Respond

Child Safeguarding Policy and Procedures

Version: 7

Date: March 223

Department Owner: Head of Services

Department Expert: Services teams

VERSION CONTROL

Policy Expert Author	Version	Reviewed By	Date of Review/Approval
Sean O Regan	5.0	Board of Directors	February 2018
Lisa o' Rourke David Parslow	6.0	Louisa Carr	05/03/20
	6.1	EMT	12/03/20
	6.2	CSRA	18/03/20
Lisa O'Rourke	6.3	Edel o Connor- Tulsa Children First & Advice Officer	22/05/2020
	6.4	Board of directors	16/06/2020
Lisa O'Rourke & Nessa Aylmer	6.5		March 2020
Lisa O'Rourke & Maria Gaynor	7.0	EMT	January 2024
		CSRA	Jan 2024
		Board	Approved 30th of January 2024

TABLE OF CONTENTS

1.0 INTRODUCTION

Respond is an Approved Housing Body that builds, provides, and manages social housing. In addition to building homes, it also provides a number of community based support services that provide wraparound supports for children, families and older persons. These services include Early Learning and School Age Services, Care Family Homeless Services, Day-care Services for Older Persons, Refugee Resettlement and Family Support Programmes. Respond believe that children and young people have a fundamental right to be brought up in a nurturing safe environment and through our we work we endeavour to foster an organisational culture that views the rights and protection of children and young persons as paramount. Respond is committed to the full implementation of this policy across the whole organisation and to promoting the highest standards of child safeguarding practices in line with the '*Children First: National Guidance for the Protection and Welfare of Children*' (2017) *and Children First Act (2015), Child Care Act 1991 (Early Years Services) Regulations 2016 and amended Regulations (Built on Part 12 of the Child and Family Agency Act 2013)*

2.0 OUR GUIDING PRINCIPLES

This policy outlines Respond's key principles and procedures to safeguard children and young people that ensures the health, safety and welfare of children and young people in our care remains our top priority. It provides clear procedures for all Respond staff and volunteers on how they are expected to respond to any concerns or allegation of child protection that they may observe during the course of their work. Our guiding principles applies to all paid staff, volunteers, board members and students on work placement within our organisation. All board members, staff, volunteers and students must sign up to abiding by these guiding principles and our child safeguarding procedures.

This policy is 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 Child*, the *Children First Act 2015*, *Child Care Act 1991 as amended* , *Protections for Persons Reporting Child Abuse Act 1998* Equal Status Act 2004 and the *National Vetting Bureau (Children and Vulnerable Adults) Act 2012* in line with the *Children First Act 2015, Criminal Justice Act 2006, Criminal Justice (Withholding of Information on Offences against Children and Vulnerable Persons) Act 2012 and Criminal Law (Sexual Offences) Act 2017* which outlines the statutory responsibilities placed on Respond as a service provider to children and young people.

Our guiding principles are:

- To keep children safe from harm and ensure the health, safety and welfare of every child and young person who attends our service is paramount.
- All children and young people have an equal right to attend a service that respects them as individuals and encourages them to reach their potential, regardless of their background.
- A commitment to uphold the rights of every child and young person, who attends our service, including the right to be kept safe, protected from harm, to be listened to and be heard.
- To promote positive relationships, which are secure, responsive and respectful and which provide consistency and continuity over time, are the cornerstone of the child's wellbeing;

Our guiding principles and procedures to safeguard children and young people reflect national policy and legislation and we will review our guiding principles and child safeguarding procedures every two years. Our guiding principles apply to everyone in our organisation. All staff /volunteers must conduct themselves in a way that reflects the principles of our organisation.

Children First: *National Guidance for the Protection and Welfare of Children (2017)*

3.0 SCOPE

This policy applies to all paid staff, volunteers, board members, students on work placement within our organisation and contractors/subcontractors who are engaged by Respond. This policy is to be implemented and communicated to all staff, volunteers, board members, students on work placement and all contractors/sub-contractors who are engaged by Respond.

4.0 OBJECTIVES OF POLICY

4.1 To clearly outline Respond's commitment to keeping children safe from harm through our guiding principles and safeguarding procedures.

4.2 To set out clear procedures that ensures all service provision is child-centred and that the best interest of the child remain paramount in all that we do.

4.3 To state Respond's responsibilities under *Children First legislation* and *Children First: National Guidance for the Protection and Welfare of Children.*

4.4 To comply with national legislation as well as best practice guidance and to set out clear roles and responsibilities within the organisation that support a culture of compliance.

4.5 To outline the implementing, monitoring and review of our guiding principles and child safeguarding procedures.

4.6 To outline procedures and practices that foster a whole organisation approach to promoting child safeguarding.

4.7 To ensure that Respond implements a Child Safeguarding Statement under the Children's First Act 2015 and make it available to parents and guardians, Tusla and other members and stakeholders on request.

5.0 KEY ROLES & RESPONSIBILITIES IN CHILD SAFEGUARDING

The safety and welfare of children is everyone's responsibility and all Respond staff and volunteers have a responsibility to report a reasonable concern about a child's welfare or protection. In order to ensure that our guiding principles and safeguarding procedures are effective our organisation has identified key roles that will be responsible for the implementation, communication and review of this policy. They are the following;

5.1 National Child Safeguarding Coordinator

Respond have appointed a National Child Safeguarding Coordinator who will be responsible for leading the development of the child safeguarding procedures and ensuring that policies and procedures are consistent with best practice. They will work with a subgroup made up of regional managers, national managers of the relevant frontline services to ensure that best practice procedure and implementation supports the best interest of children, families and staff. See

Appendix 1 for name and contact details for National Child Safeguarding Coordinator and advisory subgroup.

