



SOCIAL CARE IRELAND
Protection of Children and Vulnerable Adults Policy

Contents

PART A: PRINCIPLES OF POLICY

- 1.0 Introduction and Scope
- 2.0. Principles governing this Policy
- 3.0. Aims and Objectives
- 4.0. What is a Child, Young Person or Vulnerable Person?
- 5.0. What is Child Abuse?

PART B: RESPONSIBILITIES

- 6.0. Responsibility of SCI
- 7.0. Garda Vetting
- 8.0. Policy Awareness
- 9.0. Designated Liaison Persons (DLP)
- 10.0 Risk Assessment
- 11.0. SCI Activities Involving Children – Best Practice

Part C: REPORTING AND RECORDING PROCEDURES

- 12.0. Identifying reasonable grounds for concern
- 13.0. Responding to a Disclosure from a Child/Vulnerable Person
- 14.0. Ongoing Support
- 15.0. Disclosure from Another Person
- 16.0. Retrospective Disclosure by Adult
- 17.0. Reporting Procedure
- 18.0. Reporting Suspicions or Allegations of Child Abuse
- 19.0. Making or Not Making a Report to TUSLA



- 20.0. Role of the Senior Manager
- 21.0. Dealing with Child Abuse Allegations against a SCI staff member
- 22.0. Information Sharing and Record-keeping
- 23.0. Confidentiality
- 24.0. Communication of Protection of Children & Vulnerable Adults Policy

APPENDIX 1 - DEFINITIONS OF CHILD ABUSE AND HOW THEY MIGHT BE RECOGNISED

APPENDIX 2 - DISCLOSURE FROM A CHILD/VULNERABLE PERSON

APPENDIX 3 - CHILD SAFEGUARDING – RELEVANT LEGISLATION

APPENDIX 4 – CONTACT DETAILS OF DESIGNATED LIAISON PERSON

APPENDIX 5 – ACCEPTANCE of SCI Protection of Children and Vulnerable Adults Policy FORM

APPENDIX 6 - SCHEDULE 2 OF THE CHILDREN FIRST ACT 2015 (SPECIFYING CLASSES OF MANDATED PERSONS)



Glossary

SCI - Social Care Ireland

Child or Young Person - a person under the age of 18 years, who is not or has not been married.

Child Protection and Welfare Report Form – form for use in reporting suspected or alleged abuse or welfare concerns to TUSLA (available at www.tusla.ie).

Children First National Guidance for the Protection and Welfare of Children – national, overarching guidance for the protection and welfare of children, published by the Department of Children and Youth Affairs. The current version was published in 2017.

Designated Liaison Person (DLP) – SCI appointed Board Member who is a resource to any staff member or volunteer who has a child or vulnerable person protection concern. DLPs are responsible for ensuring that reporting procedures are being followed correctly and promptly and act as a liaison person with other agencies.

Mandated Person – as defined in the Children First Act 2015, mandated persons have a statutory obligation to report concerns which meet or exceed a particular threshold to TUSLA and to cooperate with TUSLA in the assessment of mandated reports, where requested to do so. Attached is Schedule 2 of the Children First Act, 2015 specifying classes of Mandated Persons.

Retrospective Abuse Report Form (RARF) – form for use in reporting to TUSLA suspected or alleged retrospective abuse or welfare concerns, on adults who allege childhood abuse (available at www.tusla.ie).

TUSLA – TUSLA is Ireland's Child and Family Agency, the lead, statutory organisation for safeguarding children in Ireland.

Vulnerable Person - an adult who may be restricted in capacity to guard themselves against harm or exploitation or to report such harm or exploitation. The restriction of capacity may arise as a result of physical or intellectual impairment vulnerability to abuse is influenced by both context (e.g. social or personal circumstances) and individual circumstances.

PART A: PRINCIPLES

1.0 Introduction and Scope

1.1. Social Care Ireland (hereafter referred to as “SCI”) believes that the best interest of children, young people and vulnerable persons connected directly or indirectly to our services are paramount and is committed to ensuring the highest possible standards to meet its responsibility to protect and safeguard such persons for whom it has responsibility.

1.2. The guiding principles of this policy are underpinned by Children First: National Guidance for the Protection and Welfare of Children, TUSLA’s Child Safeguarding; A Guide for Policy, Procedure and Practice, the United Nations Convention on the Rights of the Children and current legislation, such as the Children First Act 2015, Child Care Act 1991, Protections for Persons Reporting Child Abuse Act 1998, the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012-2016 and Article 42A of the Irish Constitution recognising the natural and imprescriptible rights of children and the paramountcy of a child’s welfare.

1.3. This policy applies to all staff, Board members, volunteers, contractors and any other persons who encounter children, young people and vulnerable persons in the context of contact through SCI.

1.4. SCI is committed to periodically reviewing its policy and safeguarding procedures if necessary due to service issues or changes in legislation or national policy.

2.0. Principles Governing this Policy

2.1. This policy is based on the following principles:

- a) The protection of children, young people and vulnerable persons must always come first.
- b) (b) Children, young people and vulnerable persons must be protected, treated with respect, listened to and have their own views taken into consideration.
- c) The safest possible practices must be adopted to minimise the possibility of harm or accidents happening to children, young people and vulnerable persons.
- d) Staff of SCI have a duty to raise concerns about the behaviour of others, which may be harmful to children, young people and vulnerable persons with whom SCI interacts.
- e) Staff of SCI may at times work with children, young people and vulnerable persons must maintain a policy of openness with parents/carers/or those acting in loco parentis (subject to paragraph 26 which deals with confidentiality).
- f) On behalf of SCI, the Designated Liaison Persons (DLP) will liaise with statutory agencies responsible for child protection and welfare and will be the resource person to any worker or volunteer who has child protection concerns. The DLP must report child protection concerns to the Child and Family Agency if they believe the threshold for harm as defined under the Children First act 2015 has been met.



