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Child Protection and Safeguarding Policy

Details

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1. Purpose

Taaleem Holdings P.J.S.C. (hereafter referred to as "Taaleem" or "Company"), believes the welfare of children is paramount and all children have an equal right to protection from abuse regardless of their age, culture, ability or disability, gender, language, racial origin, or religious beliefs.

In line with this, Taaleem is committed to safeguarding and promoting the welfare of children and young people in all our schools and expects all our employees, governors, volunteers, any contractors/consultants and partner agency staff to share this commitment.

The purpose of this policy is to create accountability and expectations in our schools by:

- Raising awareness and educating our staff, students and community about child rights and protection.
- Protecting children from abuse, neglect, exploitation, and harm. This includes physical abuse, emotional abuse, sexual abuse, and any form of maltreatment.
- Creating a safe school environment by establishing boundaries and good practices to create a setting where children feel safe, respected, and supported.
- Setting clear procedures and responsibilities by which staff identify, report, and respond to concerns about a child's safety including defining the roles, responsibilities and training of staff, volunteers, and stakeholders.
- Promoting accountability and transparency by providing a framework for how safeguarding issues are managed, ensuring consistent and fair treatment, and helping to prevent cover-ups or mishandling of concerns.
- Complying with the relevant legal and regulatory requirements.
- Establishing monitoring systems to ensure policy effectiveness.

2. Scope

This policy applies to:

- All employees, governors, contractors/consultants and volunteers at Taaleem.
- Any individual working with children or vulnerable adults under our care.
- All visitors, partners, and stakeholders interacting with Taaleem.

The policy will be regularly reviewed in line with the Group's policy governance framework and should be read in conjunction with other Taaleem-wide and school policies in place such as (but not limited to):

- Occupational Health and Safety Policy
- Safer Recruitment Policy
- Positive Handling Policy
- Intimate Care Policy
- Whistleblowing Policy
- Education Visits Guidance
- Behaviour Management Policy
- Acceptable Use of Technology Policy
- Attendance & Punctuality Policy
- Code of Conduct for Staff
- School Evacuation Response Procedures
- Anti-Bullying Policy
- Lone Working Policy
- Online Safety Policy

- Artificial Intelligence in Education Policy
- Security Standard Operating Practice (SOP)

3. Legislation And Guidance

3.1. Legislation around child protection in the UAE is underpinned by the United Nations Convention on the Rights of the Child (UNCRC).

3.2. For the purpose of this Policy, reference has been made to:

a) National Child Protection Policy in Educational Institutions in United Arab Emirates (2022).
b) UAE Federal Law No. (3) of 2016 regarding the Child Rights Law (Wadeema) and its amendments.
c) UAE Cabinet Resolution No. (52) of 2018 concerning the executive regulation of the Wadeema's Law.
d) Keeping Children Safe in Education (2026).
e) Working Together to Safeguard Children (2026).
f) Federal Decree-Law No. 26/2025 on Child Digital Safety
g) UAE Child Custody Law 2026
h) Federal Decree-Law No. 25 of 2025 on Civil Law

4. Definitions

4.1 **Designated Safeguarding Lead** - For the purposes of this policy, the term *Designated Safeguarding Lead (DSL)* is used for consistency. Within individual schools or Emirates, this role may also be referred to as the *Child Protection Coordinator (CPC)* or *Child Protection Officer (CPO)*. All references to DSL in this policy should therefore be understood to encompass CPCs and CPOs, with the same responsibilities, authority, and accountability for safeguarding and child protection.

4.2 **Child** – Any person born alive, who has not yet reached 18 years of age.

4.3 **Adolescent** – Any person who has reached 10 years and has not yet reached 20 years of age.

4.4 **Child at Risk of Abuse and Neglect** – includes, but is not limited to poverty, addiction or mental illness in the child's family, high-conflict parental divorce or imprisonment of a parent.

4.5 **Vulnerable Adult** – An individual who, due to age, disability, or other circumstances, is at risk of abuse or neglect.

4.6 **Abuse** – Includes physical, emotional, sexual, and neglect-based harm.

4.7 **Safeguarding**

4.7.1. The term safeguarding does not have a direct translation in several languages, including Arabic. For this policy, safeguarding is defined as:

a) taking timely preventive measures in all situations where a child's physical, psychological, moral, or mental wellbeing is threatened or at risk.

b) protecting all aspects of the child's life that contribute to a healthy and sound development, including their physical, psychological, moral, mental wellbeing and social safety both within and outside the school, including online.

c) listening to and representing the voice of the child, including where the child communicates through observation, behaviour, alternative communication systems, visual supports, trusted adults or other communication methods.

d) ensuring a coordinated approach by collaborating with relevant government entities to safeguard the wellbeing of any child facing abuse or neglect.

e) taking action to enable all children to have the best outcomes.

4.7.2. Safeguarding is wide in scope and takes into consideration keeping children safe in a range of activities.

4.8 Child Protection

4.8.1 Child protection is a crucial aspect of safeguarding and ensuring the wellbeing of children. It involves taking action to protect specific children who are at risk of or experiencing abuse and/or neglect.

4.8.2 Child protection extends to harm which may occur in various environments, including, but not limited to educational institutes, homes, communities, and online.

4.8.3 Effective safeguarding requires practitioners to consider economic, social, and cultural factors affecting children and families. Ensuring protection relies on coordinated efforts among government entities, the private sector, non-profits, and active community participation.

4.8.4 Whilst there are no absolute criteria on which to rely when judging what constitutes significant harm, the following factors should support professional judgement and consultation with relevant authorities where required:

a) The degree and extent of physical harm
b) The duration and frequency of abuse and neglect
c) The extent of premeditation
d) The presence and degree of threat, coercion, sadism

4.8.5 Sometimes, a single traumatic event may constitute significant harm (e.g., a violent assault, suffocation or poisoning), but more often, it is the consequence of a compilation of significant events (both acute and long-standing) which interrupt, change or damage the child's physical and psychological development.

4.8.6. Staff must not carry out investigations, unless specifically asked to do so (by DSLs) or make judgements. The information in these procedures must be read in the context of the specific advice offered herein, in terms of how to act in cases where safeguarding and/or child protection issues are suspected.

4.8.7. A **low-level concern** is any behaviour by an adult working in or on behalf of the school that is inconsistent with the Staff Code of Conduct, even if it does not meet the threshold for harm. Such concerns may indicate that professional boundaries have not been maintained and should be reported, recorded, and reviewed to promote a safe and transparent safeguarding culture.

4.8.8. An **allegation against a member of staff** is where a person is reported to have behaved in a way that has harmed, or may have harmed, a child; possibly committed a criminal offence against or related to a child; or behaved towards a child in a way that indicates they may pose a risk of harm to children.

5. Prevention

5.1 Prevention at Taaleem ensures all reasonable measures are taken to minimise the risk of harm to children's welfare, by:

5.1.1 Appointing DSL(s) and DDSL(s).

5.1.2 Ensuring safer recruitment training is completed and best practice is followed as per the Taaleem Safer Recruitment Policy (Taaleem_HR-026).

5.1.3 Ensuring through training that staff are aware and committed to the Policy and Procedures for Safeguarding and Child Protection as required by the National Child Protection Policy in Educational Institutions in the United Arab Emirates (2022).

5.1.4 Adhering to a zero-tolerance approach to abuse and ensuring staff are clear about the important role they play in preventing it.

5.1.5 Adopting a supportive, open and accepting attitude towards children so they feel valued, listened to and respected.

5.1.6 Establishing a positive and secure environment, in which children can learn and develop. This includes ensuring school site security is adhered to, and unauthorised individuals are not able to gain access to the site. Only authorised individuals will be permitted onsite. All individuals accessing the school site must wear a lanyard, the colour of which is determined by their role or designation (for example, staff member, parent, or visitor). Parent lanyards are issued in accordance with the Security SOP and will normally be provided to parents who require regular authorised access to the school site. However, a parent lanyard may not be issued where there are concerns that access could compromise site safety or security. This may include circumstances where:

- a parent is a non-custodial parent and does not have a legitimate reason to access the school site on a regular basis;
- there are safeguarding concerns or legal restrictions relating to parental access;
- a parent's conduct has been assessed as presenting a risk to the school community, including aggressive, abusive, or threatening behaviour towards staff, students, or other members of the community.

In such circumstances, where attendance onsite has been pre-arranged for a specific purpose (for example, a Parent Teacher Conference or formal meeting), the individual may be issued with a visitor lanyard and access will be managed in line with school safeguarding and security procedures.

- For nursery settings (0 to 4 years), this includes enhanced supervision arrangements during arrivals, departures, sleep routines, transitions between learning areas, outdoor play, toileting, and intimate care procedures. Age-appropriate staff-to-child ratios must be maintained at all times due to the increased vulnerability of younger children. Nursery settings must also ensure clear procedures are in place for authorised collection, custody arrangements, emergency contacts, and late collection, so that children are only released to approved adults.

5.1.7 Including in the curriculum activities and opportunities for Personal, Social Health and Economic (PSHE) education which equip students with the skills they need to stay safe from abuse and help them develop realistic attitudes to the responsibilities of adult life.

In nursery settings, safeguarding is taught through age appropriate experiences that develop communication, body awareness, emotional regulation, personal boundaries, safe relationships, and the ability to seek help from trusted adults.

5.1.8 Providing pastoral support which is accessible and available to all students and ensuring that students know who they can talk to about their concerns both within and beyond school.

5.1.9 Always ensuring ongoing quality assurance and robust governance of safeguarding and child protection.

5.1.10 Providing displays of Appendix 1 in prominent areas of the school to ensure it is accessible to students, staff and parents.

5.1.11 The publication of the Safeguarding & Child Protection Policy on school external websites.

5.1.12 As part of the admissions process for all new students, a safeguarding reference request will be sent to the student's previous school (via OpenApply where possible). Where safeguarding information is disclosed by the previous school, the Admissions Manager must notify the Designated Safeguarding Lead (DSL) without delay and ensure that all relevant documentation is shared securely.

The DSL will review the information received and determine any appropriate safeguarding actions required prior to, or following, the student's enrolment. This may include implementing monitoring arrangements, liaising with relevant staff, undertaking a risk assessment, or establishing an appropriate support plan.

Where current safeguarding concerns are identified, the student will be monitored in accordance with the school's safeguarding procedures. Where concerns are historical and no longer active, a record of the information received and any actions taken will be maintained on CPOMS to ensure an accurate safeguarding chronology is available should future concerns arise.

5.1.13 Schools should make reasonable adjustments to safeguarding processes, communications, training materials and support arrangements to ensure that all students, including Students of Determination, English Language Learners (ELLs) and students with additional needs, are able to access safeguarding support and participate meaningfully in safeguarding processes.

6. Protection

6.1 At Taaleem, all schools are expected to ensure appropriate actions are taken to address concerns about the welfare of a child or children, working with agreed local policies and procedures in full partnership with other local external agencies including KHDA, ADEK, MoE, Community Development Authority (CDA – Dubai)/ Family Care Authority (FCA – Abu Dhabi) and where necessary the Police. This may include:

6.1.1 Sharing information about concerns with agencies that need to know and involving children and their parents/carers appropriately.

6.1.2 Monitoring children known or thought to be at risk from harm and contributing to assessments of need and support packages for those children.

6.1.3 In the cases of domestic abuse or violence referring the cases to KHDA/ADEK/MoE and the CDA/FCA (and any other competent authority as required under the most current and applicable UAE laws and regulations). Staff should remain aware that a child is a victim of domestic abuse in their own right if they see, hear or experience the effects of domestic abuse and are related to either victim or perpetrator of the abuse, or either the victim or perpetrator of the abuse has parental responsibility for that child.

6.1.4 Safeguarding teams should assess any child protection referral through an anti-racist, anti-discriminatory and culturally aware framework, applying knowledge of faith, beliefs and family cultures that can positively and negatively impact children, whilst maintaining a core focus on the safety and wellbeing of the child.

6.1.5 Use of 'physical intervention': There are limited circumstances when it is appropriate for staff in schools to use 'physical intervention to safeguard children. The term 'physical intervention' covers the broad range of actions used by staff that involve a degree of physical contact to control

or restrain children. This can range from guiding a child to safety by the arm, to more extreme circumstances such as breaking up a fight or where a child needs to be held to prevent violence or injury. The use of physical intervention is proportionate to the risk in the immediate circumstances considering the age, understanding, and competence of the individual student. Refer to the Positive Handling policy for further details. Any use of physical intervention must be recorded and reviewed in accordance with the Positive Handling Policy.

6.1.6 In nursery settings, staff must recognise that babies and young children may be unable to verbally communicate concerns. Safeguarding assessments must therefore consider non-verbal communication, attachment behaviours, developmental changes, play themes, and changes in eating, sleeping, or toileting routines.

6.1.7 Nursery settings must ensure that all intimate care procedures, including nappy changing, toileting, and supporting children with dressing, are carried out in a way that preserves children's dignity, privacy, emotional wellbeing, and safety, in accordance with the Intimate Care Policy.