5.2 Designated Liaison Persons (DLP)

The role of a DLP is to be act as a direct contact/resource for any staff member who has a child protection or welfare concern. They are responsible for ensuring that Respond's organisational reporting procedures are followed correctly and promptly and act as a liaison person with other agencies. Due to the scale and different levels of services provision across the whole organisation. Respond have a combination of National, Regional, Local DLP and Deputy DLP roles. The following outlines the structure of the DLP roles within Respond;

5.2.1 Regional DLP

Respond have appointed 12-named regional DLP who act as a resource to all Respond staff and volunteers who has a child protection and welfare concern. Respond have appointed two deputy DLP's that cover the absence of any of the 12 regional DLP's. See Appendix 1 for the name and contact details of regional DLP's.

5.2.2. Local DLP

Respond have appointed a named relevant person in each of their Early Childhood Care and Education Services and Family Homeless Services. Each of these services has a named DLP and Deputy DLP. See Appendix 1 for the name and contact details of the local DLP's.

5.3 Mandated person

Mandated persons are people who have contact with children and/or families and who, because of their qualifications, training and/or employment role are in a key position to help protect children from harm. As defined in Schedule 2 (see appendix 2) of the Children First Act 2015 the following staff roles in Respond are mandated persons under this policy;

- The Managers of the Family Homeless Services.
- The managers of the Early Childhood Care & Education Services.
- All practitioners that work in Early Childhood Care & Education Services.

5.3.1 Procedure for maintaining a list of Mandated Persons in Respond

- A list of mandated persons will be compiled for each of the six Family Homeless Services and the 17 Early Childhood Care and Education services as per Schedule 2 of the Children First Act 2015.
- The list will be updated by the Service Managers of the Family Homeless Services and the Regional Early Years Managers when a new mandated persons commences and ceases employment with Respond.
- The list will be stored in a secure folder in the child protection drive on MS Teams.
- The list will be reviewed annually at the national DLP team meetings to ensure they are up to date.

5.3.2 What are the legal obligations of a mandated person?

Mandated persons have two main legal obligations under the Children First Act 2015. These are;

1. To report the harm of children above a defined threshold to Tusla.
2. To assist Tusla, if requested, in assessing a concern, which has been the subject of a mandated report.

Section 14(1) of the Children First Act 2015 states;

'…. *Where a mandated person knows, believes or has reasonable grounds to suspect, on the basis of information that he or she has received, acquired or becomes aware of in the course of his or her employment or profession as such a mandated person, that a child-*

(a) Has been harmed
(b) Is being harmed or
(c) Is a risk of being harmed?

He or she shall, as soon as practicable, report that knowledge, belief or suspicion, as the case may be, to Tusla.'

Section 14 (2) of the Children First Act 2015 also places obligations on mandated persons to report any disclosures made by a child;

Where a child believes that he or she –

(a) Has been harmed
(b) Is being harmed or
(c) Is at risk of being harmed,

And discloses this belief to a mandated person in the course of a mandated person's employment or profession as such a person, the mandated person shall… as soon as practicable report that disclosure to Tusla.'

Section 2 of the Children First Act 2015 defines harm as the follows;

'*Harm means in relation to a child-*

(a) Assault, ill treatment or neglect of the child in a manner that seriously affects, or is likely to seriously affect the child's health, development or welfare, or
(b) Sexual abuse of the child.' (see appendix 3 for signs and symptoms of child abuse)

5.3.3 Mandated Assisting

It is usual practice for professionals who have ongoing contact with a child/young person, and where there is concern about possible abuse, to continue to engage with Tulsa's social work team to assist in the protection of the child. To support and reinforce this practice, the Children First Act 2015 provides that all mandated persons can be asked by Tusla to provide any necessary and proportionate assistance to aid Tusla in assessing the risk to a child arising from a mandated report.

5.3.4 Sharing Information

The Data Protection Acts 1988, 2003 and 2018 do not prevent the sharing of information on a reasonable and proportionate basis for the purposes of child protection. Tusla has the authority to share information about a child who is the subject of a risk assessment with a mandated person who has been asked to provide assistance. Information shared by Tusla must not be shared with a third party, unless Tusla considers it appropriate and authorises in writing that the information may be shared. It's Respond policy to work collaboratively with Tusla and the Gardaí and will adhere to Gardaí requests for information under Section 41(b) of the Data Protection Act 2018. This allows a data controller operating in Ireland to disclose personal data to a third party to the extent that this is *"necessary and proportionate for the purposes of preventing, detecting, investigating or prosecuting criminal offences."* – Number 7 of 2018 Data Protection Act 2018, Part 3, Pg. 38 Accessed www.irishstatuebook.ie

5.4 Designated Liaison Person (DLP)

The Designated Liaison Person is responsible for ensuring that reporting procedures are followed, so that child welfare and protection concerns are referred promptly to Tusla. Respond have Regional DLP's and Local DLP's

The key role of the Designated Liaison Person (DLP)

1. To ensure the child safeguarding reporting procedures of the organisation are followed by all staff and volunteers.
2. To provide support and guidance to staff and volunteers in implementing the child safeguarding procedures
3. **Regional DLPs will attend Team meetings of departments working with children and families annually, to refresh implementation of this policy**
4. To consult and liaise with external agencies, namely Tusla, and where necessary, An Garda Siochána under the Criminal Justice Withholding of Information on Offences against Children and Vulnerable Persons Acts 2012
5. To support staff to maintain quality records and reports relating to child safeguarding
6. To record all concerns or allegations brought to their attention regarding child protection and welfare concerns.
7. To ensure prompt responses to a child welfare concern.
8. To ensure prompt reporting of child protection and welfare concerns to Tusla and Gardaí.
9. To manage confidentiality and **ensure that, where appropriate, parents are informed by the most appropriate staff member,** that a report is being made to Tusla.
10.