3.0. Aims and Objectives

3.1. The aims and objectives of this policy are to promote good practice by:

- a) Providing children, young people and vulnerable persons with the appropriate safety and protection while involved with SCI.
- b) Advising staff of the protection measures which are in place in SCI to ensure that reasonable care is exercised in dealing with children, young persons and vulnerable persons.
- c) Assisting staff to make informed decisions and confident responses to specific child protection issues.
- d) Giving direction and guidance to SCI Board of Directors and staff in dealing with allegations or suspicions of abuse (physical, emotional, sexual and neglect), with protection and wellbeing of the child and vulnerable person being the most important consideration.

4.0 What is a Child, Young Person or Vulnerable Person?

4.1 A child or young person is defined by the Child Care Act, 1991 as someone under 18 years of age, excluding a person who is or has been married.

4.2 This policy covers groups of young persons under the age of 18 who may connect with SCI either directly or indirectly.

4.3. This policy also covers vulnerable persons who may be restricted in capacity to guard themselves against harm or exploitation or to report such harm or exploitation. The restriction of capacity may arise as a result of physical or intellectual impairment, vulnerability to abuse is influenced by both context (e.g. social or personal circumstances) and individual circumstances.

5.0 What is Child Abuse?

5.1. Child abuse can be categorised into four different types: neglect, emotional abuse, physical abuse and sexual abuse.

5.2. A child may be subject to one or more forms of abuse at any given time. A single isolated incident can amount to child abuse. Refer to Appendix 1 for comprehensive descriptions of the various forms of abuse and examples thereof.

PART B: RESPONSIBILITIES

6.0. Responsibility of SCI

6.1. All workers and volunteers have a responsibility to safeguard children, young people and vulnerable persons and to report any concerns they may have for the protection and welfare of a child, young person or vulnerable person.

6.2 Additionally, if a staff member or volunteer falls within a class of Mandated Person under the Children First Act, 2015 then they must report concerns to the Child and Family Agency if they believe the threshold for harm has been met. This can be done in conjunction with SCI's DLP or by the Mandated Person directly. The DLP should be kept informed of any report made by a Mandated Person, who is a staff member or volunteer, to the Child and Family Agency.

7.0. Garda Vetting

7.1. The National Vetting Bureau (Children and Vulnerable Persons) Act 2012-2016 (the 2012-2016 Acts) apply to SCI which, as per the Act is a “relevant organisation”, i.e. it is a body that employs persons to undertake “relevant work or activities” relating to children or vulnerable persons. Therefore, SCI staff, volunteers and others working within SCI who undertake “relevant work or activities” relating to children or vulnerable persons may be subject to mandatory Garda Vetting.

7.2. Should Garda vetting be required, the Garda Vetting process will be highlighted in the Conditions of Appointment for any job and should also again be noted during the selection process (e.g. at interview).

7.3. The candidate will be sent a Garda Vetting Invitation Form, and instructions for completion of the form. This document will highlight for applicants the importance of full disclosure. They must complete, sign and return the form to SCI.

7.4. The Garda Vetting form once returned will be forwarded to the National Vetting Bureau via the Garda Vetting Liaison Person(s), in this case the IASCM SIG. Depending on the outcome of Garda Vetting the recruitment process can be finalised.

7.5 No offer of employment will be made until such time as clearance for the applicant in question is received.

7.6. If the NVB discloses that a candidate or staff member has a conviction or a pending prosecution, a review process will apply.

7.7 Third-Party Contract staff and other non-staff persons may need to be vetted by their employer.

7.8. Garda Vetting of existing staff will be conducted on a three-year cyclical basis from date of completion of the initial garda vetting. This will be reviewed on implementation of Section 20 of the Act relating to Re-vetting and updated accordingly.

8.0. Policy Awareness

8.1. This Policy will be brought to the attention of all staff. This is to ensure that all staff are familiar with the Policy and understand the requirements for compliance with it. Training will be provided where needed.

9.0. Designated Liaison Persons Within SCI

9.1. SCI has appointed a Designated Liaison Person (DLP) and Deputy Designated Liaison Persons (DDLPs) (refer to Appendix 4 for contact details) who are a resource person to any staff member or volunteer who has child or vulnerable person protection concerns and who will liaise with outside agencies. The DLP is mandated to report concerns to the Child and Family Agency if they believe the threshold of harm has been met.

9.2. The role of the DLP is to receive adult safeguarding, child protection and welfare concerns from workers/volunteers and to report concerns which a certain threshold to the relevant authority, such as with child protection or welfare concerns when the threshold of 'reasonable grounds for concern' to TUSLA or directly to An Garda Síochána which reach or exceed a legally defined threshold as per Section 14 of the Children First Act 2015.

9.3. Mandated persons must report past, present or likely harm to a child. ('Harm' in relation to a child is defined below in paragraph 13.2). A Mandated Person may also be requested to assist the Child and Family Agency with their assessment.

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10.0. Photography and Use of Images

10.1. It is important that measures are taken to safeguard children and young people from misuse of their personal data and that their personal information (e.g. identity or location) are not made publicly available without their knowledge and informed consent.

10.2 Photographs or images are defined as data and therefore come within the scope of the Data Protection Acts 1998, 2003 and 2018. This means that a person's consent must be sought before such personal data can be used.

10.3 Children and their parents/carers must be informed in advance if and when images will be taken and the purpose(s) the image will be used for, including whether it will be provided to a third party, uploaded to the internet etc. The child and the parents/carers must then provide informed written consent to the use of the image. The image must not be used in any way which exceeds the consent provided. Adults must give their express permission for their images to be used. This would generally be used for social media purposes or during conferences.