7. Signs and Symptoms of Abuse and Neglect

The following categories form the overarching criteria for registering a safeguarding concern, whether through the school's safeguarding portal or by completing a Safeguarding Concern Form:

1. Neglect
2. Physical abuse
3. Sexual abuse including harassment and exploitation
4. Emotional abuse (which includes verbal abuse e.g. criticism, name calling and belittling)
5. Domestic abuse (including intimate relationship/teenage relationship abuse)
6. Criminal exploitation
7. Child missing from education for a prolonged period of time
8. Self-harm or abuse
9. Suicidal ideation
10. Eating disorders

Babies and young children may also display safeguarding concerns through:

1. Developmental regression
2. Excessive clinginess or unusual withdrawal
3. Changes in appetite or sleeping patterns
4. Fear or distress around particular adults
5. Delayed development without an identified cause
6. Repeated unexplained injuries
7. Unusual or concerning play behaviours

Mental Health

Staff should be aware that mental health concerns do not automatically constitute a safeguarding concern; however, they may become a safeguarding concern where there is risk of significant harm to the student or others. If a child is struggling with their mental health, there are likely to be potential warning signs which could include:

- significant changes in behaviour
- ongoing difficulty sleeping
- withdrawing from social situations
- not wanting to do things they usually like, and
- physical signs of self-harm or neglecting themselves

Children missing education

Children being absent from education for prolonged periods and/or on repeat occasions can act as a vital warning sign to a range of safeguarding issues. Where children are not receiving education because they are persistently missing could be a possible indicator of neglect, abuse, exploitation or physical or mental ill health; it could constitute neglect in severe and sustained cases.

Infants & Toddlers

Staff working with infants should maintain a child-centred approach, ensuring that the child's needs and experiences are actively considered and represented in assessments and decision-making. This includes interpreting non-verbal and pre-verbal cues and observing interactions between the infant and their parents or carers. Infants may show signs of harm through:

- feeding or sleeping difficulties,
- changes in weight or development,
- unexplained injuries
- withdrawn behaviour

As part of daily safeguarding and well-being procedures within a nursery setting, every child receives a daily wellbeing observation upon arrival. The nurse observes each child's mobility, temperature, general physical appearance, and overall presentation. This helps identify visible injuries, signs of illness, or changes in the child's well-being at the start of the day. Where needed, staff speak with parents immediately and record any existing injuries or concerns from home. Additionally, during the first nappy change of the day, staff complete a discreet visual safeguarding check as part of the normal intimate care routine, looking for any unusual marks, injuries, or indicators of harm. This must be carried out respectfully, without unnecessary exposure, and in line with the Intimate Care Policy. Any concerns are recorded and followed up in line with nursery safeguarding procedures.

Parents are informed during registration and induction that these checks take place daily. They form part of our commitment to keeping children safe, promoting their well-being, and ensuring that all children in our care are monitored and supported from the moment they arrive.

Reference Section 12 - Reporting: These categories are further broken down for record keeping for DSL(s) to allocate in CPOMS. The system outlines the breakdown of each category, including sub-categories where applicable.

Reference Appendix 2: Potential Indicators of Abuse for further guidance.

8. Roles and Responsibilities

At Taaleem, everyone has a duty to safeguard children **always**. When concerned about the welfare of a student, staff must always act in the best interest of the student. Everyone at Taaleem has a responsibility for ensuring the welfare of students as prescribed below and all staff are mandated reporters under child protection legislation.

8.1 All Academic Staff will:

a) Ensure that they have read, understood, and will comply with all safeguarding and child protection policies and procedures, and provide acknowledgement either by signing this policy, submitting confirmation via Microsoft Forms, or through any other method determined by the school.

b) Undertake the appropriate level of training for their role at induction or within three (3) days of coming in contact with children and renew this annually. Refer to Taaleem Child Protection Training Policy (TAALEEM_EDUC-005).

c) Identify and know how to contact the safeguarding team at their school.
d) Ensure they have read, understood and will comply with the relevant UAE statutory guidelines and legislations.
e) Report any concerns they have in relation to a child as soon as is possible. For high or moderate risk cases (reference Appendix 7) reporting should be done immediately to the DSL directly and on CPOMS(ideally within 1 hour) or using the Safeguarding Concern Form (using the body map, if required). Low risk cases need to be recorded before the end of the working day on CPOMS or the Safeguarding Concern Form.
f) In nursery settings, staff must remain vigilant during all care routines, including feeding, sleeping, toileting, nappy changing, and transitions, as these provide important opportunities to identify potential safeguarding concerns.
g) Always uphold Taaleem's professional standards and those of the regulatory bodies.

8.1.1 All staff who have occasional or supervised contact with children (including school administration staff, volunteers, Individual Learning Support Assistants, Learning support Assistants, therapists, employees from partner organisations and contracted organisations) will**:**

a) Undergo safeguarding training level 1 within 3 working days of starting at the school, understand what is required of them if they have concerns and whom to report to. These staff must complete their refresher training annually during induction week.
b) Operations teams in all schools are responsible for providing evidence to confirm that all partner staff/contractors have been safely recruited with appropriate police checks undertaken before they commence working at a Taaleem school and this is recorded via a tracker or using the government portal required for approval (e.g. PASS). Operations Managers undertake bespoke L3 safeguarding training every two years.
c) All After School Activity (ASA) and Extracurricular Activity (ECA) providers will have to provide a safeguarding lead certificate for the designated member of their company and training certificates for all staff on site. Where partners/contractors do not have their own Safeguarding or Child Protection Policy, the Taaleem Policy will be read, understood and followed and verified through a signature or Microsoft form agreement. The exact requirements will form part of any contractual arrangements with relevant providers.
d) ILSAs, LSAs, therapists and other support personnel working directly with students are considered mandated reporters and must immediately report any safeguarding concern in accordance with this policy.

8.1.2 All staff must always maintain strict confidentiality, sharing information only with those who need to be involved, such as the DSL or DDSL. Details of safeguarding concerns or cases must not be disclosed to anyone who is not directly responsible for managing or supporting the matter.

8.1.3. All adults are responsible for following the procedures outlined in this policy when a disclosure is made including the school administration staff, cleaners, bus drivers, bus nannies, support staff, external agencies and external providers.

8.2. School Principal

8.2.1 The School Principal will ensure that the DSL(s) is effective in safeguarding children by providing appropriate support, oversight, and challenge in their role.

8.2.2 The school Principal will, including but not limited to, undertake the following responsibilities:

a) Ensure that local mapping of UAE legislation, guidance and supportive agencies is undertaken and added to this policy for the school specific areas.

b) Ensure DSL(s) have sufficient time, training, and resources to fulfil their role effectively, including providing supervision.
c) Offer day-to-day support and guidance to the DSL(s) as required.
d) Embed a whole-school safeguarding culture by ensuring all staff are fully trained, refreshed on time, and consistently apply safeguarding principles in daily practice.
e) Ensure that all staff, parents, contractors, consultants, and volunteers are made aware of, and understand, the school's safeguarding policies and procedures.
f) Ensure appropriate safeguarding cover is in place at all times during the absence of the DSL(s).
g) Encourage the promotion of student and parent voice in safeguarding through various means as determined by the school.
h) Work with the Taaleem Central Office (CO) Safeguarding Team to ensure safeguarding is dealt with, communicated appropriately and in a timely manner.
i) Liaise with the relevant authorities, when appropriate, on matters relating to the safety and wellbeing of students at the school.
j) Ensure safer recruitment procedures are followed and records maintained.
k) Support the development and continuous improvement of the school's safeguarding strategy and quality assurance processes.
l) Ensure regular safeguarding meetings are conducted using the headings and template provided in Appendix 13. The below outlines the minimum expectations:
    - Hold meetings with the DSL a minimum of twice per month, increasing frequency where safeguarding needs demand it.
    - Monthly with other school staff who have inputs into the school's safeguarding process such as the School HR Advisors, CO Head of HR - People Operations, the School IT Administrator, the School Nurse, Deputy Designated Safeguarding Leads etc.
    - Provide safeguarding updates at each School Governance meeting.
    - Consultation with regulatory authorities and parents when required.

8.3 Designated Safeguarding Lead (DSL)/Child Protection Officer (CPO)/Child Protection Coordinator (CPC) will:

a) Be fully conversant with this policy and follow the procedures outlined in it.
b) Ensure all staff are trained in the appropriate level of safeguarding according to their roles and responsibilities.
c) Maintain an up-to-date record of all safeguarding training, using an approved system (e.g., Blue Sky, StaffSafe, Teachpoint) or the manual Training Log (Appendix 14). The log must show completed training and expiry dates, remain accessible to HR advisors, and will be annually audited by the Head of Safeguarding as part of annual Taaleem reviews.
d) Ensure the Incident Management Process outlined in Appendix 6 is followed. However, if a high-risk safeguarding concern is identified, the process may be bypassed in the interests of the child's immediate safety. In such cases, the matter must be reported directly and without delay to the Head of Safeguarding and/or the Director of Education to guarantee immediate senior oversight and timely protective action.
e) Advise staff and offer support to those requiring support on safeguarding and child protection.
f) Decide upon the appropriate level of response to specific concerns about a child, referring to local guidance on thresholds and obtaining information on borderline cases. Responses may include discussions with parents, an assessment or referral to relevant external agencies.
g) Categorise, monitor, and address all safeguarding entries in CPOMS for students with safeguarding files or identified as 'at risk,' and close cases on a timely basis wherever possible. Where a concern remains open for more than one month, the DSL must record documented

justification in CPOMS. All ongoing cases must also be discussed and documented in safeguarding meetings to ensure regular review and accountability.

h) Ensure the school passes on relevant safeguarding information securely should a child transfer to a new educational provider, if permitted by law.
i) Develop effective working relationships with other agencies and services.
j) Be available to support staff, either in person or remotely (via video conferencing, school phone, or other secure methods), including during ECAs, student transport, and off-site school activities.
k) Take the lead role with the school IT Administrator in understanding, reviewing the filtering and monitoring of the school's online access.
l) Prepare and submit required reports, and ensure the school is represented at child protection conferences and Taaleem 'Job Alike' meetings.
m) Collaborate with external professionals and agencies to ensure children at risk are consistently monitored and appropriately supported.
n) Review safer recruitment compliance, in collaboration with HR, once a term to ensure all new starter and leaver entries are up to date. As part of this review, the DSL and cluster HR will also check a minimum of five randomly selected personnel files each term, covering staff, volunteers, and partner/agency staff, to confirm compliance as per the requirements of the Safer Recruitment Policy.

8.4 Deputy Designated Safeguarding Lead (DDSL) will:

a) In the absence of the DSL, act as the DSL (above).
b) Support the DSL in providing advice, guidance, and signposting for staff, parents, and - most importantly - children and young people.
c) Support the DSL in ensuring that child protection procedures are implemented consistently and that appropriate referrals are made in a timely manner where required.
d) Provide support for staff to carry out their safeguarding duties and support with the annual training for staff.
e) Support the DSL in creating and promoting professional networks and partnerships.
f) Attend safeguarding team meetings and Taaleem 'Job Alike' sessions as required.

Note: All school Principals, DSL(s) & DDSL(s) will be Safeguarding Level 3 trained during their induction or within 3 days of coming in contact with children. The training will be refreshed every 2 years or earlier due to regulatory changes. Reference the Taaleem Child Protection Training Policy (TAALEEM_EDUC-005).

8.5 Parents will:

- Provide for their child's physical and mental health needs.
- Ensure that basic needs of their children are met (a nutritious diet, education, safety etc.).
- Work collaboratively with the school.
- Always wear their lanyards when on school grounds.
- Update the school of any changes in the home environment that may lead to a potential safeguarding risk.

8.6 Guests will:

- Be aware of safeguarding procedures in the school.
- Use designated toilets for adults only.
- Report any concerns to a member of the safeguarding team immediately or ideally within 1 hour of becoming aware.
- Not take pictures of the students.

These expectations should be visibly displayed within schools and/or shared with visitors through QR codes, digital or physical displays, or made available in paper form.

9. Governance of Safeguarding

9.1 While the School Governing Body recognises that safeguarding duties remain the responsibility of the whole Governing Body (alternatively referred to as the Board of Governors), they have appointed a Safeguarding team at Taaleem Central Office (CO) to take specific responsibility. The Taaleem CO Safeguarding team comprises of:

a) The **Chief Education Officer**
b) The **Director of Education (or Cluster Director)**
c) **Head of Safeguarding**

9.2 Taaleem Central Office Safeguarding Team Responsibilities

9.2.1 The Taaleem CO Safeguarding Team will undertake annual or biennial training as appropriate for safeguarding and child protection requirements for governance, which will include safer recruitment as well. Safeguarding will be captured at every school Governance meeting through minutes and reports.

9.2.2 The role of the Taaleem CO Safeguarding Team includes, but is not limited to:

a) Ensure that all Taaleem schools implement the Safeguarding and Child Protection Policy and procedures, that these are known and understood by all staff, aligned with inter-agency requirements, and made accessible to parents.
b) Work with school DSL(s) to conduct an annual review during Taaleem internal school reviews, and a separate standalone audit (if required), to assess the effectiveness of safeguarding procedures, ensuring that any deficiencies are promptly addressed and quality assured.
c) Ensure all staff in the schools have received safeguarding training according to their roles and responsibilities within the timelines and that the training is refreshed annually.

9.2.3 The Taaleem CO Safeguarding team will review the Safeguarding and Child Protection Policy and procedures annually or sooner if practice or statutory changes require so.

9.2.4 The Taaleem CO Safeguarding Team will actively discuss the procedures and their implementation regularly at their bi-weekly Directors meetings.

9.2.5 The Taaleem CO Safeguarding Team will aim to utilise CPOMS Insights (both modules described in section 10 below) to review and analyse trends and patterns within available safeguarding data for schools.

9.2.6 Contribute to the ongoing quality assurance and strategic development of safeguarding across the Group, ensuring that targeted training programmes are provided where deficiencies are identified or in response to new government-level policy requirements.