5.5 Procedure for responding to and reporting child protection and welfare concerns

All Respond staff and volunteers are expected to adhere to relevant procedures if they have reasonable grounds for concern that a child may have been, is being, or is at risk of being abused .It is not necessary for you to prove that abuse has occurred to report a concern to Tusla. All that is required is that you have reasonable grounds for concern. (See Appendix 3 for types of child abuse and how they may be recognised)

*** Note: In reporting on a concern, you are not alleging abuse**.

5.6 The threshold for all staff in identifying reasonable grounds for a child protection or welfare concern

There are many reasons a worker/volunteer may be concerned about the welfare or protection of a child or young person. Children First: National Guidance for the Protection and Welfare of Children states that Tusla should always be informed when a person has reasonable grounds for concern that a child may have been, is being, or is at risk of being abused or neglected.

Children/young people are sometimes abused by members of their own family, by peers or by others outside the family environment such as strangers, workers or trusted adults. Children First: National Guidance for the Protection and Welfare of Children lists the following as reasonable grounds for concern

- Evidence, for example an injury or behaviour, that is consistent with abuse and is 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 he or she has been abused.
- Admission or indication by an adult or a child of an alleged abuse they committed.
- An account from a person who saw the child being abused.

5.7 Reporting procedures for all staff in reporting a child protection and welfare concern.

1. Be aware of the Designated Liaison Person (DLP) and Deputy Designated Liaison Person in your region. **The most up to date list of DLPs and DDLPs is available on TMS in 'Respond General' folder under 'Files'**
   See Appendix 1 for contact details of the Designated and Deputy Designated Liaison Persons in your region.

2. Should you consider a child's safety to be at immediate risk contact the Garda Siochána immediately. A child should not be left in a dangerous situation. This may mean staying with the child until Tusla or the Gardaí arrive (note: it is not appropriate to bring a child to another location). **Where possible, two staff should wait with the child. If there is no other staff member available, a video call should be made to an available staff member as a second person**

3. Record the factual details of concern/incident on Responds internal 'Incident Form' . **This form must be password protected before sending to the DLP**. see Appendix 3.

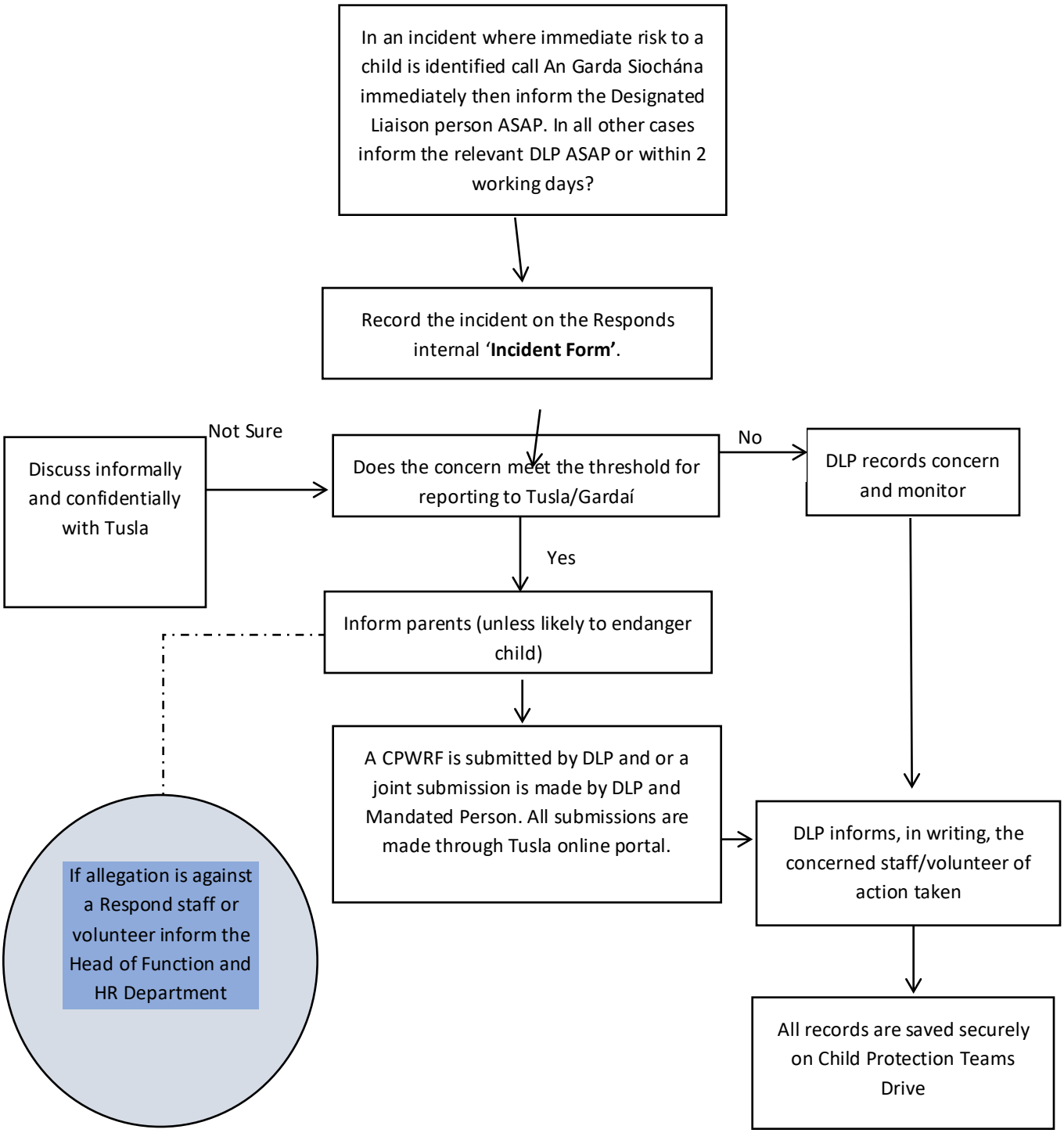
4. In cases where immediate risk is identified inform your DLP immediately and in all other cases within two working days. Inform your line manager that you are liaising with your DLP regarding a concern.
5. The DLP will seek guidance from the relevant social work department to ascertain if the concern reaches the threshold for reasonable grounds.
6. If deemed necessary a Child Protection and Welfare Report Form (CPWRF) will be submitted to Tusla through the live portal.
7. The concerned staff member will be responsible **for providing the information within** the CPWRF. **Where the staff member is not a DLP, a joint referral will be submitted by the DLP**
8. The DLP will print a copy of the submitted report (note you have 48 hours to print a submitted report).
9. The portal generates an **email acknowledgment of receipt of the referral** within 24 hours of submission this, and a copy of the CPWRF report, will be saved in the relevant secure folder in MS Teams.
10. The DLP and DDLP only, will have access to the secure folder on Teams.
11. Once the formal submission is completed the internal incident report is to be shredded or deleted. Where the concern does not meet the threshold, the internal incident report will be saved in a secure folder on MS Teams.
12. It is Respond's policy that all parents/guardians will be informed if a formal referral regarding them is made to Tusla/Gardaí**. They will not inform the parents/guardians only if this is likely to further endanger the child, Staff and/or other family members or, doing so would be likely to impair Tulsa's ability to conduct an assessment.**
13. The DLP will inform the concerned staff member in writing of the action taken regarding their concern. Note: under the 'Protection for Persons Reporting Child Abuse Act 1998' a staff member is entitled to report a concern directly to Tusla should they feel that insufficient action is being taken. They are also protected from penalisation by their employer for so doing.
14. **Any information sharing related to Child Safeguarding is strictly on a need to know basis. Staff are not permitted to discuss allegations or suspicions with anyone outside of the process.**
15. If a child or young person makes a disclosure of abuse directly to you, please refer to section 6.0 below

