standalone events that can be covered by one definition or label. In most cases, multiple issues will overlap with one another.

Abuse: A form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Children may be abused in a family or in an institutional or

community setting by those known to them or, more rarely, by others (e.g. via the internet). They may be abused by an adult or adults or another child or children.

Physical Abuse: A form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

Emotional Abuse: The persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

Sexual Abuse: Involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for Some children and young people are trafficked into or within the UK for the purpose of sexual exploitation. Sexual exploitation can also happen to young people in gangs.

Neglect: 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. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide adequate food, clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate care-givers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Signs of Possible Child Abuse
All staff must be alert to signs of possible abuse and know to whom to report any concerns or suspicions. Individual indicators of abuse may not be particularly worrying in isolation, but in combination, they can suggest that there is serious cause for concern.

Indicators of Physical Abuse
Bruises
- To the eyes mouth or ears
- Fingertip bruising (grasp mark)
- Bruises of different ages in the same place
- Outline bruises (prints of hands, belts shoes, etc.)

- Bruises without obvious and verifiable explanations

Burns, Bites and Scars
- Clear impressions of teeth (more than 3cm across unlikely to have been made by a child)
- Burns or scalds with clear outlines
- Small round burns which may be from cigarettes
- Large number of different aged scars
- Unusual shaped scars
- Scars that indicate the child did not receive medical treatment

Other Injuries
- Poisoning, injections, ingestion or other applications of damaging substances including drugs and alcohol
- Female genital mutilation,(FGM) including female circumcision

Indicators of Neglect
These include children who are:
- Not receiving adequate food
- Exposed to inadequate, dirty and or cold environments
- Abandoned or left in circumstances without appropriate adult supervision which are likely to endanger them
- Withheld from appropriate medical advice or treatment

Indicators of Sexual Abuse
- Sexually transmitted diseases
- Recurrent urinary infections
- Genital and rectal itching and soreness
- Unexplained bleeding and discharges
- Bruising in genital region
- Sexual play/masturbation that is inappropriate to a child's age, development and circumstances
- Sexually abusive behaviour towards other children, particularly those younger and more vulnerable than themselves
- Unexplained pregnancy

Indicators of Emotional Abuse
- Abnormally passive, lethargic or attention seeking behaviour
- Specific habit disorders, e.g. faecal smearing, excessive drinking, eating unusual substances and self-harm
- Severely delayed social development, poor language and speech development not otherwise explained
- Excessively nervous behaviour such as rocking or hair twisting
- Low self esteem

The following indicators may occur to any children being abused but are particularly important in cases of sexual or emotional abuse where outward physical signs may not be present:
- Involuntary passing of urine
- Sleeping and eating disturbance
- Recurrent abdominal pains

- Recurrent headaches
- Social withdrawal
- Restlessness and aimlessness
- Inexplicable school failure
- Poor trust and secretiveness
- Indiscriminate and careless sexual behaviour
- Drug abuse
- Self-mutilation and other forms of self-harm
- Hysterical fits, faints, etc.

Policy Implemented: September 2016

Policy Responsibility: Kephren Sherry, Head of Primary

Policy Review Date (1): September 2017

Policy Review Date (2): September 2018

Policy Review Date (3): October 2019

Board Review Date: October 2019

Policy Links:

- Health and Safety
- Teaching and Learning
- Health and Safety
- Anaphylaxis and Allergies- nut free school
- E- safety
- Recruitment procedure
- Nurse Clinic procedure
- Health examination procedure
- Emergency situations procedure
- Diabetes management protocol
- Head injury procedure
- Head lice protocol
- Health eating- Snack and lunch box requirements
- Oral health

Appendix (ii)

Incident Reporting Form

The form is used to report any child protection concerns or accident/injury cases if My Concern is not accessible (incidence should be accurately reported and shared with the Designated Safeguarding Lead).

Child's Name	
Class	
Reported by	
Date	
Details of the Incident or Concern	
Present at Time	
Reported to	
Level of Concern	☐ 1 ☐ 2 ☐ 3 1 - High concern, immediate action required 2 - Concern/incident to be monitored 3 - One off incident

Action Taken	
Signature	
Date	