10. CPOMS

10.1 StudentSafe (within CPOMS)

All Taaleem private schools, 'Dubai Schools', and Charter Schools will use CPOMS as the single, official platform for safeguarding reporting and case management. CPOMS will serve as the primary system for logging referrals, incidents, and safeguarding actions, ensuring a consistent and auditable record from the initial concern through to resolution. DSL(s) will oversee all entries, ensure timely escalation where required, and coordinate responses. Access to CPOMS will be role-based, with strict data protection, confidentiality, and data minimisation controls applied as per the Group's Data Protection Policy.

10.2 StaffSafe (within CPOMS)

StaffSafe is the dedicated platform for recording and managing staff welfare, safeguarding, and wellbeing concerns for our private schools and 'Dubai Schools'. Access will be role-based, with strict confidentiality and data protection controls applied. DSL(s) and School HR (under the direction and guidance of CO Education and HR functions and the Head of Safeguarding) will jointly oversee all staff-related entries, ensuring timely escalation where required, and coordinating with health, occupational health, employee assistance programmes, and external support services as appropriate.

StaffSafe will be used to capture:

- Disclosures
- Safeguarding concerns
- Welfare checks
- Incidents of workplace harassment or violence
- Mental health support needs
- Safeguarding investigations

Schools that do not have CPOMS StaffSafe will use alternative internal trackers to monitor and record these matters, in line with their respective requirements.

11. Training Requirements

All staff must receive safeguarding and child protection training appropriate to their role. At a minimum:

- **Level 1 Safeguarding Training** – mandatory for all staff with access to students, including support staff, volunteers, and contractors, refreshed annually.
- **Level 2 Training** – required for DDSL(s), Counsellors, School Nurses, and other designated safeguarding staff, renewed at least every two years.
- **Level 3 Training** – required for DSL(s), Principals, Directors and Central Office Safeguarding staff, refreshed every two years.

Staff working with children aged 0 to 4 years will complete nursery-specific scenario training to support the application of safeguarding knowledge in daily practice. Scenarios will include concerns identified during arrival, nappy changing, toileting, feeding, sleep routines, transitions, play, child handling and parent collection.

For further details on training requirements, please refer to the Taaleem Child Protection and Training Policy (TAALEEM_EDUC-005).

12. Reporting Procedures

12.1 Concerns

When reporting a safeguarding concern, staff are only able to access the general 'Safeguarding / Child Protection' category within CPOMS. All concerns must be logged under this category. The DSL will then review the report and, assign the incident to the High, Medium or Low category and where necessary, assign additional safeguarding categories.

A full list of these categories and their definitions can be found in the CPOMS Parent Categories and subcategories and is detailed below:

High	• Abandonment; • Attempted or threatened serious harm to self or others (including self-harm);

	• Child exploitation – criminal or sexual; • Domestic violence; • Eating disorders; • Factitious disorder imposed by another (FDIA); • Female Genital Mutilation; • Grooming of a child or child sexual exploitation; • Human trafficking; • Physical harm or life-threatening actions toward a child (e.g., poisoning, burning, violent shaking, or other acts causing serious injury); • Possessing, producing, or sharing sexual images of children (or any sexual images involving children); • Possession, use, or distribution of illegal substances (including drugs, alcohol or solvents); • Referral to an external agency (e.g., ADEK, KHDA, Police, CDA, FCA, or a mental health service); • Sexual assault or rape; • Suicidal ideation (thoughts or intent); • Unexplained injuries, frequent injuries, or injuries with concerning explanations; • Unsafe confinement (e.g., leaving a child unattended or confining them in a vehicle or other restricted space).
Medium	• Absent from education – persistent; • Anxiety-related behaviours observed in students; • Bullying, cyberbullying, and online threats/misuse; • Child labour; • Child on child abuse; • Cursing at a child; • Domestic abuse; • Extremism; • Failure to collect a child on multiple occasions; • Harassment or discrimination related to faith, ethnicity, or cultural practices; • High conflict divorce; • Inappropriate use of AI; • Juvenile delinquency; • Lack of parental engagement (signs of affluent neglect); • Minor injuries requiring monitoring; • Misogynistic behaviour; • Neglect (e.g., road safety, personal hygiene, essential care); • Repeated low-level concerns—three instances; • Parental mental health concerns; • Parent separation or divorce causing instability in caregiving; • Sexual abuse (non-contact); • Sexual harassment; • Racial harassment; • Social exclusion; • Students riding electric bikes/e-scooters to school; • Student in substitute care (i.e. not in the care of either legal parent); • Young carer.

Low	• Absent from education; • Concerns that a child is frequently tired or sleeping in school (pattern over time); • Neglect indicators (e.g., unmanaged or unsupervised use of electronics, inadequate food, missed medication, vaccinations not up to date, unkept hair, persistent tiredness, dirty or inappropriate clothing); • Verbal abuse by an adult towards a child; • Withdrawn presentation (e.g., reduced engagement, isolating from peers);

Appendix 2: Potential Indicators of Abuse provides further guidance. If a member of staff is in doubt about signs or indications of abuse, they should alert a DSL.

12.2 Disclosures

12.2.1 If a child discloses that he or she has been abused in some way, the member of staff should:

a) Listen to what is being said without displaying shock or disbelief
b) Accept what is being said
c) Allow the child to talk freely
d) Reassure the child, but not make promises which it might not be possible to keep
e) Not promise confidentiality – it might be necessary to refer to the relevant DSL or the DDSL
f) Reassure that what has happened is not the child's fault
g) Reiterate the point that it was the right thing to tell
h) Only ask questions when necessary for the purpose of clarification
i) Not criticise the alleged perpetrator
j) Explain what must be done next and who must be told
k) Record the disclosure factually, using the child's exact words, either in CPOMS or on the Safeguarding Concern Form. The form must be passed to the DSL or DDSL immediately after becoming aware. If the disclosure concerns a member of staff, it must be reported immediately to the DSL, or to the Principal if the DSL is implicated.
l) Not take any photographs

12.2.2 School staff without designated safeguarding responsibilities must not investigate or determine whether abuse has occurred. Their duty is to recognise concerns and immediately report them to the DSL or DDSL, who are responsible for fact-finding and information gathering.

12.2.3 Reference Appendix 4: Guidance On How to Respond to a Child Wanting to Talk About Abuse, Appendix 5: Order of Procedures for All Staff and Appendix 6: Safeguarding Incident Management Process.

12.3 Written Records

12.3.1 A volunteer or visitor to the school (e.g., parent, guest, contractor) who receives a disclosure or has a concern must:

a) Immediately record the details verbatim, using the child's exact words (not a summary), on the Safeguarding Concern Record Form (Appendix 9). This must be done straight away, even if it delays other duties. The form is available at the school reception.
b) Record the date, time, place and any noticeable words or non-verbal behaviour used/demonstrated by the child.

c) Where necessary use the Body Maps for Recording Disclosures & Concerns (Appendix 10) available at the school reception to indicate the position of any injuries and hand this in with the Safeguarding Concern Form to the DSL or DDSL to upload in CPOMS.
d) Record verbatim statements and observations rather than personal interpretations or assumptions.

12.3.2 All records need to be logged by the DSL or DDSL on CPOMS within one working day, and provisional notes must be destroyed securely.

12.4 Taaleem Safeguarding Levels

12.4.1 Safeguarding concerns will be allocated to a level according to the Taaleem Safeguarding Severity Levels (Appendix 7) for monitoring purposes. The DSL has the responsibility of ensuring a safeguarding concern is allocated to the correct level.

All levels will be moderated and reviewed termly by the School Principal, DSL(s) and the Head of Safeguarding through scheduled Safeguarding review meetings, minuted as described above.

12.4.2 The DSL will collaborate with relevant stakeholders to assess the situation, determine appropriate actions, and coordinate support by assigning a team around the child (e.g., counsellor, pastoral leads, family). The intention is that, at this stage, a resolution can be achieved within the school setting.

12.4.3 Serious cases categorised as the level 'High' (or escalated to 'High' due to lack of progress or unresolved outcomes) must be referred by the DSL to the Principal immediately, ideally no later than one hour after becoming aware.
The Principal and DSL will agree the next steps, which must be recorded in CPOMS within two hours, including notification to the Taaleem CO Safeguarding Team. An initial risk assessment must be completed within four hours.

In most circumstances, the Safeguarding Incident Management Process (Appendix 6) must be followed. These steps can and must be taken much sooner than timeline indicated if a child is at immediate risk and requires urgent support.

12.4.4 If, at any point, there is a risk of immediate serious harm to a child the case will be immediately escalated to 'High'.

12.4.5 According to Article (42) of Federal Law No. (3) of 2016 (Child Rights Law 'Wadeema'), every person is required to report to the child protection specialist or child protection units if a child's safety, or their physical, psychological, moral, or mental wellbeing, is under threat. Reporting is a legal obligation for teachers, physicians, specialists, social workers, and anyone assigned to the protection, care, or education of children.

12.4.6 If a child's situation does not show improvement within four working days of being identified and reported, the staff member who raised the concern must escalate the concern to the DSL for reconsideration. The DSL will then determine next steps and, if necessary, escalate the matter to the Principal and/or the Head of Safeguarding to ensure timely and effective support for the child. Safeguarding concerns must always result in help for the child.

12.4.7 For any child who is categorised as 'High', the DSL must convene a Team Around the Child (TAC) meeting and initiate a Child Protection Plan which must be uploaded onto CPOMS; the plan should be reviewed at least every four weeks unless there is an immediate harm suspected (for example mental health concerns), in which case the review must take place initially on a weekly basis. The DSL is responsible for creating the membership of the TAC and this is dependent on the child/ren involved and the specificity of the concern. The DSL is responsible for reviewing the child protection

plan. Membership should be determined according to the nature of the concern and may include teachers, counsellors, nurses, pastoral staff, Heads of Inclusion, SEND specialists, ELL specialists, Individual Learning Support Assistants (ILSAs), therapists, external professionals and parents where appropriate.

12.5 Moderate and Low-level actions

12.5.1 The DSL or DDSL will:

a) Meet with the child, following the guidance on questioning students. Where the student has a disability, communication difference, English language need or other identified barrier to participation, reasonable adjustments should be made to facilitate meaningful engagement in the safeguarding process. This may include visual supports, AAC systems, interpreters, additional processing time, sensory adjustments, trusted adults or adapted communication approaches.
b) Take appropriate steps to protect the student making the disclosure. Explain that confidentiality cannot be guaranteed, but that information will only be shared with those who need to know, and the student will be told who these people are. Where the allegation involves abuse by other students, those students may need to be informed.
c) Meet with any student(s) against whom an allegation has been made, following the same interview protocols to understand the situation and provide them with appropriate support and guidance.
d) If the allegation is against a parent or adult and the child may be at immediate risk of harm, discuss next steps with the Principal to determine whether the concern should be escalated to 'High'.
e) In consultation with the Principal, decide who else should be informed of the allegation (e.g., parents, students, counsellor).
f) If the child requires urgent medical attention, the DSL will arrange immediate treatment through the School Clinic or emergency services, informing parents where appropriate. Any medical examination for safeguarding purposes will only be undertaken if explicitly directed by the relevant authorities (e.g., child protection services, police, or healthcare professionals).
g) The DSL and/or DDSL will coordinate a team-around-the-child approach, working with key staff, parents, students, and counsellors (except where any are alleged abusers) to ensure appropriate support and a positive outcome.
h) All records and notes will be captured by the staff on CPOMS or filed securely with the Student Concern Record Form.

12.6 High level actions

12.6.1 In consultation with the Principal, the DSL will determine the next steps, which may include (but are not limited to:

a) Implementing and communicating a vulnerable student risk assessment.
b) Identifying internal support from the school, or home and school, working in partnership.
c) Making a referral to external agencies for support or advice (following consultation with Taaleem's central safeguarding team).

12.6.2 Any further developments in 'High' level cases that require significant ongoing decision-making must be discussed immediately with the Taaleem CO Safeguarding Team via a direct phone call to the Head of Safeguarding, Director of Education, or Cluster Director.

12.6.3 The School Safeguarding Team including, but not limited to, the DSL, DDSL, Principal, Counsellor, and School Nurse, will meet at least bi-weekly to review all 'High' level cases and other safeguarding concerns. In addition, a wider safeguarding meeting will be held monthly, where other staff such as

IT, the Facilities Manager, and HR join the DSL to review trends, discuss new developments, and report on safeguarding processes.

12.6.4 In situations where the child at risk is part of a sibling group, all siblings' welfare must also be considered and a Team Around the Child (TAC) convened and support put in place, where appropriate. The sibling group must be considered at all safeguarding meetings.

12.6.5 School Safeguarding Team Meetings will record on CPOMS any updates or discussions. If a decision is made that a child no longer needs to be monitored under safeguarding, the DSL will record this on CPOMS and will the select 'No Further Action' for the safeguarding incidents; this will lead to the child no longer being monitored via CPOMS.

12.7 Incident Management Process and Escalation Matrix and Flowchart

All safeguarding concerns must be reported according to the Safeguarding Incident Management Process in Appendix 6 and follow the severity-based escalation matrix and flowchart described in Appendix 7.

12.8 Out of Hours Reporting

12.8.1 All schools must provide a designated out-of-hours contact (e.g., phone number or email) for reporting safeguarding concerns. This contact must be clearly displayed on safeguarding information shared with staff, students, and parents to ensure awareness and accessibility.

12.8.2 In exceptional circumstances where the out-of-hours contact is unavailable, staff must not delay taking action. They should immediately speak to the school Principal to ensure the concern is addressed without delay.