- **All Mandated Person will follow the same reporting procedures as outlined in section 5.7.**

5.8 Reporting procedures for a DLP when they have a child protection and welfare concern

1. **If you are contacted by somebody who wishes to discuss a concern, ask them to fill out the Respond Incident Form, password protect it and send it to you. Remind them of the need for confidentiality in all matters pertaining to child safeguarding.**
2. **If you, as DLP, are the person with a concern** for a child, record the factual details of concern/incident on Responds internal 'Incident Form' **and save as password protected file**
3. If you are, unsure if the concern meets the threshold phone the relevant social work department and explain the concern ensuring that no identifying information is provided.
4. If the concern meets the threshold, complete the CPWRF via the online portal. **If the concern originated from another employee, make a joint referral.**
5. **Save a pdf copy** of the submitted report (note you have 48 hours to print/ save a copy)
6. The portal generates an **acknowledgment email of receipt of the referral** within 24 hours of submission, file this and the copy of the CPWRF report in the relevant secure folder in MS Teams.
7. Once the online submission is completed, shred and/or delete the internal incident form. In cases where the concern does not meet the threshold, save the **password protected** Respond Internal Incident Form in the relevant secure folder on MS Teams.
8. Inform the parent/guardians that a referral is being made, unless doing so is likely to further endanger the child**,** place you or your colleagues at risk of harm, or if you believe it will impair Tusla's ability to conduct an assessment.
9. If the concern is deemed below the threshold take a note of the date, name of social worker you spoke to and a brief rationale for not submitting. Save the note in the relevant secure folder in Teams.
16. **Any information sharing related to Child Safeguarding is strictly on a need to know basis. Staff are not permitted to discuss allegations or suspicions with anyone outside of the process.**
10. The DLP will act as a link person **and** work with Tusla during the course of their assessment in the best interest of the child.
11. If a child or young person makes a disclosure of abuse directly to you, please refer to section 6.0 below.
12. **All concerns are to be logged monthly in the 'Record of Monthly Child Safeguarding Concerns' folder on Microsoft Teams**

Summary of Reporting Procedures to be followed when a Child Welfare concern is raised:



6.0 POLICYIMPLEMENTATION AND PROCEDURE

6.1 Working safely with children and young people

A disclosure is when a child informs an adult directly of their experience of abuse. The handling of a disclosure is an extremely delicate and sensitive issue. It is important to realise that the child/young person is likely to be under severe emotional stress and is depending on an adult for help. Great care must be taken not to damage that trust.

6.1.1 Procedures for responding to disclosures of abuse

- Stay calm; do not panic.
- Listen- do **not** ask leading questions or ask the child to repeat what they are saying unnecessarily. Your role is to support the child – not investigate the incident.
- Accept- believe what they are saying and tell them so.
- Reassure- emphasise that they are not at fault.
- Stay in control- initial response is crucial.
- Be honest about what will happen next- do not make unrealistic promises.
- Record the disclosure in writing as carefully as possible and as soon as possible (within 24 hours and using the language of the child).
- Notify the Local Designated Liaison person immediately.
- Information sharing should be in accordance with Respond's confidentiality policy and only on a need to know basis as required to safeguard the children in question.
- Where appropriate, parents/guardians should be informed and involved in the process.
- -Probing questions or explanations should **not** be sought- they may place the child/young person at further risk and may jeopardise any subsequent investigation.

6.1.2 Retrospective disclosures

A disclosure may also involve an adult making a retrospective disclosure concerning abuse experienced by them as a child. There are two main areas of concern here:

- Support for the adult making the disclosure.
- The potential for further or continuing child abuse perpetrated by the alleged abuser.

6.1.3 Procedures to respond to a retrospective disclosure

Where a retrospective disclosure has been made it is <u>essential to remember</u> that all mandated persons have a legal responsibility to report any potential 'harm' to child.