Part C: REPORTING AND RECORDING PROCEDURES

11.0. Identifying Reasonable Grounds for Concern

11.1. There are many reasons why a worker/volunteer may be concerned about the welfare or protection of a child, young person or vulnerable person. In general concerns come to SCI through a third party such as over the phone, email or through social media, when a member of SCI or a member of the public will make contact with us for advice. This can also happen at SCI events such as training or conferences. In the first instance the SCI staff member or volunteer must advise the third party to report their concerns to the relevant authority through their organisations reporting procedure.

11.2. Children First: National Guidance for the Protection and Welfare of Children, 2017 lists the following as reasonable grounds for concern:

- Evidence, for example an injury or behaviour that is consistent with abuse and its unlikely to have been caused in any other way.
- Any concern about possible sexual abuse.
- Consistent signs that a child is suffering from emotional or physical neglect.
- A child saying or indicating by other means that they have been abused.
- Admission or indication by an adult or a child of an alleged abuse * they committed.
- An account from a person who saw a child being abused.

***Refer to Appendix 1 for further information regarding the Definitions of the types of Child Abuse and how they might be recognised.**

11.3 Regardless of how a concern comes to a worker/volunteer's attention, it must be reported to the Designated Liaison Person (DLP).

11.4 The DLP in conjunction with the person who raised the concern will decide if reasonable grounds for concern exist as per 14.2 above.

11.5 If the DLP decides not to make a report, the worker/volunteer is still entitled to make a report to TUSLA under Children First: National Guidance for the Protection and Welfare of children, should they wish to do so. The Individual worker has protections under the Protection for Persons Reporting Child Abuse act 1998, should they report independently. They are also entitled to have the reasons why the DLP has decided not to report at this time provided to them in writing.

11.6 Mandated Persons can either report concerns that meet or exceeds the threshold for reporting under the legislation independently or through a joint mandated report with their DLP or another person. Joint reporting is the preferred option.

11.7 If reporting independently of SCI, mandated persons must inform the DLP that a report under the Children First Act 2015 has been made and copy of the report should be provided to the DLP.

11.8 All reporting by SCI will be completed via TUSLA's online web portal only

12.0. Responding to a Disclosure from a Child

12.1. A child or young person may disclose to a staff member or volunteer that they have been or are being harmed or abused.

12.2. For guidelines on responding to a disclosure from a child, including appropriate responses and questions to ask, refer to Appendix 2.

12.3. The staff member must make an accurate record of the disclosure and comply with the reporting procedure at paragraph 18 below.

12.4. Following a disclosure by a child, young person or vulnerable person, it is important that the staff member/volunteer continues in a supportive relationship with the child/young person/vulnerable person. Disclosure is a huge step for a child, young person or vulnerable person. Workers/volunteers must continue to offer support, particularly by:

- Maintaining a positive relationship with the child/young person/vulnerable person.
- Keeping lines of communication open by listening carefully to the child/young person/vulnerable person.
- Continuing to include the child/young person/vulnerable person in the usual activities. Any further disclosure must be treated as a first disclosure and responded to as indicated above. Where necessary, immediate action must be taken to ensure the child/young person/vulnerable person's safety.

13.0. Disclosure from another Person

13.1. If a complaint is made to a staff member of SCI whether from another staff member of SCI or a third party to the effect that there is reasonable suspicion that abuse is alleged to have taken place against a child, young person or vulnerable person, the staff member of SCI must:

- a) Request the complainant to make a written statement which they will provide to a member of the DLP.
- b) If the complainant is unknown to the staff member of SCI, ask the person making the allegation for their name and contact number or address.
- c) Tell the complainant that there is a procedure in place for dealing with such allegations and that the person responsible will be in contact with them as soon as possible.

13.2. All records of any allegations in relation to child protection which are made to a staff member must be regarded as highly confidential and must be stored by the DLP in a secure location.

14.0. Retrospective Disclosure by Adult

14.1. There are an increasing number of adults disclosing abuse that took place during their childhood. Often such disclosures come to light when people attend counselling. They also sometimes arise in adult services and services which work with parents/guardians and families.

14.2. If an adult makes a disclosure to a SCI staff member of abuse suffered during their childhood, and it is believed there may be a current risk to any child who may be in contact with the alleged abuser, the DLP must be informed. The DLP must inform TUSLA by using the Retrospective Abuse Report Form (RARF) available at www.tusla.ie and/or An Garda Síochána.

15.0. Reporting Procedure

15.1. All SCI Staff and volunteers who have any concerns regarding the welfare must;

- i. Gather as much information as possible to support their concerns and keep an accurate record of their findings.
- ii. Liaise with the DLP.

16.0. Reporting Suspicions or Allegations of Child Abuse

16.1. The DLP shall report any reasonable suspicion or allegation of child abuse to:

- a) TUSLA – via TUSLA’s online web portal only. Contact details for local social work teams are available at <https://www.tusla.ie/children-first/web-portal/>, should the DLP or SCI staff member wish to call TUSLA’s duty social work service for an informal consultation and/or (in the case of an immediate risk to a child) An Garda Síochána;
- b) The DLP (in the case of an allegation against a SCI employee or an individual, even if working on a voluntary/unpaid basis on behalf of SCI).

16.2 The DLP must inform TUSLA where there are reasonable grounds for concern that a child may have been abused, is being abused or is at risk of abuse. This report must be made without delay to TUSLA. All reports made by the DLP to TUSLA must include as much as possible of the information sought in the Child Protection and Welfare Report Form available at www.tusla.ie.

16.3 In the case of an emergency where it is believed that a child is at serious and imminent risk, and it is not possible to make contact with TUSLA, the DLP must contact An Garda Síochána.

16.4 Dual reporting maybe applicable in certain rare instances under the Criminal Justice (Withholding of Information Against Children and Vulnerable Persons) Act 2012. Should this be the case the Chair of the Board of SCI must be informed before proceeding.

16.5 The DLP may also contact TUSLA in an emergency situation to provide information as to serious and imminent risk, and this must be followed up by providing the report in written format within 72 hours of first contact.