13. Referring

13.1 Everyone at Taaleem has a duty to report any 'high' level safeguarding or child protection concerns in line with UAE legislation. Before making any external reports, schools must first inform/consult with the Head of Safeguarding, the Cluster Director, or the Director of Education. *This is purely to ensure a coordinated approach and does not prevent any staff member from reporting directly to authorities if a child is at immediate risk of harm.*

13.2. In the first instance reporting must be made to the following authorities:

13.2.1 A criminal act must be reported to Police.

13.2.2 Suspicion of a sexual offence must be reported to the Police.

13.2.3 Serious school related matters are to be reported to KHDA/ADEK/MoE who will then escalate matters to the relevant authorities when deemed appropriate e.g., CDA, FCA.

13.3 Useful numbers/contacts are detailed below to support the schools:

Description	Contact Details
CDA Child Protection Department	Toll free CDA Hotline: 800 988 Email: child@cda.gov.ae
Hemayati app. An App run by the Ministry of Interior UAE, in Arabic and English. It has an emergency function, a 'red button' which can be used by anyone worried about their safety to report directly to the Police. A unit will be dispatched to support. It can be downloaded on all platforms.	https://www.moi.gov.ae/en/about.moi/Initiative/7467417.aspx

Description	Contact Details
MOI Child Protection Centre. A UAE wide hotline run by Ministry of Interior to report any concerns about abuse. It is best to report by using an Arabic speaker & follow up with an email	MOI Hotline Number: 116111.
Dubai Foundation for Women and Children	Free helpline number: 800111. For general enquiries: 04 606 0300. Email: help@dfwac.ae https://www.dfwac.ae/
Al Jalila Children's Hospital. Full service paediatric hospital with psychiatric aftercare services. Accept referrals from all Emirates.	Telephone numbers: 04-2811000 & 8002524. https://aljalilachildrens.ae/
EWAA Shelter for Women and Children on hotline	8007283.
Child protection centre in Sharjah on toll-free helpline number	800 700.
Hemaya Foundation for Children and Women - Ajman on hotline	800himaya (800446292).
Family Care Authority (FCA)	800 444. icm@adfca.gov.ae
MoE Child Protection Unit (CPU)	800 85. cpu@moe.gov.ae
Abu Dhabi Police	999.
Aman Centre for Women and Children through RAK Police	07-2356666.

14. Allegations Against Members of Staff

14.1 **Child Abuse Allegations** - Child abuse allegations against staff involving students are covered in detail in Appendix 11 Protection Against Allegations of Abuse for Staff and must always be reported without delay.

14.2 **Other Concerns** - Concerns about staff that are not related to safeguarding or child protection should follow the Taaleem Grievance Policy (HR-010)

14.3 **Positive Handling** - The use of physical holds or restraint is governed by the Taaleem Positive Handling Policy (EDUC-002) and must be followed strictly in all circumstances.

14.4 **Senior Leaders /Anonymous Reporting** - Where a staff member wishes to raise a concern about a senior leader, or if they prefer to report anonymously, they may do so via the Taaleem Whistleblowing Hotline. All concerns raised through this route will be treated seriously and handled in line with the Whistleblowing Policy (COMP-003).

14.5. **Allegations Meeting the Harm Threshold** - An allegation is considered to have met the harm threshold if it involves an adult working in school who has:

a) Behaved in a way that has harmed, or may have harmed, a child.
b) Possibly committed a criminal offence against or related to a child.
c) Behaved towards a child or children in a way that indicates they may pose a risk of harm.
d) Behaved in a way that indicates they may not be suitable to work with children.

All allegations meeting the harm threshold must be reported immediately to the Principal in the first instance, who will escalate in line with this policy and regulatory requirements. If the allegation is against the Principal, the report should be made to the Head of Safeguarding who sits as a Safeguarding Governor for all Private Schools.

If any allegation against a member of staff is made, the Principal must seek advice from the Head of Safeguarding and CO HR Director to ensure the most appropriate safeguarding and disciplinary process is implemented.

If a student makes an allegation against a staff member and the allegation is found to be false, it is still formally recorded. Schools should record:

- the allegation,
- the actions taken,
- the investigation process,
- the outcome,
- and any follow-up support or risk management.

The record is held:

- on the staff member's confidential personnel/safeguarding file,
- and within the school's safeguarding recording system on both Student and Staff safe.

The outcome is classified as one of the following:

- Substantiated — sufficient evidence to prove the allegation.
- Unsubstantiated — insufficient evidence to prove or disprove.
- False — sufficient evidence to prove the allegation did not happen.
- Malicious — sufficient evidence that the allegation was deliberately invented to deceive.
- Unfounded — no evidence or proper basis supporting the allegation.

The distinction between false, unfounded, and malicious is important:

- A child may make a false allegation due to misunderstanding, confusion, trauma, or poor communication.
- "Malicious" should only be used where there is clear evidence of deliberate intent to harm the staff member.

Allegations that are false or malicious should **not** be referred to in employment references for the staff member.

- records should clearly show the allegation was not substantiated.
- staff wellbeing support should be considered.
- the school should consider whether the allegation indicates unmet needs or safeguarding concerns for the child making it.

Records should be retained until the staff member reaches normal pension age, or for 10 years from the allegation if longer.

14.6 Low-Level Concerns

Low Level Concerns against staff involving students are covered in detail in Appendix 12: Low Level Concerns for Staff and must always be reported without delay.

A low-level concern is any concern about an adult working in a school where:

- They have acted in a way that is not consistent with the school's Staff Code of Conduct; and/or
- Their conduct outside of work has caused doubt about their suitability to work with children.

It does not matter how small the concern may appear - even a 'concerning doubt' must be reported. Examples may include: Ignoring safeguarding guidance or failing to maintain clear personal or professional boundaries.

Low-level concerns may not meet the harm threshold individually; however, multiple low-level concerns together may form a pattern that meets the threshold. Patterns of behaviour may also indicate grooming and must therefore be carefully monitored, recorded, and escalated in line with safeguarding procedures.

Low-level concerns must be reported to the DSL or Principal. Where the concern involves the DSL or Principal, it must be reported directly to the Taaleem CO Safeguarding Team.

Where a concern involves a breach of school policy or the Staff Code of Conduct, it will be dealt with robustly and may result in formal disciplinary action. Previous concerns raised about the adult, along with the wider context, will also be considered as part of the process.

Staff are expected to take responsibility for maintaining professional standards and should self-report any situation where their conduct may be perceived as a low-level concern, even if no harm was intended. This includes instances where boundaries may have been unintentionally blurred or where actions could be misinterpreted by others. Self-reporting should be made promptly to the designated safeguarding lead and will be handled in a fair, transparent, and supportive manner. The purpose of this process is to promote a culture of openness, reflection, and continuous improvement, ensuring that concerns are addressed early and do not escalate.

15. Child-on-Child Abuse including Harassment and Violence

15.1 Staff have an important role to play in preventing child-on-child abuse. When staff believe a child may be at risk, they must report the concern immediately, following the reporting process outlined in this policy. Failure to report concerns may be treated as a safeguarding breach and subject to disciplinary action.

15.2 All staff should be aware that children can abuse other children at any age, and that this abuse may occur inside or outside of school, including online. Staff must be able to recognise the signs and indicators of abuse and respond appropriately to reports. Staff should remain aware that in incidences of child on child abuse, both children must be considered as a safeguarding risk.

15.3 Child-on-child abuse is most likely to include, but may not be limited to:

a) Bullying (including cyberbullying, prejudice-based and discriminatory bullying).
b) Abuse in intimate personal relationships between children (sometimes referred to as 'teenage relationship abuse').
c) Physical abuse (e.g., hitting, kicking, shaking, biting, hair-pulling, or otherwise causing physical harm).
d) Sexual violence (e.g., rape, assault by penetration, or sexual assault).
e) Sexual harassment (e.g., sexual comments, remarks, jokes, or online harassment).
f) Coercing another child to engage in sexual activity.
g) Sharing of indecent images and/or videos.
h) Upskirting (taking a photo under a person's clothing without their permission, to view genitals or buttocks, for sexual gratification or to cause humiliation, distress, or alarm).
i) Initiation/hazing-type violence and rituals (e.g., harassment, abuse, or humiliation as part of group initiation, including online activity).
j) Racism/racially aggravated abuse.
k) Misogyny.

15.4 Taaleem schools adopt a whole-school approach to preventing child-on-child abuse. This requires all staff, students, parents, and other stakeholders to work together to identify, prevent, and respond to such behaviours.

15.5 Taaleem schools have a zero-tolerance approach to child-on-child abuse. Sexual violence or sexual harassment will not be passed off as 'banter', 'having a laugh,' or as 'part of growing up.'

15.6 All staff must treat child-on-child abuse as a serious safeguarding concern and report it immediately to the DSL or DDSL. All concerns must be recorded factually in CPOMS under the 'Safeguarding' category. Victims may find such experiences highly distressing; staff must ensure they are supported and reassured that their disclosure will be taken seriously.

15.7 The absence of reports of child-on-child abuse does not mean it is not happening. Staff should remain vigilant, and if they have concerns, they must speak directly with the DSL or DDSL.

15.8 In the case of abuse by a student, or group of students, the key indicators that may identify abuse (as opposed to bullying or adolescent misbehaviour, to be handled within the school's normal discipline framework) are:

- the frequency, nature and severity of the incident(s); whether the victim was coerced by physical force, fear, or by a student or group of students significantly older than them or having power or authority over them.
- whether or not the incident involved a potentially criminal act.
- whether or not the same incident (or injury) would have been regarded as assault or otherwise actionable) had it occurred to a member of staff or another adult.

15.9 Taaleem schools have a duty to minimise the risk of child-on-child abuse. This is achieved through the School Behaviour Policy, the Code of Conduct, and explicit expectations around standards of behaviour both in and out of school.

15.10 Taaleem schools recognise the importance of the initial response to any disclosure of child-on-child abuse. Victims must be reassured, protected, and supported (e.g. counselling, safe spaces). Schools will assess the risks and needs of the victim, the alleged perpetrator(s), and other students. Where necessary, measures will include separating victim and perpetrator(s) in classes or activities, and ensuring both victim and perpetrator(s) receive appropriate support. Protective measures for victims will always remain the priority.

16. Online Safety

16.1 Online safety concerns can be categorised into the following:

- Content: being exposed to illegal, inappropriate, or harmful content, for example: pornography, racism, misogyny, self-harm, suicide, radicalisation, extremism, extreme sexual or physical violence, misinformation, disinformation (including fake news) and conspiracy theories
- Contact**:** being subjected to harmful online interaction with other users or generative AI applications that simulate this; for example: child to child pressure, commercial advertising and adults posing as children or young adults with the intention to groom or exploit them for sexual, criminal, financial or other purposes
- Conduct**:** online behaviour that increases the likelihood of, or causes, harm; for example, making, sending and receiving explicit images (e.g. consensual and non-consensual sharing of self-generated intimate images and/or videos including those generated using AI e.g. deepfakes, sharing other explicit images and online bullying, and
- Commerce: risks such as online gambling, inappropriate advertising, phishing and / or financial scams.

16.2 Technology is a significant component in many safeguarding and wellbeing issues. Children can be at risk of abuse both online and face-to-face, and in many cases the two may overlap.

16.3 Taaleem schools ensure robust online filtering and monitoring safeguards are in place, in line with corporate IT policies. The DSL works in partnership with the school's IT Administrator to review filtering and monitoring systems regularly.

16.4 Online safety is embedded into the curriculum through age-appropriate digital literacy and PSHE lessons, equipping students with the knowledge and skills to stay safe online.

16.5 Staff receive regular training on online safeguarding risks, including the use of social media, cyberbullying, online grooming, radicalisation, creation or sharing of intimate images and/or videos including those generated using AI e.g. deepfakes, and gaming-related risks. Training is delivered through the L3 training and additional information is disseminated through the Safeguarding Teams Channel as new risks emerge.

16.6 Students are taught how to report online concerns, and staff must report any online safety incidents immediately via CPOMS to the DSL or DDSL.

16.7 Parents are provided with guidance and resources to support their children's safe use of technology at home.

16.8 Online safety incidents are treated as safeguarding concerns and responded to under the Safeguarding Incident Management Process (Appendix 6). Where criminal activity is suspected (e.g., grooming, indecent images, cybercrime), the DSL will escalate to the CO Safeguarding Lead and relevant authorities immediately.

16.9 AI tools can be misused by students to access harmful content, bully or impersonate others, or create inappropriate material. Taaleem schools will educate students on responsible and ethical AI use as well as monitor for misuse, and treat incidents as safeguarding concerns to be reported via CPOMS and escalated to the DSL/DDSL. Incidents include cyber bullying, accessing or sharing inappropriate material online, the use of online searches for words of concern which may indicate a wellbeing or safeguarding risk.

16.10 Distance Learning can present additional safeguarding risks due to reduced face-to-face contact and oversight. These may include increased exposure to online harm such as cyberbullying, inappropriate content, online grooming, and exploitation, as well as greater risk of social isolation and reduced opportunities for children to disclose concerns. There may also be limited visibility of a child's home environment, making it more difficult to identify signs of neglect or abuse, and potential challenges in maintaining appropriate professional boundaries in virtual interactions. Schools must ensure that robust online safety measures are in place, staff remain vigilant to changes in engagement or behaviour, and clear protocols are followed for communication, recording, and reporting concerns.

16.11 If a student discloses repeated bullying or harassment online (on whichever platform), it must be recorded as a safeguarding incident on CPOMS, regardless of whether the incident happened on a school provided device and on school site. The DSL and Pastoral Lead will meet to discuss whether a safeguarding or behaviour management approach is the most appropriate way forward. The decision will be recorded on CPOMS and the investigation will follow the process set out either through safeguarding or the behaviour management process. If a parent reports the incident, the same process should be followed to ensure all students named within the report are supported whilst the incident is investigated.