- Follow the same procedures as outlined in 6.1.1.
- Offer the adult disclosing abuse the contact details of relevant DLP or make contact the DLP on behalf of the disclosing adult.
- Contact the social work department if you are unsure whether the concern meets the reporting threshold or to establish whether there is any current risk to a child who may be in contact with an alleged abuser.
- If the concern meets the threshold complete the Retrospective Abuse Reporting Form via Tulsa's online portal.
- Offer the disclosing adult the contact details of the HSE National Counselling Service on 1800 477477

6.2 Responding to allegations of abuse against staff and volunteers

Where allegations are made against staff or volunteers, Respond has a dual duty of care to the child and to the staff/volunteer, (however where there appears to be a conflict of duty, care to the young person or child will always take precedence). Therefore two parallel procedures will be followed, with the relevant Designated Liaison Person acting on behalf of the child and the HR department dealing with the employee.

An allegation of abuse may relate to a person who works with children who has:

- Behaved in a way that has or may have harmed a child/young person;
- Possibly committed a criminal offence in relation to a child/young person;
- Behaved towards a child/young person or children/young people in a way that indicates they may pose a risk of harm to a child/young person;
- Behaved in a way that is contrary to the organisation's code of behaviour for workers and volunteers;

- Behaved in a way that is contrary to professional practice guidelines.

6.2.1 Procedure for responding to allegations of abuse against staff and volunteers

- The person to whom the complaint is made should hear the complainant in a respectful and confidential manner.
- The person hearing the complaint/allegation should immediately record the nature, setting and content of the complaint. All information recorded should be factual and for accuracy will be completed on the day, the complaint is heard.
- The complainant should be informed of Respond's mandatory responsibilities in relation to reporting child protection concerns to Tusla.
- The complainant should be immediately referred to the Designated (or Deputy) Liaison Person.
- If this is not possible, the person hearing the complaint must alert the Designated Liaison Person (or Deputy) at the earliest opportunity (not more than one working day).
- The Designated Liaison Person (or Deputy) will inform the HR Department who will inform the relevant senior management.
- Where possible the person making the complaint should be encouraged to make a written complaint.
- The Human Resources Department will arrange support mechanisms to be put in place for staff against whom the allegation has been made.
- The Human Resources Department will consult with Tusla and the Garda Síochána on the follow-up of an allegation of abuse against an employee, consider, and agree a plan, which recognises and responds to the needs and rights of the alleged victim of abuse and their families. The initial consultation will take place by telephone and followed by a face-to-face meeting if it is deemed necessary.
- Unless advised to do otherwise by the Gardaí, the HR Department will advise the employee that an allegation has been made against him/her, and the nature of the allegation.
- The employee will be afforded an opportunity to respond. The HR Department will note the response and pass this information to the Designated Liaison Person who will include this information if a formal report is being made to Tusla.
- The employee will be informed of this unless advised to do otherwise by the Gardaí.
- The Designated Liaison Person (or Deputy) and the HR Department will assess the level of risk to any children with whom the employee is in contact.
- Where it is decided that protective measures are necessary to ensure that no child is exposed to unnecessary risk the Chief Executive Officer can decide to place the member of staff on administrative leave.

- Where appropriate the CEO can also reassign the staff person in question to alternative work areas – always ensuring Child Safeguarding is paramount. The HR Manager will be notified and will ensure that employment legislation is fully complied with.
- All meetings and discussions in relation to the allegation should be recorded with the decisions reached and the reasons why clearly noted.
- Care will be taken to ensure that actions taken by Respond Management do not undermine or frustrate any investigation being conducted by Tusla or An Garda Síochána on this.
- In the case that an allegation is made against a Deputy Regional /Local Designated Liaison Person, the Child Protection/Welfare Role will be managed by the DLP.
- In the case that an allegation is made against a Regional/local DLP the Child Protection/Welfare role will be managed by National Child Safeguarding Coordinator.
- In the case that an allegation is made against the National Child Safeguarding Coordinator the Child Protection/welfare role will be managed by the Head of Services.
- In all of these cases the support role for the staff person against whom the allegation has been made will continue to be a matter for the HR Department.

If any member of staff or volunteer is inhibited for any reason in reporting an incident or allegation of child abuse against another member of staff or volunteer internally, or if they are dissatisfied with the internal response, they should report the matter independently to Tusla and An Garda Síochána.

6.3. Confidentiality and information sharing

6.3.1 Information Sharing

1. **Where child protection and welfare concerns arise, information should only be shared on a strictly 'need to know' basis.**
2. **No promise can be made to keep secret any information that points to abuse or risk of abuse to a child**.
3. **All new Service Users will be given an information leaflet on Respond's Child Safeguarding Policy when they register in the service**.
4. **All Service Users will have access to the Child Safeguarding Policy**
5. All staff will work in conjunction with Tusla in the best interest of the child and families. **Only necessary and proportionate information will be shared with the statutory agencies for the protection of a child. This is not a breach of confidentiality** or data protection.

6. All staff will recognise that parents/guardians and children/young people have a right to know if personal information is being shared.
7. **It is our policy to notify parents/ guardians/ young people when there has been a further request for information from Tusla. The only time this is not done is when doing so could put the child/young/ staff member person at further risk or Tusla have asked us not to**.
8. **When a concern arises**, **staff will record factual information, founded on direct observation/ disclosure which will be shared with the DLP in a timely manner.**

6.3.2 Record Keeping

Inquiries have repeatedly shown that the failure to report concerns to the appropriate authorities without delay has led to on-going abuse of children. Haphazard and careless recording of concerns and actions has also inhibited recognition of abuse and safeguarding of children.

Procedures for record keeping

1. When documenting concerns staff will ensure that all information provided is factual and include details of contacts, consultations and any actions taken.
2. **Relevant** staff**, in conjunction with the DLP**, will cooperate in the sharing of records with Tusla where a child protection or welfare issue arises.
3. All records on child **safeguarding** concerns, allegations and disclosures are filed in a secure folder in the Child Protection Drive on MS Teams. The drive is only accessible to appointed DLP's, deputy DLP's, National Child Safeguarding Coordinator, Head of Services and IT officers.
4. All documents containing child protection and welfare concerns are saved in a password protected file, sent via email to relevant named persons and password is sent in separate email or via text message.
5. All records stored will only be used for the purpose for which they are intended.
6. All records regarding child protection and welfare concerns will be stored up until the child reaches the age of 18- plus 7 years.
7. A national list of child safeguarding concerns received and CPWRF referrals submitted will be completed each month and stored in a secure folder on the Child Protection Drive on Teams.