16.6 The DLP must ensure that any response made by a staff member of SCI against whom an allegation has been made shall be passed to TUSLA and/or An Garda Síochána when submitting the formal notification report.

16.7 The DLP must not investigate whether the allegations or complaints are valid. Such an investigation is the responsibility of TUSLA and/or An Garda Síochána.

16.8. Where the DLP or a staff member of SCI reports suspicions of child abuse reasonably and in good faith to designated officers of TUSLA or any members of An Garda Síochána, the Protection of Persons Reporting Child Abuse Act, 1998 protects them from civil or criminal liability for doing so. The law does not require proof that the abuse in fact happened, only that there are reasonable grounds for concern that the abuse has occurred.

17.0. Making or Not Making a Report to TUSLA

17.1. If the DLP is not sure whether or not to report the matter to TUSLA, the DLP must seek advice from TUSLA without giving identifying details. The DLP must make it clear that they are not making a report but simply seeking advice.

17.2. If TUSLA advises that a report must be made to TUSLA the DLP must act on that advice:

- a) The DLP must keep a record in writing of that fact together with a record of any advice given by TUSLA.
- b) The DLP must take particular advice from TUSLA on whether the child's parent/guardian/carer must be notified. If the DLP decides not to inform the parent/guardian/carer, this decision and the reasons for it must be recorded by the DLP. If, for any reason it is not possible to inform the child's parent/guardian, the DLP must inform TUSLA of that fact and the reason why.
- c) The DLP must tell TUSLA if the child's parent/guardian has not been informed so that it can take the necessary appropriate steps.
- d) The DLP must inform the person who made the report in writing that a report will be made to TUSLA.

If TUSLA advises that no action is required:

- a) The DLP must keep a record in writing of that fact together with a record of any advice given by the TUSLA.
- b) If the DLP remains concerned about a child's welfare, a report in writing may be made to TUSLA.
- c) The DLP shall inform the person who made the report in writing that a report will not be made to TUSLA, while advising that person that if they remain concerned about a child's welfare, they are free to contact TUSLA. A suspicion that is not supported by any objective indication of abuse or neglect would not constitute a reasonable suspicion or reasonable grounds for concern.

18.0 Role of the Chair of the Board

18.1 In the event that an allegation is made against a staff member of SCI under this Policy, the Chair of the Board will ensure that an appropriate investigation is carried out in respect of that allegation. This will normally involve an investigation in accordance with the terms of SCI's Disciplinary Procedure, which may be adapted having regard to the gravity/sensitivity of the issue, e.g. the services of an external expert such as a Child Psychologist may be required. The Chair of the Board will have overall responsibility for such matters but may delegate the tasks required to a suitable member of the Board. Should the Chair of the Board be the subject of the allegation, the DLP will nominate a member of the Board to fulfil this role.

18.2 The first priority will be to ensure that no child is exposed to unnecessary risk. The Chair of the Board or their nominee, in consultation with the DLP, will as a matter of urgency take any necessary protective measures. These measures must be proportionate to the level of risk.

18.3 The Chair of the Board or their nominee will ensure that an individual case record is maintained of the detail of the case and any action taken and resolution of the matter.

18.4 Information of any nature will only be divulged on a need-to-know basis.

18.5 An employee against whom an allegation is made may be placed on administrative leave pending the processing or outcome of an investigation. This is a protection for all involved and not a disciplinary sanction. This decision will be taken by the Chair of the Board or their nominee in consultation with the DLP.

19.0 Dealing with Child Abuse Allegations against a SCI Staff Member

19.1 If an allegation is made against a staff member of SCI, the most important consideration to be taken into account by the DLP and TUSLA is the protection, safety and well-being of children. However, because of the involvement of a staff member of SCI, TUSLA and the DLP have a duty of care to that staff member too. As a result, all action will be guided by the rules of natural justice, and the procedural and contractual arrangements in force at that time.

19.2. It is acknowledged staff members may be subject to erroneous or malicious allegations. Therefore, any allegation of abuse must be dealt with sensitively and the staff member of SCI fairly treated. This includes the right not to be judged in advance of a full and fair investigation.

19.3. The Chair of the Board or their nominee shall, unless to do so would put a child at increased risk of harm, take every reasonable effort to advise the person against whom an allegation of child abuse has been made of the following:

- a) The fact that an allegation has been made against them; and
- b) Make available details of the nature of the allegations. The Chair of the Board or their nominee shall liaise with the DLP in relation to the appropriateness of such a notification.

19.4 The staff member of SCI shall be afforded an opportunity to respond. The staff member of SCI shall be told that their response may also have to be passed to TUSLA /or An Garda Síochána if there are reasonable grounds for suspicion of abuse.

19.5 A follow-up of allegations of abuse against a staff member of SCI shall be made in consultation with TUSLA and/or An Garda Síochána. An immediate meeting shall be arranged with one or both of these agencies for that purpose.

19.6 It is important to note that if an allegation is made against a staff member of SCI that there are two (2) procedures to be followed:

- a) Reporting procedure in respect of the allegation; and
- b) An appropriate investigation and potential subsequent action under the SCI Disciplinary Procedures.

19.7 In general, the same person must not have responsibility for dealing with both procedures. The DLP is responsible for reporting the matter to TUSLA and/or An Garda Síochána, while the Chair of the Board or their nominee is responsible for addressing the relevant procedural issues applicable in respect of (b) above.

19.8 The initiation of an investigation and/or the SCI Disciplinary Procedures does not affect the presumption of innocence and is not a finding of guilt or wrongdoing. Findings (if any) shall not be made until an appropriate investigation has been undertaken.

20.0. Information Sharing and Record-keeping

20.1. It is important that information about concerns for the welfare or protection of a child/young vulnerable person is gathered early and shared with the DLP as soon as possible.