17. Aquatics Safety

17.1 Staff delivering swimming lessons must always ensure students are adequately supervised.

17.2 Supervision must be constant, active, and diligent, prioritising the safety and wellbeing of students, and where possible staff must be able to observe each student.

17.3 Where direct supervision is not possible, a staff member must know the location of each student and ensure that they can respond to individual needs and immediately intervene if necessary.

17.4 Physical contact may be required where the aim is to teach or develop a skill or technique that the child cannot accomplish without help. The teacher must explain the nature and the reason for the physical contact with the student, and the teacher must be acting within the scope of their qualification. Any physical contact with a student must be necessary and appropriate to the delivery of the lesson and based on the needs of the student (including adjustments based on any additional needs due to impairment or disability) such as assisting with the use of equipment technique assistance or correction or administering first aid.

17.5 Teachers and instructors should:

- Ask swimmers if they are comfortable with you giving them support
- Always support the swimmer using a flat, open palm
- Remain at arms-length when providing support
- Ensure that the swimmers are safe and controlled at all times
- When not supporting a swimmer, keep your hands above the water, where they can be seen.
- Whenever possible avoid standing up straight and leaning over a swimmer, making the swimmer feel intimidated
- Make sure that the swimmer is in a natural, comfortable body position
- Avoid pulling or lifting the swimmer
- Always wear appropriate clothing in the pool

17.6 Teachers and instructors should avoid providing support by touching the following areas of the body:

- Chest
- Torso
- Hips
- Waist
- Thighs

18. Supporting Children

18.1 Taaleem schools recognise that:

- A child who is abused, neglected, or who witnesses abuse may struggle to develop and maintain a healthy sense of self-worth.
- Such children may experience feelings of helplessness, humiliation, fear, or self-blame.
- For some children, the school may provide the only stability and security in their lives.
- Research shows the behaviour of a child at risk may vary widely, ranging from what appears typical, to aggression, withdrawal, or other changes in behaviour.
- For babies and young children, support should be delivered through secure attachments, predictable routines, responsive caregiving, and strong partnerships with parents. Staff should recognise that behaviour is a form of communication and adapt support according to the child's developmental stage.

18.2 The school will support all students by:

- Promoting self-esteem, resilience, and self-confidence, while making clear that aggression, bullying, or harmful behaviour will not be condoned.
- Providing a safe, caring, and positive environment where children feel valued, listened to, and respected.
- Ensuring staff are trained to recognise early indicators of distress or abuse and to respond sensitively and appropriately.
- Liaising and working closely with external safeguarding agencies and health, social care, and law enforcement professionals.
- Where students attend alternative provision, vocational programmes, work placements or other off-site educational arrangements, schools remain responsible for ensuring appropriate safeguarding oversight, communication and monitoring arrangements are in place.
- Notifying relevant external agencies immediately when a child is at risk of significant harm.
- Providing ongoing support to children about whom there are safeguarding concerns, including when they move to another school, by ensuring that safeguarding information is transferred promptly and securely under confidential cover, if permitted.
- Where appropriate, ensuring access to counselling, pastoral care, and targeted support services within school.

18.3 Increased Vulnerabilities

Staff must remain especially vigilant to the needs and concerns of children who may be among the most vulnerable.

Certain groups of students may face additional barriers in the identification of neglect or abuse. These include, but are not limited to, children with Special Educational Needs (SEN) /People of Determination. Such children may be at greater risk of exploitation or abuse and must be given enhanced access to support systems.

Factors that may increase vulnerability include:

a) Greater social isolation from peers and difficulties in expressing concerns.
b) Behaviours or needs being misinterpreted as symptoms of SEN or disability, leading to concerns being overlooked.
c) Specific indicators that should never be dismissed as simply SEN-related, for example (non-exhaustive list):

- Communication difficulties
- Students requiring intimate care, feeding assistance, personal care or physical support may present additional safeguarding considerations and staff must follow the requirements outlined within the Intimate Care Policy.
- Challenges in understanding right and wrong
- Differences in physical development
- Unusual or overly physical attachments to staff members or peers
- Have autism, intellectual disability, sensory impairments or complex learning needs;
- Are non-speaking or minimally verbal;
- Use Alternative and Augmentative Communication (AAC);
- Require intimate care or personal care support;
- Receive support from an Individual Learning Support Assistant (ILSA), Individual Assistant (IA) or other support professional;
- Have limited understanding of personal safety, relationships, consent or social boundaries.

- Schools should ensure safeguarding systems, reporting mechanisms and support processes are accessible and adapted where required to meet individual communication, learning and participation needs.

d) Students who are English Language Learners (ELLs) may experience additional barriers in understanding safeguarding information, reporting concerns or participating in safeguarding processes. Schools should take reasonable steps to ensure communication is accessible to both students and families through the use of translated information, interpreters, visual supports or bilingual staff where appropriate.

18.4 Mental Health and Wellbeing

18.4.1 Promoting positive mental health is the responsibility of the entire Taaleem community, and schools play a key role in this. All staff must recognise that mental health problems can, in some cases, be indicators that a student has suffered, or is at risk of suffering, abuse, neglect, or exploitation. While only appropriately trained professionals should diagnose mental health conditions, staff are well placed to observe students day-to-day and to identify behaviours that may signal emerging difficulties or increased risk. Staff should be aware that mental health presentations may differ for students with SEND, disability or communication differences and should consider individual student profiles when assessing risk and need.

18.4.2 Taaleem schools are committed to developing the emotional wellbeing and resilience of all students and staff, while also providing tailored support for those with additional needs. We recognise that certain risk factors can increase vulnerability, while protective factors can promote resilience and recovery.

18.4.3 The presence of multiple risk factors increases the need for protective measures and supportive interventions. Schools will work in close partnership with parents to support student wellbeing. Parents are encouraged to share concerns with the school so that appropriate support and interventions can be put in place promptly.

18.4.4 Schools will access and utilise a range of professional advice, resources, and services to support the identification of students who may require additional mental health support. Where necessary, referrals will be made to specialist services, with parental involvement and consent.

18.4.5 Where a student has disclosed suicidal ideation or self-harm behaviour (which a risk assessment warrants a psychiatric assessment) parents will be contacted and asked to seek a psychiatric evaluation of the student and a referral to KHDA with a request to escalate to CDA will be completed (for students in Dubai) or a referral to ADEK and FCA (for students in Abu Dhabi). The student will have a reintegration meeting prior to returning to school; the parent will be asked to provide a clearance letter from a psychiatrist stating it is safe for the student to be in school. A child protection plan and risk assessment will be created and will include permission for the school counsellor to liaise with the external psychiatric team. If the parent resists seeking an external assessment, the appropriate regulatory body; KHDA or ADEK should be updated.

19. Wider Staff Safeguarding Awareness

19.1. Staff Safety

19.1.1 Staff fulfil many roles both inside and outside the classroom, and will work with students in a range of settings, often acting *in loco parentis* (in the place of the parent).

19.1.2 Safeguarding law and practice are rightly weighted in favour of protecting the child. This places a clear duty of care on staff to prioritise the welfare of students. Allegations against staff must be taken seriously, and because of mandatory information-sharing requirements, anonymity cannot always be guaranteed, even if an allegation is later found to be unfounded.

19.1.3 In some cases, the burden of disproving an allegation may rest with the staff member. To minimise risk, staff are expected to maintain professional boundaries at all times and to reflect carefully on the settings, activities, and nature of their interactions with students to avoid situations that may give rise to concern, misunderstanding, or allegation.

19.1.4 Responding to child protection concerns can be stressful for staff as well as students. The first responsibility is always to the child, but staff are encouraged to seek support for themselves where needed. Staff may discuss concerns with the DSL, and support is also available from the school Counsellor or through other wellbeing services.

19.2. Pastoral Role

19.2.1 Pastoral interaction between teachers and students is an essential part of Taaleem's educational provision. To ensure that these relationships remain professional and safeguarding compliant, staff must adhere to the following:

a) **Physical contact** - Inappropriate physical contact must always be avoided. For guidance on safe and acceptable practice, refer to Positive Handling Policy (EDUC-002).

b) **Communication** – All communication with students must be conducted through official school communication channels. **Staff must not**:

- Use personal email, WhatsApp, or social media applications to contact students.
- Accept or send social media friend requests to students.
- Add students to their personal social media accounts.
- Post images of students on personal social media (except where reposting from official school accounts).

19.3 Medicines

Only School Clinic staff are authorised to advise on, administer, or adjust the use of medicines. Under no circumstances should any other staff member provide such advice. All procedures are fully documented in the School Clinic Policies.

19.4 Site Safety

Safeguarding includes ensuring that children are kept safe while on school premises. Staff must immediately report any health, safety, or security concerns in writing to the Facilities Manager and the DSL. Urgent risks must also be reported verbally at once to ensure timely action. Where the concern involves serious or repeated breaches, this must also be logged on CPOMS.

20. Whistleblowing

All staff have a duty to raise safeguarding concerns and may do so through their DSL, or anonymously via the Taaleem Whistleblowing Hotline, in line with the Whistleblowing Policy (COMP-003). This is including concerns about senior staff, which can be reported anonymously via the Hotline. No member of staff will suffer detriment for raising a safeguarding concern in good faith.

21. Confidentiality

21.1 All Taaleem schools will make clear to students, parents, and staff that safeguarding concerns must be reported to a trusted member of staff. Concerns will then be shared with the Safeguarding Team to ensure appropriate action is taken.

21.2 An abused child or adult disclosing information is likely to be under severe emotional stress, and the staff member receiving the disclosure may be the only person they feel able to trust. Staff must reassure the individual that they are being listened to, but also explain that the matter cannot

remain confidential and will be shared with the Safeguarding Team in order to safeguard their wellbeing.

21.3 Safeguarding information may need to be shared with senior staff, parents, or external agencies strictly on a *need-to-know* basis. This is not a breach of trust but an extension of the confidence placed in the school, aimed at ensuring safety and protection.

21.4 This principle applies equally when there is a risk of an individual harming themselves or posing a risk to others.

21.5 Best practice requires that:

- The welfare of the child or vulnerable adult is the paramount consideration.
- Wherever possible, children are best cared for within their own families.
- All Taaleem schools must ensure that their Child Protection and Safeguarding Policy is shared with staff and parents so that, should a referral be required, parents are aware of the school's duty and processes.

21.6 Staff must respect confidentiality at all times and avoid discussing student concerns outside of appropriate professional contexts.

22. Monitoring & Review

22.1 This policy will be formally reviewed on an annual basis, or sooner if required to reflect changes in UAE legislation, regulatory requirements, or safeguarding best practice.

22.2 Reviews will be led by the CO Safeguarding Lead in consultation with DSL(s), school Principals, and other key stakeholders at Taaleem.

22.3 Compliance with this policy will be monitored through annual safeguarding audits and/or Taaleem internal reviews. Outcomes will be reported to Executive/Education Team Meetings.

22.4 The Head of Safeguarding shall develop and maintain safeguarding key performance indicators (KPIs), which shall be subject to review and approval by the Central Office Education Leadership Team. Approved safeguarding KPIs will be communicated to all schools and incorporated into local safeguarding monitoring and reporting processes. Schools shall be responsible for submitting safeguarding KPI data in accordance with the prescribed reporting timelines, including monthly and/or termly reporting requirements. The Head of Safeguarding shall review and analyse the reported data to identify trends, areas of concern, and opportunities for improvement, and shall utilise this information to support oversight activities and reporting to relevant governance forums and committees, as required.

23. Templates

Templates provided in the Appendices are intended as guidance for schools. They are not required to be used in the same format and may be adapted to meet individual school contexts while retaining required safeguarding content.

These templates should be used proportionately and are not required for every incident; their use should be determined by the level of risk, frequency of incidents, and individual student needs.

Schools may integrate these templates into existing systems (e.g. safeguarding or behaviour platforms), provided that all required information is captured.

24. Implementation Timeline

This policy shall be implemented within thirty (30) days from the Effective Date indicated on the cover page, allowing adequate time for communication, training, and adoption across all relevant Taaleem entities. Where any requirement in this policy is dependent on a system functionality, configuration, or tool that is not yet implemented, such requirement shall take effect only once the relevant functionality is operational. Until such time, existing processes shall continue to apply.

25. Non-Compliance

Deliberate and / or repeated non-compliance with this policy may be addressed in accordance with applicable company procedures.

Version Control

Version No.	Date	Details of Changes
1	August 2025	New policy
2	August 2026	Updated to strengthen safeguarding governance and operational controls through the introduction of enhanced admissions safeguarding checks, expanded safeguarding categories and reporting thresholds, strengthened site security and visitor management requirements, improved oversight and monitoring responsibilities, and alignment with the latest UAE Legislation and Child Protection Guidance. Additional provisions have also been included for digital safety, mental health, nursery safeguarding practices, aquatics safety, and enhanced CPOMS case management and reporting processes.
3		
4		

Appendix 1: Safeguarding Team – Key Personnel

School Details	
School Name	School to insert
Principal Name	School to insert

The following named persons hold relevant responsibility for the Child Protection and Safeguarding of all students at (School to insert)	
Child Protection Coordinator/s	School to insert
Deputy Child Protection Coordinator/s	School to insert
Nominated Person from Taaleem Central Office	Priya Mitchell
School Principal	School to insert

Appendix 2: Potential Indicators of Abuse

The below factors are not designed as a checklist - if in any doubt speak to the DSL, DDSL or school nurse.