   Exactly which folder on Teams will be added in in final draft

6.4 Sharing our guiding principles and child safeguarding procedures with parents/guardians, families and children and young people

Prior to engaging in service delivery staff will provide children, young people, parents and families with a user friendly leaflet outlining the key elements of Respond's child safeguarding policy and procedures highlighting their mandatory obligations, guiding principles and key procedures.

7.0 RESPOND TRAINING ON CHILD SAFEGUARDING

7.1 Procedures for the provision of and access to child safeguarding training; See Appendix 2 for summary table on training structure for Respond Staff.

- All staff and volunteers will be invited to read and review this policy on privacy engine as part of their initial induction programme.
- From January 2021 all staff will complete Tusla E-learning Children First training.
- HR will send all new staff the Tusla E- Learning Children First training link.
- All staff in services will review this policy in detail at a team meeting and sign off that it was completed.
- The National Safeguarding Coordinator, appointed Regional and Local DLP's will receive Designated Liaison Persons training.
- The DLP training will be updated every two years. and
- Respond buy in tailored child protection and welfare training through Barnardo's when required for all relevant staff that require child protection and welfare training and bi-annually for DLP and DLP's or if required due to change in personnel. The training will be organised by the HR department.
- All staff working in services will receive Always Children First Training and this training will be renewed every three years.
- As part of the qualification process to provide services, all contractors are provided with a copy of this policy with which they agree and sign to confirm compliance. Subcontractors are provided with a copy of our one page summary leaflet.
- All mandated staff and volunteers will be made aware of their obligations as mandated persons in accordance to the Children First Act 2015.
- All mandated staff will be supported in their role by a nominated Designated Liaison Person (DLP)

The HR department will send out the list and contact details of the Regional DLP's to all staff twice yearly or when necessary due to changes in personnel.

Note: No staff member who has direct contact with children will be allowed commence employment without proof that they have completed all child safeguarding- training set out above.

8.0 CUSTOMER CARE

All staff, tenant, parents, children, young person and any other service users will be informed of Respond's Child Safeguarding Policy and Procedures as part of Respond's initial induction programme.

9.0 POLICY REVIEW

This Policy will be reviewed every two years by the National Child Safeguarding Coordinator or sooner if deemed necessary to account for any external regulatory and/or legislative changes, best practice guidance updates or internal organisational change.

10.0 IMPACTED DEPARTMENTS

All Respond Departments and Services

11.0 REPORTING, MONITORING AND KEY PERFORMANCE INDICATORS

- All new staff, volunteer, contractors, DLP's receive the requisite child safeguarding training as set out in Appendix 2.
- The Designated Liaison Persons and the National Child Protection Co-ordinator have meetings every 6 weeks and minutes are recorded at these meetings.
- All staff working directly with children are grade vetted as part of the Recruitment and Selection Process.
- The National Child Safeguarding Coordinator will carry out an annual audit to ensure adherence to the policy and procedures and to ensure they support service provision of a high standard. Any improvements identified in these audits will be implemented as part of the policy review.

- The list of DLP's will be sent to all staff twice a year and is updated when appropriate.

12.0 RELATED POLICIES

This policy should also be read in conjunction with

- Recruitment and Selection Policy.
- HR Staff Handbook
- Induction Policy.
- Confidentiality Policy.
- Code of Behaviour Guidelines
- Internet usage Policy.
- Criminal Record Vetting Policy.
- Data Protection Policy.
- ELSAC Risk Management Policy and Responds Overarching Risk Management Policy.
- Safe management of Activities

APPENDIX I

List of Key Named Persons Responsible for Implementation of Respond's Child Safeguarding Procedures

KEY ROLE	NAME	CONTACT EMAIL
National Child Safeguarding Coordinator	**Lisa O'Rourke**	Lisa.orourke@respond.ie
Member of Advisory Subgroup	**Louisa Carr**	Louisa.carr@respond.ie
Member of Advisory Subgroup	**David Parslow**	David.parslow@respond.ie
Member of Advisory Subgroup	**Anna McGreal**	Anna.mcgreal@respond.ie

List of Regional Designated Liaison Person (DLP's)

Regional DLP Area Of	DLP (Designated	DDLP (Deputy DLP)	Email Address
• Tallaght • Stillorgan • Naas • Blackrock • Crumlin	Lorraine Keegan 0873409664	Anna McGreal 0877627591	Lorraine.keegan@respond.ie
• Goatstown • Blandardstown • Clonsilla • Garristown • Mulhuddart • Meakstown • Swords.	Aaron Galbraith 0871657464	Anna McGreal 0877627591	Aaron.Galbraith@respond.ie
• Tolka Valley • Baldoyle • East Wall • Artane • Coolock • Ballymun • Mount Joy Square	Miriam Finnegan 0876375550	Anna McGreal 0877627591	Miriam.finnegan@respond.ie
• Lucan • Newcastle • Royal Canal Park • Enniskerry Road • Kildare	Anna McGreal 0877627591	Lisa O'Rourke 0879161367	Anna.mcgreal@respond.ie

• Limerick • Clare	Jillian Gillick 0872671634	Anna McGreal 0877627591	jillian.gillick@respond.ie
• Wicklow • Wexford • Laois • Tipperary	Mary Lonergan 0879161403	Lisa O'Rourke 0879161367	mary.lonergan@respond.ie
• Roscommon • Offaly • Galway • Leitrim	David Parslow 0877848025	Lisa O'Rourke 0879161367	David.parslow@respond.ie
• Louth • Monaghan • Cavan • Meath • Westmeath	Sinead Mohan 0876334753	Lisa O'Rourke 0879161367	Sinead.mohan@respond.ie
• Mayo • Donegal • Sligo • Longford	Lisa O'Rourke 0879161367	David Parslow 0877848025	Lisa.orourke@respond.ie
• Cork City • Cork County • Kerry	Margaret Fenton 087 7762977 Maria Gaynor 0877189591	Lisa O'Rourke 0879161367	margaret.fenton@respond.ie Maria.gaynor@respond.ie
• Waterford • Kilkenny • Carlow	Niamh Flavin 0879161369	Lisa O'Rourke 0879161367	Niamh.flavin@respond.ie

APPENDIX II

List of Mandated Persons

Note: Highlighted in Yellow are those that relate to Respond

Schedule 2 of the Children First Act 2015 specifies the following classes of persons as Mandated Persons for the purposes of the 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 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 pre-school service within the meaning of Part .VIIA 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.