20.2. Records must be factual and include details of contacts, consultations and any actions taken.

20.3. All records regarding child protection concerns, allegations and disclosures will be kept securely with the DLP. Records may include:

- (a) The written report from the staff member who received the information or who has concerns.
- (b) The date and time of disclosure, allegation or actual abuse incident.
- (c) An indication of the parties involved (including third parties) including names and addresses.
- (d) Any suspicions consequent on the information and the factual grounds for such suspicions.
- (e) The response of the parents/guardians to the information (if any).
- (f) The decision not to inform the parents/guardian together with the reason for same.
- (g) Details (dates, times, people, place) of any subsequent meetings and communications of interested parties.

- h) Decisions re referral (or not) to TUSLA, or An Garda Síochána including how, why, when and by whom the decision was taken.
- (i) Details of any advice received from TUSLA, including when and from whom.
- (j) Details of any updates given to the staff member who made the initial report in writing.
- (k) Details of what action SCI has taken.

20.4 Records will only be shared on a need to know basis in the best interests of the child/young person/vulnerable person.

20.5 SCI will cooperate with TUSLA in the sharing of records where a child protection or welfare issue arises.

21.0. Confidentiality

21.1. Where child protection and welfare concerns arise, information must be shared on a 'need to know' basis in the best interest of the child/young person/vulnerable person with the relevant statutory authorities and with parents/guardians.

21.2. No undertakings regarding secrecy can be given. Those working with children/young people/vulnerable persons and families and in adult services must make this clear to the parents/ guardians and to the child/young person/vulnerable persons.

21.3. The proportionate provision of information to the statutory agencies necessary for the protection of a child (i.e. where the DLP or Mandated Person has deemed the threshold of harm to have been met) is not a breach of confidentiality or data protection.

21.4. Parents/guardians and children/young people/vulnerable persons have a right to know if personal information is being shared, unless doing so could put the child/young person at further risk or may put the reporter at risk.

22.0. Communication of Protection of Children and Vulnerable Adults Policy

22.1. SCI is committed to taking positive measures to educate all staff in awareness of Child Protection. Our commitment is to bring this Policy to the attention of all involved in SCI.

22.2. This will be achieved in respect of staff members by the following:

- Induction for new staff members.
- Circulation of copies of the Policy to all staff members, Board members and volunteers by e-mail and available on the SCI Website.
- A copy of the statement will be provided to SCI members and members of the public on request.

22.3. This Policy and Guidelines will be subject to operational review.

Appendix 1

DEFINITIONS OF CHILD ABUSE AND HOW THEY MIGHT BE RECOGNISED

Below is a reproduction of information provided for in the Children First: National Guidance for the Protection and Welfare of Children, 2017.

1. Types of Child Abuse

Child abuse can be categorised into four different types: neglect, emotional abuse, physical abuse and sexual abuse. A child may be subjected to one or more forms of abuse at any given time. Abuse and neglect can occur within the family, in the community or in an institutional setting. The abuser may be someone known to the child or a stranger, and can be an adult or another child. In a situation where abuse is alleged to have been carried out by another child, you must consider it a child welfare and protection issue for both children and you must follow child protection procedures for both the victim and the alleged abuser. The important factor in deciding whether the behaviour is abuse or neglect is the impact of that behaviour on the child rather than the intention of the parent/carer. The definitions of neglect and abuse presented in this section are not legal definitions. They are intended to describe ways in which a child might experience abuse and how this abuse may be recognised.

Neglect

Child neglect is the most frequently reported category of abuse, both in Ireland and internationally. Ongoing chronic neglect is recognised as being extremely harmful to the development and well-being of the child and may have serious long-term negative consequences. Neglect occurs when a child does not receive adequate care or supervision to the extent that the child is harmed physically or developmentally. It is generally defined in terms of an omission of care, where a child's health, development or welfare is impaired by being deprived of food, clothing, warmth, hygiene, medical care, intellectual stimulation or supervision and safety. Emotional neglect may also lead to the child having attachment difficulties. The extent of the damage to the child's health, development or welfare is influenced by a range of factors. These factors include the extent, if any, of positive influence in the child's life as well as the age of the child and the frequency and consistency of neglect. Neglect is associated with poverty but not necessarily caused by it. It is strongly linked to parental substance misuse, domestic violence, and parental mental illness and disability. A reasonable concern for the child's welfare would exist when neglect becomes typical of the relationship between the child and the parent or carer. This may become apparent where you see the child over a period of time, or the effects of neglect may be obvious based on having seen the child once.

The following are features of child neglect:

- Children being left alone without adequate care and supervision
- Malnourishment, lacking food, unsuitable food or erratic feeding
- Non-organic failure to thrive, i.e. a child not gaining weight due not only to malnutrition but also emotional deprivation

- Failure to provide adequate care for the child's medical and developmental needs, including intellectual stimulation
- Inadequate living conditions – unhygienic conditions, environmental issues, including lack of adequate heating and furniture
- Lack of adequate clothing
- Inattention to basic hygiene
- Lack of protection and exposure to danger, including moral danger or lack of supervision appropriate to the child's age
- Persistent failure to attend school
- Abandonment or desertion

Emotional Abuse

Emotional abuse is the systematic emotional or psychological ill-treatment of a child as part of the overall relationship between a caregiver and a child. Once-off and occasional difficulties between a parent/carer and child are not considered emotional abuse. Abuse occurs when a child's basic need for attention, affection, approval, consistency and security are not met, due to incapacity or indifference from their parent or caregiver. Emotional abuse can also occur when adults responsible for taking care of children are unaware of and unable (for a range of reasons) to meet their children's emotional and developmental needs. Emotional abuse is not easy to recognise because the effects are not easily seen. A reasonable concern for the child's welfare would exist when the behaviour becomes typical of the relationship between the child and the parent or carer. Emotional abuse may be seen in some of the following ways:

- Rejection
- Lack of comfort and love
- Lack of attachment
- Lack of proper stimulation (e.g. fun and play)
- Lack of continuity of care (e.g. frequent moves, particularly unplanned)
- Continuous lack of praise and encouragement
- Persistent criticism, sarcasm, hostility or blaming of the child
- Bullying
- Conditional parenting in which care or affection of a child depends on their behaviour or actions
- Extreme overprotectiveness
- Inappropriate non-physical punishment (e.g. locking child in bedroom)
- Ongoing family conflicts and family violence
- Seriously inappropriate expectations of a child relative to their age and stage of development

There may be no physical signs of emotional abuse unless it occurs with another type of abuse. A child may show signs of emotional abuse through their actions or emotions in several ways. These include insecure attachment, unhappiness, low self-esteem, educational and developmental underachievement, risk taking and aggressive behaviour. It must be noted that no one indicator is conclusive evidence of emotional abuse. Emotional abuse is more likely to impact negatively on a child where it is persistent over time and where there is a lack of other protective factors.

Physical Abuse

Physical abuse is when someone deliberately hurts a child physically or puts them at risk of being physically hurt. It may occur as a single incident or as a pattern of incidents. A reasonable concern exists where the child's health and/or development is, may be, or has been damaged as a result of suspected physical abuse. Physical abuse can include the following:

- Physical punishment
- Beating, slapping, hitting or kicking, pushing, shaking or throwing
- Pinching, biting, choking or hair-pulling
- Use of excessive force in handling • Deliberate poisoning
- Suffocation
- Fabricated/induced illness
- Female genital mutilation

The Children First Act 2015 includes a provision that abolishes the common law defence of reasonable chastisement in court proceedings. This defence could previously be invoked by a parent or other person in authority who physically disciplined a child. The change in the legislation now means that in prosecutions relating to assault or physical cruelty, a person who administers such punishment to a child cannot rely on the defence of reasonable chastisement in the legal proceedings. The result of this is that the protections in law relating to assault now apply to a child in the same way as they do to an adult. However, this does not apply retrospectively to an alleged incident of "reasonable chastisement" which occurred prior to the enactment of Section 28 of the Children First Act, 2015 on 11 December 2015.

Sexual Abuse

Sexual abuse occurs when a child is used by another person for their gratification or arousal, or for that of others. It includes the child being involved in sexual acts (masturbation, fondling, oral or penetrative sex) or exposing the child to sexual activity directly or through pornography. Child sexual abuse may cover a wide spectrum of abusive activities. It rarely involves just a single incident and, in some instances, occurs over a number of years.

Child sexual abuse most commonly happens within the family, including older siblings and extended family members. Cases of sexual abuse mainly come to light through disclosure by the child or their siblings/friends, from the suspicions of an adult, and/or by physical symptoms. It must be remembered that sexual activity involving a young person may be sexual abuse even if the young person concerned does not themselves recognise it as abusive.

Examples of child sexual abuse include the following:

- Any sexual act intentionally performed in the presence of a child
- An invitation to sexual touching or intentional touching or molesting of a child's body whether by a person or object for the purpose of sexual arousal or gratification
- Masturbation in the presence of a child or the involvement of a child in an act of masturbation
- Sexual intercourse with a child, whether oral, vaginal or anal
- Sexual exploitation of a child, which includes:
 - Inviting, inducing or coercing a child to engage in prostitution or the production of child pornography [for example, exhibition, modelling or posing for the purpose of sexual arousal, gratification or sexual act, including its recording (on film, videotape or other media) or the manipulation, for those purposes, of an image by computer or other means]
 - Inviting, coercing or inducing a child to participate in, or to observe, any sexual, indecent or obscene act
 - Showing sexually explicit material to children, which is often a feature of the 'grooming' process by perpetrators of abuse
 - Exposing a child to inappropriate or abusive material through information and communication technology
 - Consensual sexual activity involving an adult and an underage person.

An Garda Síochána will deal with any criminal aspects of a sexual abuse case under the relevant criminal justice legislation. The prosecution of a sexual offence against a child will be considered within the wider objective of child welfare and protection. The safety of the child is paramount and at no stage must a child's safety be compromised because of concern for the integrity of a criminal investigation. In relation to child sexual abuse, it must be noted that in criminal law the age of consent to sexual intercourse is 17 years for both boys and girls. Any sexual relationship where one or both parties are under the age of 17 is illegal. However, it may not necessarily be regarded as child sexual abuse. Details on exemptions for mandated reporting of certain cases of underage consensual sexual activity can be found in Chapter 3 of the Children First Guidelines, 2017. The Children First Act, 2015 states that the obligation to report does not arise in cases of suspected consensual sexual activity involving young persons aged between 15-17, where the other party to the sexual activity is not more than two years older and there is no material difference in maturity, no intimidation/exploitation and the young person does not wish for it to be disclosed.

Circumstances which may make children more vulnerable to harm

If you are dealing with children, you need to be alert to the possibility that a welfare or protection concern may arise in relation to children you come in contact with. A child needs to have someone they can trust in order to feel able to disclose abuse they may be experiencing. They need to know that they will be believed and will get the help they need. Without these things, they may be vulnerable to continuing abuse.

Some children may be more vulnerable to abuse than others. Also, there may be particular times or circumstances when a child may be more vulnerable to abuse in their lives. In particular, children with disabilities, children with communication difficulties, children in care or living away from home, or children with a parent or parents with problems in their own lives may be more susceptible to harm.

The following list is intended to help you identify the range of issues in a child's life that may place them at greater risk of abuse or neglect. It is important for you to remember that the presence of any of these factors does not necessarily mean that a child in those circumstances or settings is being abused.