A.1 Physical Abuse:

Physical indicators:	Behavioural Indicators:
• Unexpected bruises (in various stages of healing). • Welts, human bite marks, bald spots. • Unexplained burns, especially cigarette or immersion burns (glove like). • Unexplained lacerations, fractures, or abrasions.	• Self-destructive, withdrawn, or aggressive behaviour. • Uncomfortable with physical contact. • Arrives at school early or stays late as if afraid to be at home. • Chronic runaway (teenagers). • Complaints of soreness. • Wears clothing inappropriate for the weather to cover the body.

A.2 Neglect:

Physical indicators:	Behavioural Indicators:
• Abandonment. • Consistently unattended medical needs. • Consistent hunger. • Inappropriate dress, poor hygiene. • Lice, distended stomach, emaciated.	• Tired or listless, falls asleep in class. • Steals food or begs food from classmates. • Reports that there is no caretaker at home. • Frequently absent or late. • Self-destructive.

A.3 Child Sexual Abuse:

Physical indicators:	Behavioural Indicators:
• Torn, stained or bloody underclothes. Pain or itching of genital area. • Difficulty with walking or sitting. • Bruising or bleeding in external genitalia. • Venereal disease. • Frequent urinary yeast infections. • Avoidance of lessons, especially P.E (Physical Education), games, and showers. • Pregnancy.	• Withdrawal, chronic depression. • Excessive sexual precociousness, seductiveness. Role reversal, overly concerned for siblings. • Poor self-esteem, self-devaluation, lack of • confidence. • Peer problems, lack of involvement. • Massive weight change. • Suicide attempts, especially in adolescents. • Hysterical, lack of emotional control. • Sudden school difficulties. • Inappropriate sexualised play. • Premature understanding of sex. • Threatened by physical contact.

A.4 Injury:

Common Sites for accidental injury:	Common sites for non-accidental injury:
• Forehead • Nose • Chin • Spine • Elbows • Forearm • Hips • Knees • Shins	• Bruising, black (particularly both eyes). • Fracture, bruising or bleeding under skull (from shaking). • Bruising, finger marks. • Torn frenulum (the ligament behind the upper lip). • Bruising grasp marks. • Bruised Back, Buttocks. • Linear bruising, outline of belt/buckles, scalds, and burns, Grasp marks.

A.5 Most common forms of physical child abuse:

- Fingertip bruising-caused by the child being slapped.
- Thumb marks under the clavicles – bilateral.
- Bruising of the face or head.
- Bruising of the genitalia.
- Bruising on limbs – often fingertip marks.
- Linear bruising - from a belt or strap.
- Linear burns.
- Scalds and burns -from dunking or splashing.
- Adult bite marks.
- Cigarette burns of different ages
- Mouth injuries - torn lips, gums, and frenulum.
- Ear injuries.
- Bilateral black eyes- from a fist punch.
- Intraocular haemorrhage.
- Head injury – blows or shaking in young baby.
- Baby with non-moving limb – fractures.
- Abdominal injuries e.g., ruptured liver.

A.6 Indicators of suspicious non-accidental injury:

- Child brought late for medical examination and treatment - medical neglect.
- Injuries of multiple and mixed type.
- Inappropriate history
  - To the injury.
  - To the age of the child.
- A complicated or variable medical history.
- Inappropriate parental reaction - affect abnormal.
- Child's appearance and interaction with the parents are abnormal.
- Frequent visits to the surgery for trivial reasons.
- What the child says. (Record and date if appropriate)

A.7 Indicative behavioural signs of sexual abuse:

- Mood changes, tantrums, and aggression.
- Insecurity, fear of men or women.
- Sleep and eating disorders.
- Anxiety, depression, and despair.
- Withdrawal, secretiveness.
- Poor peer relations.
- Lies, stealing, arson.
- School failure, truancy.
- Running away from home.
- Suicide attempts, self-poisoning, self-mutilation.
- Unexplained possession of large quantities of money.
- Sexualised behaviour, e.g.
  - Drawing from a sexual context.
  - Knowledge of adult sexual behaviour.
  - Apparent sexual approaches to adults.

A.8 Indicative symptoms of emotional abuse:

- Lack of parent/child bonding - pushes child away, child clings then gives up.
- Sanctions of self-esteem - endless criticism, negative all the time.
- Lack of special/quality time-parents' lack of time, inability to play.
- Sanctions of interpersonal skills – lack of befriending.
- Discipline and control - a big issue.

A.9 Indicative symptoms of affluent abuse:

Four primary categories exhibit this kind of abuse -

- **Emotional neglect** – Lack of meaningful connection, emotional support, or parental engagement.
- **Educational neglect** – Excessive academic pressure or minimal oversight regarding schooling.
- **Medical neglect** – Rare in affluent homes, but possible if emotional connection influences care decisions.
- **Physical neglect** – Generally less common in wealthy households, though minimal supervision can still occur.

Affluent Neglect

↓ unmet emotional needs + lack of supervision
↓ sense of isolation, low boundaries, need for validation
↓ heightened vulnerability to grooming (attention, gifts, belonging)
↓ risk-taking behaviours (seeking excitement, independence, or coping mechanisms)
↓ increased exposure to drugs, alcohol, and exploitation

Remember:

✓Ask open-ended questions.

✓ Do not investigate.

✓ Record, date, and sign observations.

✓ Try to identify patterns.

Appendix 3: Questions Which Might Establish a Cause for Concern

Think of a of a child you have concerns about. Can you answer the following questions?

a) Is the child average weight/height?
b) Is the child clean and well kempt?
c) Does the child glow with health – do you know of any health problems?
d) Is attendance regular, are absences straightforward?
e) Does the child concentrate well?
f) Is the child achieving satisfactorily?
g) Is the child withdrawn, aggressive and moody?
h) Does the child understand 'taking turns"?
i) Can the child use individual experiences for creative work?
j) How does the child respond to adults?
k) 1Who are the child's friends?
l) Are those relationships equal?
m) Does the child have irritating habits?
n) What do you know about the child's homelife?
o) What is your most worrying concern?
p) How many questions can you answer for a student in your care?

Appendix 4: Guidance On How to Respond to a Child Wanting to Talk About Abuse

GENERAL POINTS	DO NOT SAY
• Show acceptance of what the child says (however unlikely the story may sound)	• Why didn't you tell anyone before?
• Keep calm	• I can't believe it!
• Look at the child directly	• Are you sure this is true?
• Be honest	• Why? How? When? Who? Where?
• Tell the child you will need to let someone else know – **do not promise confidentiality.** • A useful distinction to make when explaining this to students is between **privacy** and **confidentiality**: <u>you cannot promise to keep a conversation private, but confidentiality</u> means only informing the people who need to know to help the student	
• Even when a child has broken a rule, they are not to blame for the abuse	• Never make statements such as 'I am shocked, don't tell anyone else.
• Be aware that the child may have been threatened or bribed not to tell	
• Never push for information. If the child decides not to tell you after all, then accept that and let them know that you are always ready to listen • Never ask leading questions and try to record what the child says verbatim	

Helpful Things You May Say or Show	Concluding
• I understand what you are saying	• Again, reassure the child that they were right to tell you and show acceptance
• Thank you for telling me	• Let the child know what you are going to do next and that you will let them know what happens
• It is not your fault	• Contact the appropriate senior member of staff
• I will help you	• Consider your own feelings and seek pastoral support if needed

Appendix 5: Order of Procedures for All Staff

Concerns		Monitor
Suspicion/Allegation of Abuse ○ Disclosure by young person ○ Report by another person ○ Anonymous communication ○ Your observation/s		Record

Consult with School Designated Safeguarding Lead		
School Designated Safeguarding Lead		Record

Action 1		
Report concern to: School DSL Do NOT Investigate		Record

Confirmation		
Any verbal referral must be followed by completed form and passed to DSL		Record

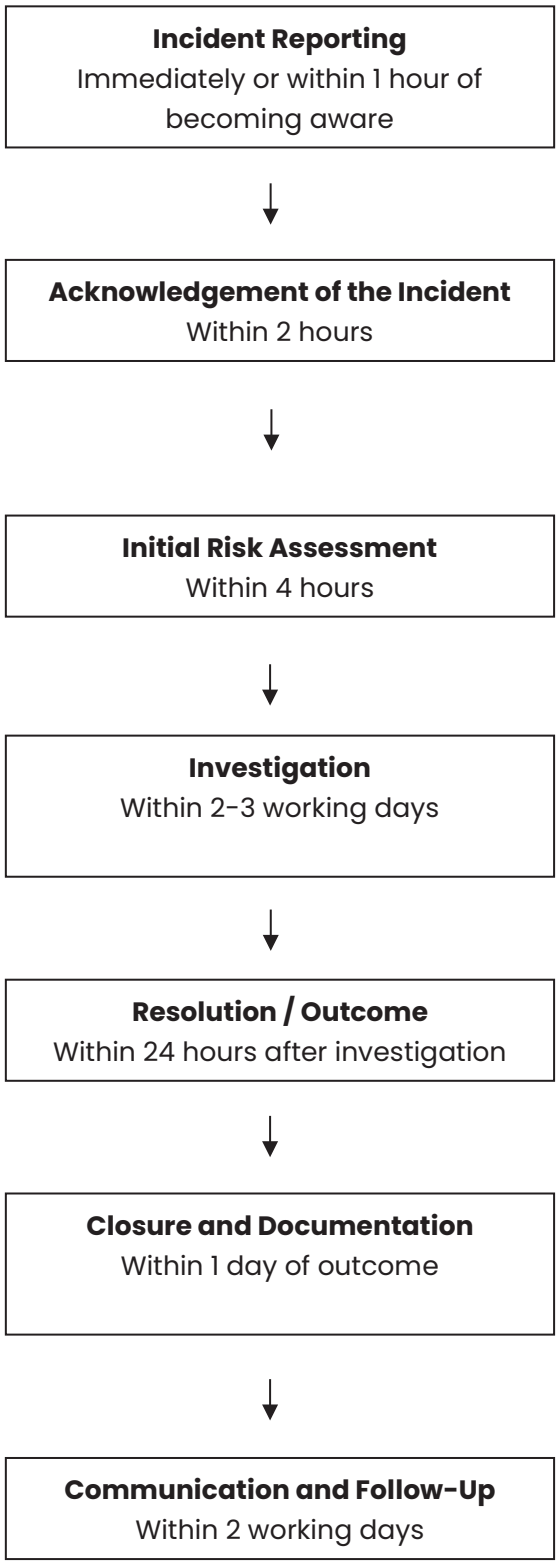
Action 2		
School DSL will fact find with all parties involved.		Record

Commitment		
You may be asked to attend the school's Child Protection Conference		Record

Review		
Provide additional information as appropriate		Record

Next Steps		
Safeguarding team will meet to determine next steps		Record

Appendix 6: Safeguarding Incident Management Process



Note: In cases where a **high-risk safeguarding concern** is identified, the standard step-by-step process may be bypassed in the interests of the child's immediate safety. Such cases must be reported **directly and without delay** to the **Designated Safeguarding Lead (DSL)**, followed immediately by escalation to the **Central Office Safeguarding Lead** and/or **Cluster Director** or the **Director of Education**. This ensures that urgent matters receive immediate senior oversight and that appropriate protective actions are taken without delay.

DSL Escalation Flowchart

Concern about a student

If a student is an immediate risk - report to DSL (or Principal if DSL not available) immediately / ideally within 1 hour by whatever means necessary – in person, telephone call, teams message.

Staff member to 'Add incident' on CPOMS. Tick 'Safeguarding / Child Protection' Within 24 hrs

DSL to allocate incident to 'High', 'Medium' or 'Low' and the subcategory (refer to CPOMS categories)

MEDIUM
Reported to Head of Safeguarding
within 24 hours,
if required
and determined by DSL

HIGH
DSL or Principal to alert Head of Safeguarding immediately/within 1 hour.

Risk assessment to be completed within 4 hours including decision on referral to external agency (in consultation with CO SG Lead)

LOW
Report to DSL within one working day;

Report to Head of Safeguarding only if a pattern emerges (or if escalates).

DUBAI:
Abuse:
Referral to KHDA on the same day, if possible (within 24 hours if not). CDA escalation form to be completed.
Mental health:
Family to seek external psychology/psychiatric assessment, student to have reintegration meeting once assessment complete and letter obtained stating the student is safe to be in school
Dubai Schools – advise Khalifa Fund in addition

ABU DHABI:
Abuse:
Referral to ADEK CPU on the same day, if possible (within 24 hours if not).
Mental health:
Family to seek external psychology/psychiatric assessment, student to have reintegration meeting once assessment complete and letter obtained stating the student is safe to be in school

Appendix 7: Taaleem Safeguarding levels

High	A serious safeguarding case that has been referred to an external agency (e.g., CDA, FCA, Police, MOE, KHDA/ADEK) and/or where the student and/or family are receiving support from an external source. The school implements structured monitoring (at least weekly or fortnightly) and is actively working with the family and external professionals to manage risk and support the child.
Moderate	A significant concern requiring consistent and ongoing monitoring within the school. While the case may not yet meet the threshold for referral to an external agency, it requires regular oversight, documented interventions, and active follow-up by the safeguarding team.
Low	A lower-level or emerging concern that requires occasional monitoring and recording by the school. These cases may involve early signs of vulnerability or risk factors but can generally be managed through in-school support and routine pastoral care, with escalation if risks increase.
Archived / Information-only Cases	**Historic cases**: concerns that are no longer current may be downgraded one level per year. All records will be retained on the student's safeguarding file for a minimum of five years after the child leaves school, and longer where required by law or best practice. **New cases under review**: where concerns have been logged but, due to limited information, the case does not yet meet the threshold for categorisation as high, medium, or low risk. This ensures the information is retained and reviewed as further evidence emerges.