APPENDIX III

SIGNS AND SYMPTOMS OF CHILD ABUSE

Signs and symptoms of child abuse (from 'Children First: National Guidance for the Protection and Welfare of Children' (2011)**)**

1. Signs and symptoms of neglect

Child neglect is the most common category of abuse. A distinction can be made between 'wilful' neglect and 'circumstantial' neglect. 'Wilful' neglect would generally incorporate a direct and deliberate deprivation by a parent/carer of a child's most basic needs, e.g. withdrawal of food, shelter, warmth, clothing, and contact with others. 'Circumstantial' neglect more often may be due to stress/inability to cope by parents or carers.

Child neglect should be suspected in cases of:

- abandonment or desertion;
- children persistently being left alone without adequate care and supervision;
- malnourishment, lacking food, inappropriate food or erratic feeding;
- lack of warmth;
- 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;
- non-organic failure to thrive, i.e. child not gaining weight due not only to malnutrition but also to emotional deprivation;
- Failure to provide adequate care for the child's medical and developmental problems; exploited, overworked.

The following points illustrate the consequences of different types of neglect for children:

- inadequate food – failure to develop;
- household hazards – accidents;
- lack of hygiene – health and social problems;
- lack of attention to health – disease;
- inadequate mental health care – suicide or delinquency;
- inadequate emotional care – behaviour and educational;
- inadequate supervision – risk-taking behaviour;

- unstable relationship – attachment problems;
- unstable living conditions – behaviour and anxiety, risk of accidents;
- exposure to domestic violence – behaviour, physical and mental health;
- Community violence – anti social behaviour.

2. Signs and symptoms of emotional neglect and abuse

Emotional neglect and abuse is found typically in a home lacking in emotional warmth. It is not necessarily associated with physical deprivation. The emotional needs of the children are not met; the parent's relationship to the child may be without empathy and devoid of emotional responsiveness.

Emotional neglect and abuse can be identified with reference to the indices listed below. However, it should be noted that no one indicator is conclusive of emotional abuse. In the case of emotional abuse and neglect, it is more likely to impact negatively on a child where there is a cluster of indices, where these are persistent over time and where there is a lack of other protective factors.

- 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;
- serious over-protectiveness;
- inappropriate non-physical punishment (e.g. locking in bedrooms);
- family conflicts and/or violence;
- every child who is abused sexually, physically or neglected is also emotionally abused:
- Inappropriate expectations of a child relative to his/her age and stage of development.

Children who are physically and sexually abused and neglected also suffer from emotional abuse.

3. Signs and symptoms of physical abuse

Unsatisfactory explanations, varying explanations, frequency and clustering for the following events are high indices for concern regarding physical abuse:

- bruises (*see below for more detail*);
- fractures;
- swollen joints;

- burns/scalds (*see below for more detail*);
- abrasions/lacerations;
- haemorrhages (retinal, subdural);
- damage to body organs;
- poisonings – repeated (prescribed drugs, alcohol);
- failure to thrive;
- coma/unconsciousness;
- Death.

There are many different forms of physical abuse, but skin, mouth and bone injuries are the most common.

4. Signs and symptoms of sexual abuse

Child sexual abuse often covers a wide spectrum of abusive activities. It rarely involves just a single incident and usually occurs over a number of years. Child sexual abuse most commonly happens within the family.

Cases of sexual abuse principally come to light through:

a) disclosure by the child or his or her siblings/friends;
b) the suspicions of an adult;
c) Physical symptoms.

Colburn Faller (1989) provides a description of the wide spectrum of activities by adults which can constitute child sexual abuse. These include:

Non-contact sexual abuse

- 'Offensive sexual remarks', including statements the offender makes to the child regarding the child's sexual attributes, what he or she would like to do to the child and other sexual comments.
- Obscene phone calls.
- Independent 'exposure' involving the offender showing the victim his/her private parts and/or masturbating in front of the victim.
- 'Voyeurism' involving instances when the offender observes the victim in a state of undress or in activities that provide the offender with sexual gratification. These may include activities that others do not regard as even remotely sexually stimulating.

Sexual contact

- Involving any touching of the intimate body parts. The offender may fondle or masturbate the victim, and/or get the victim to fondle and/or masturbate them. Fondling can be either outside or inside clothes. Also includes 'frottage', i.e. where offender gains sexual gratification from rubbing his/her genitals against the victim's body or clothing.

Oral-genital sexual abuse

- Involving the offender licking, kissing, sucking or biting the child's genitals or inducing the child to do the same to them.

Interfemoral sexual abuse

- Sometimes referred to as 'dry sex' or 'vulvar intercourse', involving the offender placing his penis between the child's thighs.

Penetrative sexual abuse, of which there are four types:

- 'Digital penetration', involving putting fingers in the vagina or anus, or both. Usually the victim is penetrated by the offender, but sometimes the offender gets the child to penetrate them.
- 'Penetration with objects', involving penetration of the vagina, anus or occasionally mouth with an object.
- 'Genital penetration', involving the penis entering the vagina, sometimes partially.
- 'Anal penetration' involving the penis penetrating the anus.