Parent or Carer factors:

- Drug and alcohol misuse
- Addiction, including gambling
- Mental health issues
- Parental disability issues, including learning or intellectual disability
- Conflictual relationships
- Domestic violence
- Adolescent parents

Child Factors:

- Age
- Gender
- Sexuality
- Disability
- Mental health issues, including self-harm and suicide
- Communication difficulties
- Trafficked/Exploited
- Previous abuse
- Young carer

Community Factors:

- Cultural, ethnic, religious or faith-based norms in the family or community which may not meet the standards of child welfare or protection required in this jurisdiction
- Culture-specific practices, including:
 - Female genital mutilation
 - Forced marriage
 - Honour-based violence
 - Radicalisation

Environmental Factors:

- Housing issues
- Children who are out of home and not living with their parents, whether temporarily or permanently
- Poverty/Begging
- Bullying
- Internet and social media-related concerns

Poor motivation or willingness of parents/guardians to engage:

- Non-attendance at appointments
- Lack of insight or understanding of how the child is being affected
- Lack of understanding about what needs to happen to bring about change
- Avoidance of contact and reluctance to work with services
- Inability or unwillingness to comply with agreed plans

BULLYING

It is recognised that bullying affects the lives of an increasing number of children and can be the cause of genuine concerns about a child's welfare.

Bullying can be defined as repeated aggression – whether it is verbal, psychological or physical – that is conducted by an individual or group against others. It is behaviour that is intentionally aggravating and intimidating and occurs mainly among children in social environments such as schools. It includes behaviours such as physical aggression, cyberbullying, damage to property, intimidation, isolation/exclusion, name calling, malicious gossip and extortion. Bullying can also take the form of abuse based on gender identity, sexual preference, race, ethnicity and religious factors. With developments in modern technology, children can also be the victims of non-contact bullying, via mobile phones, the internet and other personal devices.



While bullying can happen to any child, some may be more vulnerable. These include: children with disabilities or special educational needs; those from ethnic minority and migrant groups; from the Traveller community; lesbian, gay, bisexual or transgender (LGBT) children and those perceived to be LGBT; and children of minority religious faiths.

There can be an increased vulnerability to bullying among children with special educational needs. This is particularly so among those who do not understand social cues and/or have difficulty communicating. Some children with complex needs may lack understanding of social situations and therefore trust everyone implicitly. Such children may be more vulnerable because they do not have the same social skills or capacity as others to recognise and defend themselves against bullying behaviour.

Bullying in schools is a particular problem, due to the fact that children spend a significant portion of their time there and are in large social groups. In the first instance, the school authorities are responsible for dealing with such bullying. School management boards must have a code of behaviour and an anti-bullying policy in place. If you are a staff member of a school, you must also be aware of your school's anti-bullying policy and of the relevant guidelines on how it is handled.

In cases of serious instances of bullying where the behaviour is regarded as possibly abusive, you may need to make a referral to TUSLA and/or An Garda Síochána.

Appendix 2

DISCLOSURE FROM A CHILD

Child Safeguarding: A Guide for Policy, Procedure and Practice, TUSLA, 2017

A child or young person may disclose to a worker or volunteer that they have been or are being harmed or abused. Children/young people will often have different ways of communicating that they are being abused. If a child or young person hints at or tells a worker or volunteer that they are being harmed by someone, be it a parent/carer, another adult or by another child/young person (peer abuse), it must be treated in a sensitive way. Remember, a child/young person may disclose abuse to you as a trusted adult at any time during your work with them. It is important that you are aware and prepared for this.

- Be as calm and natural as possible.
- Remember that you have been approached because you are trusted and possibly liked. Do not panic.
- Be aware that disclosures can be very difficult for the child/young person.
- Remember, the child or young person may initially be testing your reactions and may only fully open up over a period of time.
- Listen to what the child/young person has to say. Give them the time and opportunity to tell as much as they are able and wish to.
- Do not pressurise the child/young person. Allow them to disclose at their own pace and in their own language.
- Conceal any signs of disgust, anger or disbelief.
- Accept what the child or young person has to say – false disclosures are very rare.
- It is important to differentiate between the person who carried out the abuse and the act of abuse itself. The child/young person quite possibly may love or strongly like the alleged abuser while also disliking what was done to them. It is important therefore to avoid expressing any judgement on, or anger towards the alleged perpetrator while talking with the child/young person
- It may be necessary to reassure the child/young person that your feelings towards them have not been affected in a negative way as a result of what they have disclosed.
- Reassure the child/young person that they have taken the right action in talking to you.

When asking questions:

- Questions must be supportive and for the purpose of clarification only.
- Avoid leading questions, such as asking whether a specific person carried out the abuse.
- Also, avoid asking about intimate details or suggesting that something else may have happened other than what you have been told. Such questions and suggestions could complicate the official investigation.



Confidentiality – Do not promise to keep secrets

At the earliest opportunity, tell the child/young person that:

- You acknowledge that they have come to you because they trust you.
- You will be sharing this information only with people who understand this area and who can help. There are secrets which are not helpful and must not be kept because they make matters worse. Such secrets hide things that need to be known if people are to be helped and protected from further on-going hurt. By refusing to make a commitment to secrecy to the child/young person, you do run the risk that they may not tell you everything (or, indeed, anything) there and then. However, it is better to do this than to tell a lie and ruin the child/young person's confidence in yet another adult. By being honest, it is more likely that the child/young person will return to you at another time.

Appendix 3

CHILD SAFEGUARDING – RELEVANT LEGISLATION

The following legislation relates to the safeguarding of children as listed in the Children First: National Guidance for the Protection and Welfare of Children, 2017. This list is not comprehensive but gives a sense of the breadth and wide array of relevant legislation.