Definition of Severity Levels

Level	Description	Examples
High	Imminent danger, ongoing abuse, likely or actual significant harm	Immediate risk to life/safety, trafficking, severe abuse, physical injuries, sexual abuse, disclosures from a child
Moderate	Possible harm or neglect, requires timely follow-up	Suspected emotional abuse, poor hygiene, low supervision
Low	Minor concerns, no immediate risk	Unexplained absences, minor change in behaviour

Appendix 8: Escalation Matrix & Flowchart

Severity	Reporting Timeframe	Reported to DSL	CO Safeguarding Team notification	Regulatory Body Notification
Critical or High	Immediately or ideally within 1 hour	Yes	Immediately or within 1 hour	In consultation with CO Safeguarding team
Moderate	Immediately or ideally within 1 hour	Yes	Within 24 hours, if required and determined by DSL	In consultation with CO Safeguarding team
Low	Before the end of the working day	Yes	Only if pattern emerges	As above if progressing to Moderate

Communication Pathways

Who reports: Teacher/staff to DSL → DSL to Principal → Central Office → Regulatory Authorities
How: Record on CPOMS or complete a Student Concern Record Form
Records: All decisions and actions logged securely in CPOMS or on the Student Concern Record Form locked in the DSL's office, if a school is not using CPOMS.

Escalation Flowchart

STAFF MEMBER IDENTIFIES CONCERN
↓
Report to DSL (Designated Safeguarding Lead)
↓
DSL assesses severity:
└── **Low:** Monitor & Record
└── **Moderate:** Parent meeting + report to school Principal + Taaleem Central Office
└── **High:** Immediate report to Taaleem Central Office + Regulatory Authorities
↓
All actions documented in CPOMS or Safeguarding Concern Record Form.

Appendix 9: Safeguarding Concern Record Form

Child's Name: _____

Date of Birth: _____

Year Group/Grade: _____

Please pass to the Designated Safeguarding Lead.

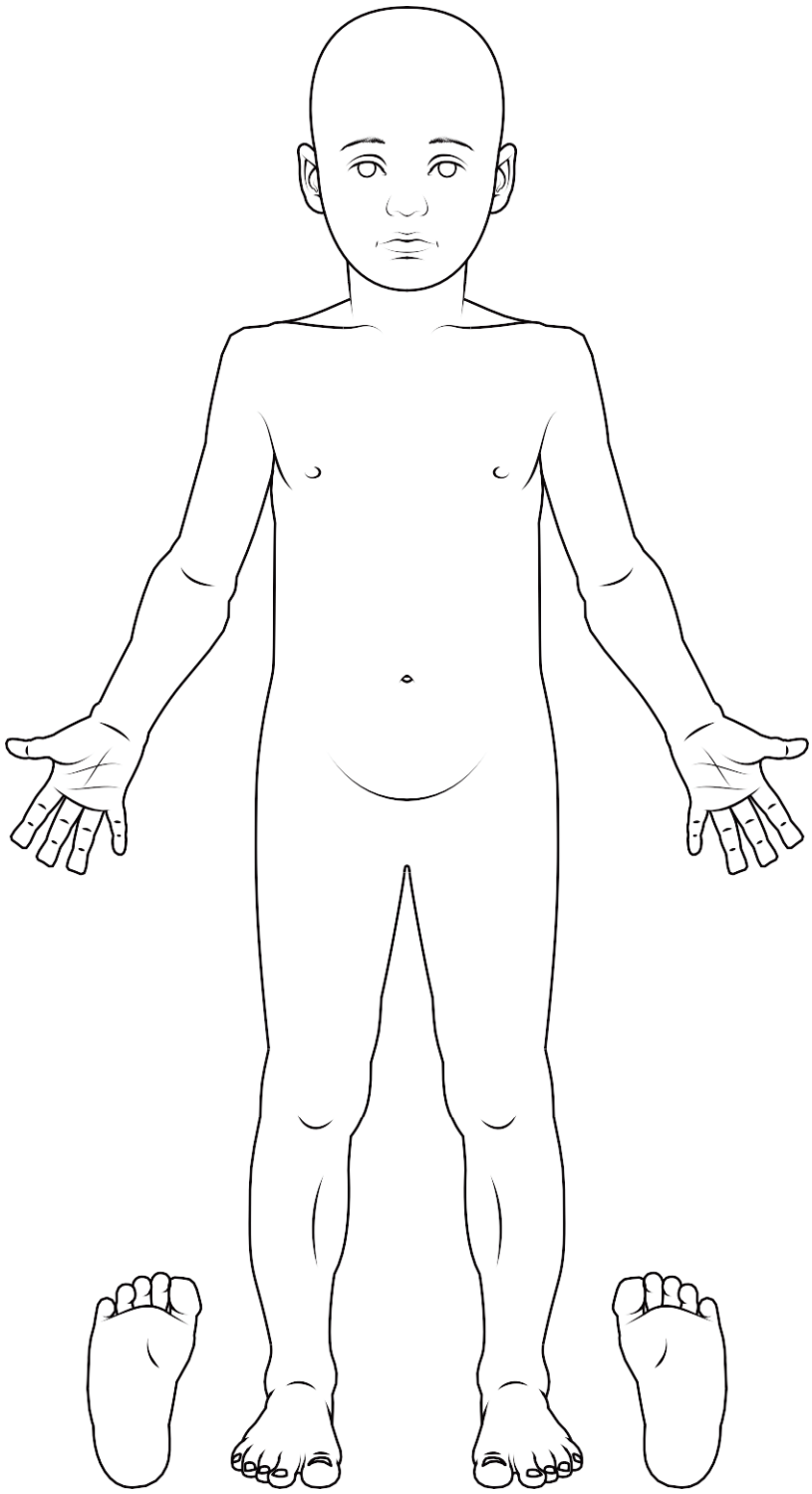
ANY CONCERNS REGARDING A STUDENT MUST BE RECORDED AND PASSED ON

Staff should not make any undertakings to absolute confidentiality

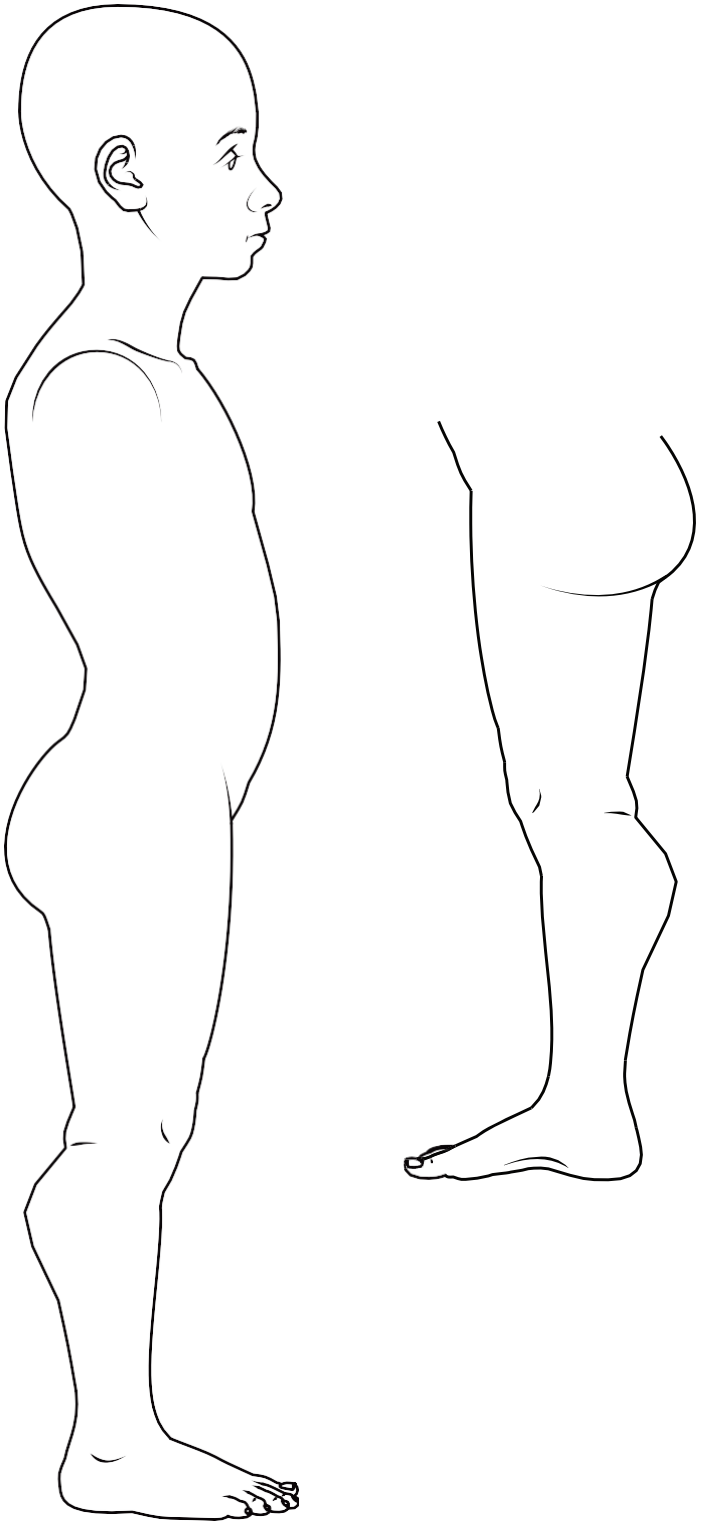
Staff should not investigate a situation

Details of Concern (Provide as much as detail as possible): Body map attached: Yes/No Date/Time of Observations/disclosure: Explanations given by child/adult:		
Date:	Person Reporting:	Signed:
To Whom reported:		Date:
Further Action Required and Rational (to be completed by the Child Protection Lead)		
By Whom:	Date:	Signed:
Author:	Date:	Signed

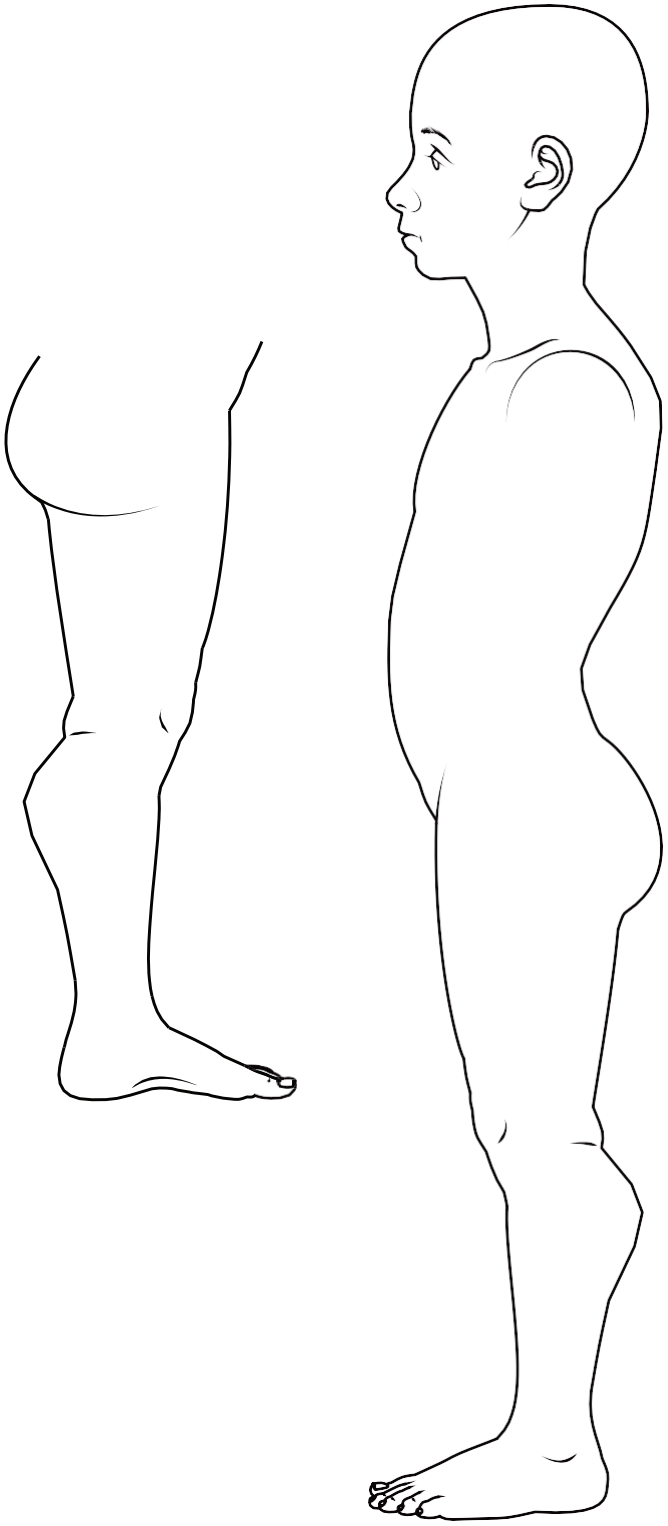
Appendix 10: Body Maps for Recording Disclosures & Concerns