Sexual exploitation

- Involves situations of sexual victimisation where the person who is responsible for the exploitation may not have direct sexual contact with the child. Two types of this abuse are child pornography and child prostitution.
- 'Child pornography' includes still photography, videos and movies, and, more recently, computer-generated pornography.
- 'Child prostitution' for the most part involves children of latency age or in adolescence. However, children as young as 4 and 5 are known to be abused in this way.

Carers and professionals should be alert to the following physical and behavioural signs:

- bleeding from the vagina/anus;
- difficulty/pain in passing urine/faeces;
- An infection may occur secondary to sexual abuse, which may or may not be a definitive sexually transmitted disease. Professionals should be informed if a child has a persistent vaginal discharge or has warts/rash in genital area;

- noticeable and uncharacteristic change of behaviour;
- hints about sexual activity;
- age-inappropriate understanding of sexual behaviour;
- inappropriate seductive behaviour;
- sexually aggressive behaviour with others;
- uncharacteristic sexual play with peers/toys;
- Unusual reluctance to join in normal activities that involve undressing, e.g. games/swimming.

Particular behavioural signs and emotional problems suggestive of child abuse in **young children (aged 0-10 years)** include:

- mood change where the child becomes withdrawn, fearful, acting out;
- lack of concentration, especially in an educational setting;
- bed wetting, soiling;
- pains, tummy aches, headaches with no evident physical cause;
- skin disorders;
- reluctance to go to bed, nightmares, changes in sleep patterns;
- school refusal;
- separation anxiety;
- Loss of appetite, overeating, hiding food.

Particular behavioural signs and emotional problems suggestive of child abuse in **older children (aged 10+ years)** include:

- depression, isolation, anger;
- running away;
- drug, alcohol, solvent abuse;
- Self-harm /eating disorders.
- suicide attempts;
- missing school or early school leaving;

APPENDIX IV

Code of Behaviour for all Respond staff and volunteers

Respond is commitment to keeping children safe from harm and protecting members of staff/volunteers.

All Respond staff and volunteers are expected to adhere to the below good code of behaviour guidelines regarding child safeguarding;

- Staff and volunteers will respect and value children as individuals. Children should be listened to, praised and encouraged and involved appropriately in decision-making.
- Staff should never give lifts in their cars to individual children and young people. Parents and management should be kept informed of transport arrangements for children at all times.
- In cases of disclosures, never promise to keep secrets, the child/ young person needs to be aware that you will have to pass on any serious information regarding the protection and welfare of children.
- Never let allegations made by a child go unaddressed or unrecorded and all staff are expected to report any inappropriate/concerning behaviour of other staff members.
- Avoid spending time alone, away from others with a child or young person.
- Always address children and young people in positive terms. Avoid disparaging remarks, sarcasm, etc.

Inappropriate Behaviour

- Avoid time alone with children/young people.
- Staff will not hit, push, physically chastise or undermine any young person.
- Staff should be sensitive to the possibility of developing favouritism, or becoming over-involved or spending a great deal of time with any one child.

Health and Safety

- Children/young people should not be left unattended or unsupervised.
- A safe environment will be provided.
- Appropriate Risk Assessments will be carried out for all outings, trips etc. organised for children/young people (see Appendix 5 for Risk Assessment Guidelines).
- Staff/volunteers/parents will be made aware of the policy and procedures to which Respond is committed.
- All allegations by children or young people will be reported to the Designated Person.
- The appropriate staff (volunteer) to child ratio for safe supervision should be followed.

This is recommended as:

Age	Ratio
0-2 years	1 staff for 3 children
2-3 years	1 staff for 4 children
3-7 years	1 staff for 8 children (6 outdoors)
8 years +	2 staff for 20 children (15 outdoors) and one additional staff for every further 10 children.

APPENDIX V

Respond Risk Assessment Template

Version	Date	Author	Owner	Consultation
1.0		N		

Latest version changes:

Next Review Date	

ECCE RISK ASSESSMENT TEMPLATE							
Hazard	**Description**	**Controls needed to mitigate Hazard**	**Inherent Risk Rating**	**Gaps/Action necessary to mitigate hazard**	**Residual Risk Rating**	**Action owner**	**Target Date of Completion**

APPENDIX VI

Respond Internal Child Protection Incident Reporting

PRIVATE AND CONFIDENTIAL

Date of incident:

Location of incident: _____ **Date of Reporting: _____**

Details of Child: Name: _____ Male □ Female □

Address: _____ _____
Age: __

Details of the incident (concerns, incidents, dates, times, people present, injuries, etc.)

Mother: Name: _____ ___ **Father:** Name: _____

Address: _____ Address: _____

_____ _____

Tel no: _____ Tel no: _____

To be submitted ONLY to the Designated Child Protection Worker (or Deputy) in your region

_____

Staff Signature

FOR OFFICE USE ONLY:

Have there been previous incidents relating to this child/children) that caused you concern. Give details if not previously reported.

Have previous reports been submitted related to the same child(ren)? Give approximate dates of these reports.

Have the parents/guardians of the child(ren) in question been informed

APPENDIX VII

Parental consent form

Please complete this form and return it to Respond

(A signed consent form is a condition of participation in this activity for those under the age of 18).

Child's name _____

Date of birth _____

GP name _____

GP telephone number _____

I am willing for _____

to participate in _____

and confirm that s/he is willing to participate as fully as possible.

Furthermore (please tick one of the Following):

I permit _____

to only travel on transport that has been designated as official for the purpose of this event (e.g. minibus/coach)

YES □ NO □

Or, I permit _____ to travel in either private vehicles or any other transport that has been designated

official for the purposes of this event.

YES □ NO □

_____ has the following medical condition and requires the following medication (give details)

_____

_____

_____

___

Signature: _____

Date: _____

Print Name: _____

Relationship to child: _____

Consent must be provided by the person with parental responsibility or guardian