- Child and Family Agency Act 2013

<http://www.oireachtas.ie/documents/bills28/acts/2013/a4013.pdf>

- Child Care Act 1991

<http://www.irishstatutebook.ie/eli/1991/act/17/enacted/en/print.htm>

- Children Act 2001

<http://www.irishstatutebook.ie/eli/2001/act/24/enacted/en/pdf>

- Children First Act 2015

<http://www.irishstatutebook.ie/eli/2015/act/36/enacted/en/pdf>

- Criminal Justice (Withholding of Information on Offences against Children and Vulnerable Persons) Act 2012

<http://www.irishstatutebook.ie/eli/2012/act/24/enacted/en/pdf>

- Criminal Justice Act 2006, Section 176: Reckless Endangerment of Children

<http://www.irishstatutebook.ie/eli/2006/act/26/enacted/en/pdf>

- Data Protection Acts 1988 and 2003

<http://www.irishstatutebook.ie/eli/1988/act/25/enacted/en/html>

<http://www.irishstatutebook.ie/eli/2003/act/6/enacted/en/pdf>

- Domestic Violence Act 1996

<http://www.irishstatutebook.ie/eli/1996/act/1/enacted/en/pdf>

- Education (Welfare) Act 2000

<https://www.oireachtas.ie/documents/bills28/acts/2000/a2200.pdf>

- Education Act 1998

<http://www.irishstatutebook.ie/eli/1998/act/51/enacted/en/pdf>

- Freedom of Information Act 2014

<http://www.irishstatutebook.ie/eli/2014/act/30/enacted/en/pdf>

- National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016

<http://www.irishstatutebook.ie/eli/2012/act/47/enacted/en/pdf>



- Non-Fatal Offences against the Person Act 1997
<http://www.irishstatutebook.ie/eli/1997/act/26/enacted/en/pdf>
- Protected Disclosures Act 2014
<http://www.irishstatutebook.ie/eli/2014/act/14/enacted/en/pdf>
- Protections for Persons Reporting Child Abuse Act 1998
<http://www.irishstatutebook.ie/eli/1998/act/49/enacted/en/pdf>
- The Irish Constitution, Bunreacht Na hÉireann – Article 42A
<http://www.irishstatutebook.ie/eli/cons/en#article42A>



APPENDIX 4

CONTACT DETAILS - DESIGNATED LIAISON PERSON DLP

Leon Ledwidge – DLP

0858065896

leonlewidge1@gmail.com

David Durney – Deputy DLP

0879679947

david.durney@freshstart.ie



APPENDIX 5

**ACCEPTANCE FORM ACCEPTANCE OF SCI PROTECTION OF CHILDREN AND VULNERABLE
ADULTS POLICY**

I have read the above Policy and agree to abide by its contents. There is no reason why I should be considered unsuitable to work with children, young people or vulnerable persons. I understand it is my responsibility to ensure that this Policy is brought to the attention of other staff members or volunteers involved with the organisation.

Signature: _____

Date: _____

Print Name: _____

This form must be retained by the DLP for all staff and volunteers of SCI or their nominee.

APPENDIX 6

SCHEDULE 2 OF THE CHILDREN FIRST ACT 2015 (SPECIFYING CLASSES OF MANDATED PERSONS)

SCHEDULE 2

[No. 36.] Children First Act 2015.

[2015.]

SCHEDULE 2

Section 2 MANDATED PERSONS

The following classes of persons are specified as mandated persons for the purposes of this Act:

1. Registered medical practitioner within the meaning of section 2 of the Medical Practitioners Act 2007.
2. Registered nurse or registered midwife within the meaning of section 2(1) of the Nurses and Midwives Act 2011.
3. Physiotherapist registered in the register of members of that profession.
4. Speech and language therapist registered in the register of members of that profession.
5. Occupational therapist registered in the register of members of that profession.
6. Registered dentist within the meaning of section 2 of the Dentists Act 1985.
7. Psychologist who practises as such and who is eligible for registration in the register (if any) of members of that profession.
8. Social care worker who practises as such and who is eligible for registration in accordance with Part 4 of the Health and Social Care Professionals Act 2005 in the register of that profession.
9. Social worker who practises as such and who is eligible for registration in accordance with Part 4 of the Health and Social Care Professionals Act 2005 in the register (if any) of that profession.
10. Emergency medical technician, paramedic and advanced paramedic registered with the Pre-Hospital Emergency Care Council under the Pre-Hospital Emergency Care Council (Establishment) Order 2000 (S.I. No. 109 of 2000).
11. Probation officer within the meaning of section 1 of the Criminal Justice (Community Service) Act 1983.
12. Teacher registered with the Teaching Council.



13. Member of An Garda Síochána.
14. Guardian ad litem appointed in accordance with section 26 of the Child Care Act 1991.
15. Person employed in any of the following capacities:
 - (a) manager of domestic violence shelter;
 - (b) manager of homeless provision or emergency accommodation facility;
 - (c) manager of asylum seeker accommodation (direct provision) centre;
 - (d) addiction counsellor employed by a body funded, wholly or partly, out of moneys provided by the Oireachtas;
 - (e) psychotherapist or a person providing counselling who is registered with one [2015.] Children First Act 2015. [No. 36.] SCH.2 of the voluntary professional bodies;
 - (f) manager of a language school or other recreational school where children reside away from home;
 - (g) member of the clergy (howsoever described) or pastoral care worker (howsoever described) of a church or other religious community;
 - (h) director of any institution where a child is detained by an order of a court;
 - (i) safeguarding officer, child protection officer or other person (howsoever described) who is employed for the purpose of performing the child welfare and protection function of religious, sporting, recreational, cultural, educational and other bodies and organisations offering services to children;
 - (j) child care staff member employed in a child care staff member employed in a pre-school service within the meaning of Part VII A of the Child Care Act 1991;
 - (k) person responsible for the care or management of a youth work service within the meaning of section 2 of the Youth Work Act 2001;
16. Youth worker who -
 - (a) holds a professional qualification that is recognised by the National Qualifications Authority in youth work within the meaning of section 3 of the Youth Work Act 2001 or a related discipline, and
 - (b) is employed in a youth work service within the meaning of section 2 of the Youth Work Act 2001.
17. Foster carer registered with the Agency.
18. A person carrying on a pre-school service within the meaning of Part VIIA of the Child Care Act 1991.