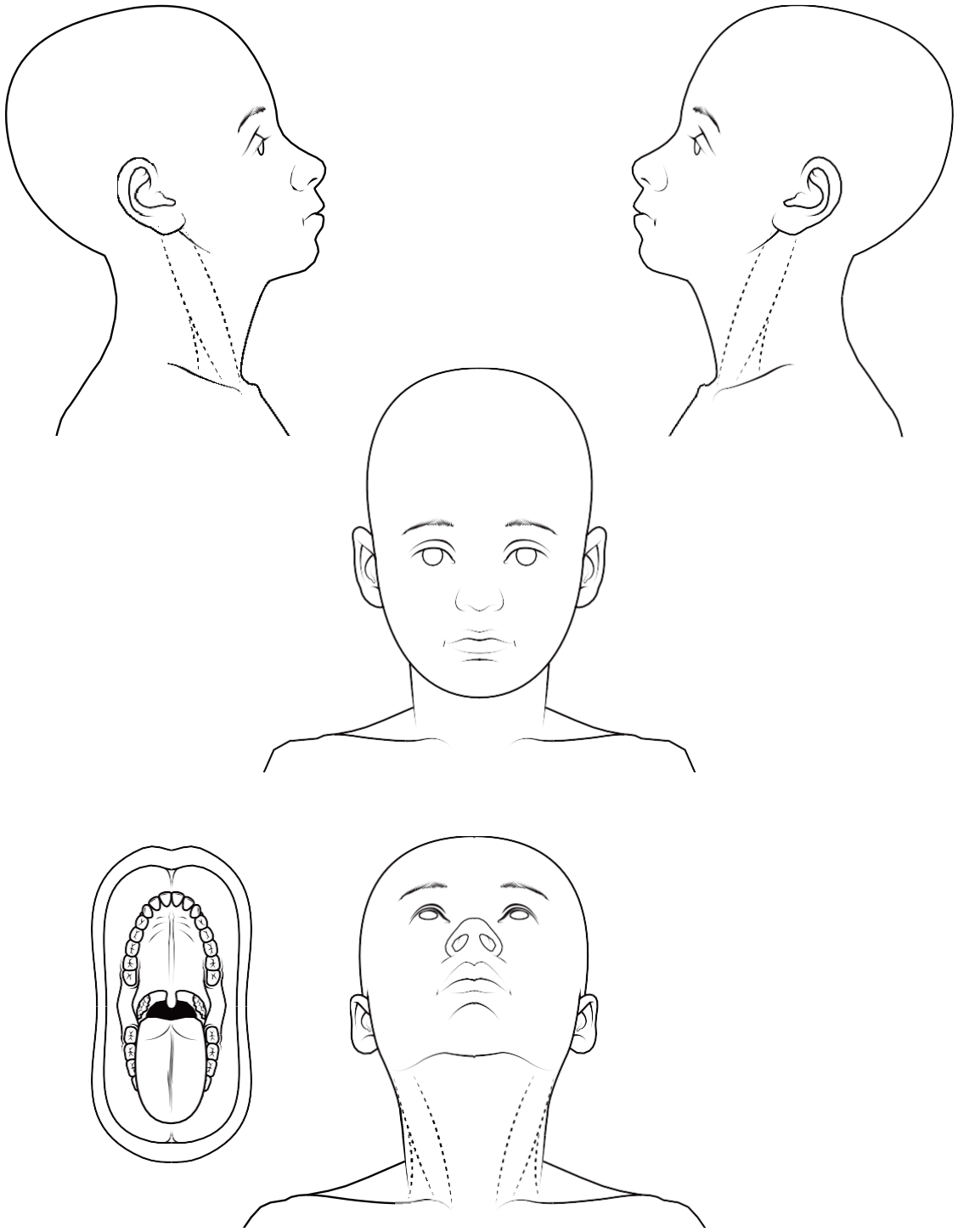


Outer Right & Inner Right Leg

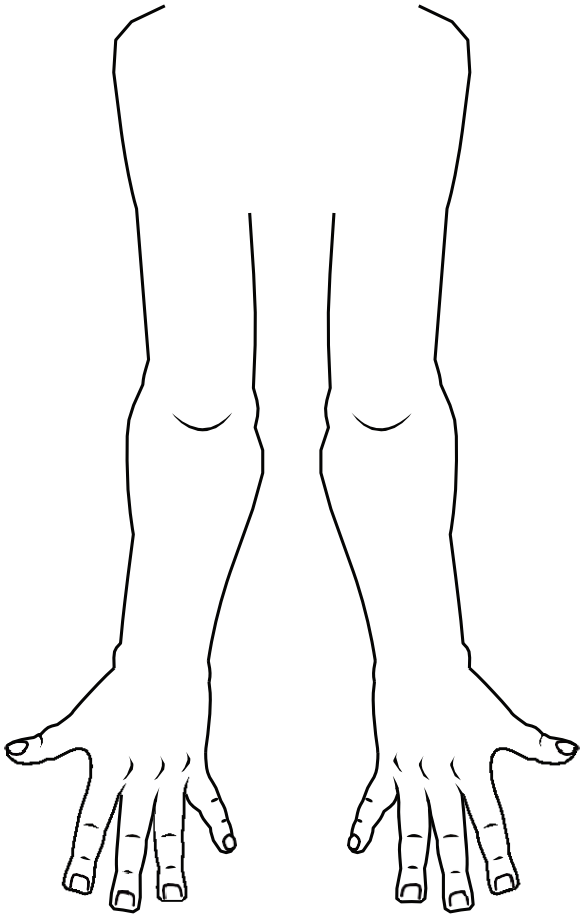


Outer Left and Inner Left Leg

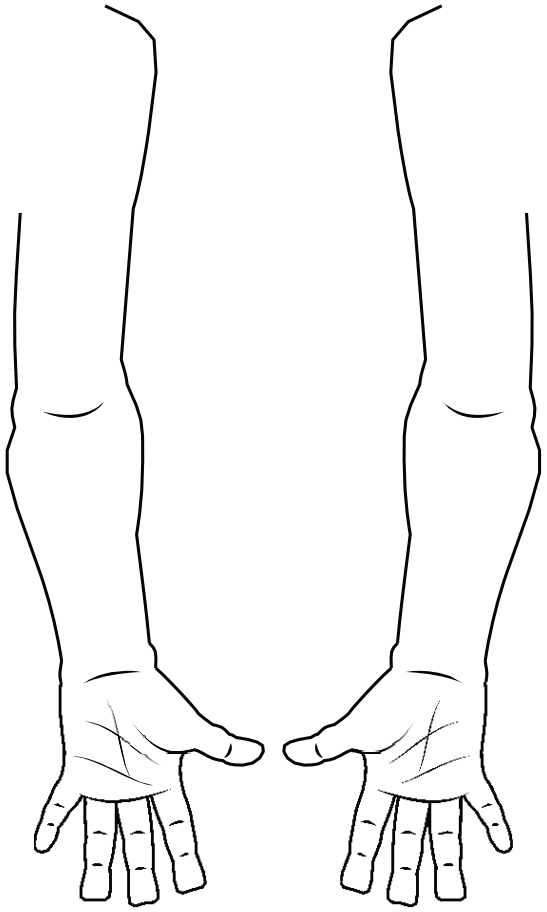




Left Dorsal



Left Palmar



Right dorsal

Right palmar

Appendix 11: Protection Against Allegations of Abuse for Staff

To protect students and yourself, you should be a positive role model to all students. To be such a role model, you should behave in a mature, respectful, safe, fair, and considered manner. For example, you must ensure that you:

- Treat all students equally - build positive professional relationships with students.
- Be aware of personal space: always avoid physical contact unless intervening to stop a physical injury happening.
- Do not embarrass or humiliate students.
- Are not sarcastic, and do not make jokes of a personal, sexual, racist, discriminatory, intimidating or otherwise offensive nature.
- Do not dress in a way that could lead someone to question your conduct, intentions, or suitability to care for other people's children.
- Do not contact, communicate, or meet with students outside of work (this includes email, text and other messaging systems including social networking sites) except for schoolwork and other professional reasons.
- Do not develop 'personal' or sexual relationships with students.

B.1 Do:

- Talk to your line manager/Head of School if you feel you lose control of your behaviour with a particular student or class.
- Engage with the lone working policy if participating in any lone working activities.
- Intervene if you see another member of staff acting in a way that could give rise to allegations of physical or emotional harm. Report this incident immediately to the DSL or school Principal. Do not ignore this behaviour. In the school Principal's absence, the incident should be reported to the Vice Principal who will inform the Principal. If the concern is regarding the Principal, then the Vice Principal will inform Taaleem Central Office or use the Whistleblowing hotline.
- Report any situation which you feel could give rise to an allegation against you or others immediately to the school Principal.
- Ensure that you have parental permission to take photographs and ensure there is a clear educational aim for any photography or filming.
- Ensure you are taking photograph(s) on a school owned device and not a personal device.
- Seek advice and support from the school Counsellor if needed.

B.2 Do not:

- Cover up glass panels on classroom doors. It is important that actions are seen.
- Behave in a way that could be perceived as physically intimidating, humiliating or out of control.
- Carry out acts that could be considered as favouritism e.g., giving birthday cards or gifts to a particular student outside the normal reward systems in school.
- Give lifts to students in your car on a one-to-one basis.
- Give out personal details, such as your phone number, mobile number, social media account or private email address.
- Store photos on your phone or personal devices/clouds of students. Use only school devices to take photos.

Examples of allegations against staff:

Physical Abuse Allegations	A teacher is accused of **hitting, slapping, or pushing** a. student A staff member is alleged to have **used excessive force** when restraining a child. A child reports being **physically punished** in a way that caused injury
Sexual Misconduct Allegations	A pupil reports that a staff member **touched them inappropriately**. A staff member is accused of **sending sexual messages or images** to a student. An allegation that a staff member has engaged in a **sexual relationship with a student**. Suspected **grooming behaviour**, online or in person.
Emotional Abuse Allegations	A staff member is accused of **bullying, threatening, or humiliating** a child. Repeated **derogatory or degrading comments** directed at a student. Intimidation or coercive behaviour causing significant distress.
Neglect or Professional Misconduct That Meets Harm Threshold	Deliberately **ignoring safeguarding disclosures**. Knowingly allowing a child to remain in a harmful situation. Being **under the influence of drugs or alcohol** while responsible for children.

Appendix 12: Low Level Concerns

Allegation

Behaviour which indicates that an adult who works with children has:

- behaved in a way that has harmed a child, or may have harmed a child;
- possibly committed a criminal offence against or related to a child;
- behaved towards a child or children in a way that indicates they may pose a risk of harm to children.

Low-Level Concern

Any concern – no matter how small, even if no more than a 'nagging doubt' – that an adult may have acted in a manner which:

- is not consistent with an organisation's Code of Conduct, and/or
- relates to their conduct outside of work which, even if not linked to a particular act or omission, has caused a sense of unease about that adult's suitability to work with children.

Appropriate Conduct

Behaviour which is entirely consistent with the organisation's Code of Conduct, and the law.

Examples of what constitutes a Low level Concern:

Professional Boundaries	A teacher regularly keeps one student behind after class without clear academic reason. Showing obvious favouritism (e.g., consistently giving one student special privileges). Sharing personal relationship problems or private life details with students. Giving small gifts to an individual student without transparency.
Communication & Social Media	Messaging a student through a personal Instagram/Snapchat account. Using informal or overly familiar language in emails ("miss you loads", heart emojis). Texting students outside school hours without copying in parents or using official systems. Accepting friend/follow requests from current student on personal accounts
Physical Contact	Initiating hugs when it isn't age-appropriate or necessary.

	Sitting very close to a student when there's no need. Placing a hand on a student's leg or back for longer than required. Closing the classroom door during one-to-one sessions without visibility panels being used.
Conduct During Lessons or Activities	Being alone in a PE changing room without another adult present. Taking photos of students on a personal mobile phone. Offering lifts to a student without prior agreement from leadership and parents. Not following supervision ratios on trips
Language or Attitude	Making "banter" comments about a student's appearance. Using sarcasm that humiliates a student. Dismissing a minor disclosure ("Oh, I'm sure it's nothing."). Losing temper in a way that intimidates but doesn't cross into clear abuse.
Grooming-Type Early Indicators (Still Low-Level Individually)	Seeking out opportunities to be alone with a particular student. Creating "special secrets" or private jokes. Frequently communicating with one student outside school systems.

Individually these might seem minor — but **patterns matter**.

Appendix 13: Safeguarding Meeting Minutes Template

Date: Day Month Year
Start Time: Start time
Location: School to insert

Chair: school to insert (Designated DSL)
Minute Taker: school to insert

Attendees: school to insert
Apologies: school to insert
Agenda:

1. Welcome
2. Review of Previous Minutes
3. Review safeguarding compliance (ILSAs, training, etc.)
4. Update on Ongoing Cases
5. Discussion of New Concerns
6. Discussion on cases closed
7. Actions and Next Steps
8. AOB (Any Other Business)

Meeting closed at: school to insert

Appendix 14: Safeguarding Training Log

School Name: School to insert_____
Safeguarding Training (circle one): Level 1 / Level 2 / Level 3
Name of Trainer & Signature:

_____
Date of Training: _____

Employee Name	Designation	Employee Signature	Certificate Received (circle one)
			Yes/No
			Yes/No
			Yes/No
			Yes/No
			Yes/No
			Yes/No
			Yes/No
			Yes/No
			Yes/No
			Yes/No
			Yes/No
			Yes/No
			Yes/No
			Yes/No
			Yes/No
			Yes/No
			Yes/No
			Yes/No
			Yes/No

Appendix 15: Required Documents for Regular Visitors to Taaleem Schools

All employed staff, volunteers, ILSAs, ECA providers and External Agency Providers regularly accessing school premises are expected to provide the school with copies of the following documents:

Passport Visa
Emirates ID–front and back
Medical card
Police check-dated within three months of commencing duties in the school
Details of Sponsor

For schools in Abu Dhabi, PASS approval needs to be sought before any adult can interact with students.

Note: ILSAs will be required to submit further documents which can be found in the Taaleem ILSA Policy.

Disclaimer