

Child Protection Policy

Guidelines for the Protection of Children

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Introduction

Children, because of their dependency and immaturity, are vulnerable to abuse in various forms. Parents or guardians have primary responsibility for the care and protection of their children. However, the Council has a responsibility to ensure the protection of children participating in any Council activities.

This policy extends to all staff. All employees must be sensitive to the vulnerability of children during the course of their duties and act in a responsible manner at all times. It is recognised that most staff members do not have expertise in this area; it is important to note that the investigation of suspected child abuse is the responsibility of the statutory authorities and shall not be undertaken by the Council's Child Protection Liaison Officer(s) or other Local Authority employees.

These Guidelines have been developed in accordance with government guidelines Children First: National Guidelines for the Protection and Welfare of Children, a copy of which can be made available on request or can be found on the website of the Department of Health and Children – www.dohc.ie and The Local Government Management Services Board Guidelines.

It is important that all staff members, elective representatives and any other organisation working on behalf of Cavan County Council are aware of the need to create a healthy and safe environment for everyone.

These guidelines are directed at all those who have contact with children in the normal course of their duties, to provide guidance on appropriate behaviour around children and what to do if physical, sexual or emotional and neglect abuse is suspected.

Guiding principles and objectives

- To provide guidelines for all staff, who in the course of their work, come in contact with or become involved in the lives of children and young people.
- To protect children by having clearly defined procedures for referring, reporting and dealing with incidents relating to child protection.

- To ensure child protection responsibilities are fully understood and complied with.
- When followed, this code will contribute to the protection, safety and welfare of children and young people and will also reduce the risk of false accusations being made against staff.

Overall responsibility

It is the responsibility of all staff to ensure that they have read and understood this code of practice and their local guidelines. Any external organisations that are subcontracted to work on behalf of Cavan County Council must also be made aware of these guidelines.

Cavan County Council will ensure that all staff:

- Are familiar with Cavan County Council Guidelines for the protection of children
- Are aware of their obligations within Cavan County Council Guidelines
- Attend Child Protection awareness training where appropriate
- Use a common-sense approach to all situations

Section 1 Child Protection Policy Statement

The Council is committed to a child-centred approach to our work with children in all services and activities as operated by the Authority. We undertake to provide a safe environment where the welfare of the child is paramount. We will adhere to the Children First National Guidelines for the Protection and Welfare of Children by implementing procedures covering:

- Appropriate recruitment and selection of employees and volunteers;
- Implementing the Garda Vetting Procedure for all relevant employees and volunteers;
- Appropriate management, supervision and training of employees;
- The reporting, investigation and recording of incidents and accidents complaints made against the Council, its employees/volunteers;
- The reporting of suspected or disclosed abuse confidentiality;
- Circulation of information to employees, volunteers, parents/guardians and participants on our activities and what can be expected of the Authority in relation to those activities;
- Allegations of misconduct or abuse by employees.

Definition of 'Child'

In these guidelines "child" means a person under the age of 18 years, excluding a person who is or has been married.

Child Protection Liaison Officer

The Child Protection Liaison Officer will:

- Act as a source of advice on child protection matters;
- Co-ordinate action within Cavan County Council and with any other Child Protection Liaison Officers;

- Liaise with the HSE and An Garda Síochána and other agencies about suspected or actual cases of child abuse;
- Be accessible to all staff;

The person(s) designated shall ensure that s/he is knowledgeable about child protection and that s/he undertakes any training considered necessary to keep updated on new development.

The role of the Child Protection Liaison Officer(s) is to:

- Establish contact with the senior member of the Health Service Executive responsible for child protection in the Authority's catchment area, i.e. Child Care Manager or Principal Social Worker;
- Provide information and advice on child protection within Cavan County Council;
- Ensure that the Cavan County Council's child protection policy and procedures are followed and to inform appropriate sources of relevant concerns about individual children;
- Ensure that appropriate information is available at the time of referral and that the referral is confirmed in writing under confidential cover using the HSE Standard Reporting form (See Appendix I);
- Liaise with the Health Service Executive/An Garda Síochána and other agencies as appropriate;
- Keep relevant people within the organisation, particularly the County Manager, informed of relevant issues, whilst maintaining confidentiality;
- Ensure that an individual case record is maintained of the action taken by the Authority, the liaison with other agencies and the outcome;
- Advise the organisation of child protection training needs.

The name and contact details of the Child Protection Liaison Officer(s) and a Deputy Child Protection Liaison Officer shall be made available to all employees, volunteers, relevant agencies and users of the Local Authority services, where appropriate.

Section 2 Code of Behaviour in relation to Children

The Council aims to create an environment in which children are listened to, given a sense of belonging, and kept safe; parents are supported and encouraged; and employees and volunteers who work with children and young people are supported and protected. In order to meet these aims the Council will follow a framework for good practice and a code of behaviour as set out below.

The Council's Child-Centred Approach

All Council activities involving children shall be guided by what is best for children. Children's activities shall be conducted in a safe, positive and encouraging atmosphere. Standards of excellence should extend to personal conduct. Taking a child-centred approach means to:

- Treat all children equally;
- Listen to and respect children;
- Involve children as appropriate;
- Provide encouragement, support and praise (regardless of ability);
- Use appropriate language (physical and verbal);
- Have fun and encourage a positive atmosphere;
- Offer constructive criticism when needed;
- Treat all children as individuals;
- Respect a child's personal space;
- Use age-appropriate teaching aids;
- Lead by example;
- Be aware of child time limitations e.g. school/exams when scheduling activities;
- Create an atmosphere of trust;

- Respect and be aware of differences of ability, culture, religion, race and sexual orientation and membership of the Traveller Community;
- Endeavour to provide equality/diversity training for employees in relation to cultural differences;
- Use all information in respect of children only for the purpose for which it is given, subject to child protection concern.

Good Practice Framework

The Council aims to work within the following framework for good practice by:

- Providing policy training for employees and volunteers in line with these guidelines;
- Registering each child for day long or long term activities or projects (name, address, phone, special requirements, attendance, emergency contact & parental consent). It is suggested that registration forms be established for relevant service points;
- No registration required for shorter events. However, children must be accompanied by a parent / guardian / teacher who must remain on the premises. Council P.R. must make this clear in publicity for the event.
- It will be noted that it is not possible to cover all open or public events e.g. concerts, play day's, playgrounds;
- Complying with the Council's Data Protection Policy in respect of personal and sensitive data regarding children and their parents/guardians subject to child protection concerns;
- Making parents/guardians, children, visitors and facilitators aware of these child protection guidelines;
- Having procedures in place for accident/injuries or emergencies as per Health & Safety and accident reporting books;
- Reporting/recording any incidents and accidents;

- Being inclusive of children with special needs and children with disabilities, as appropriate
- Material used in children's activities should be age and ability appropriate
- Reporting any concerns to a Child Protection Liaison Officer and following reporting procedures;
- Encouraging children to report any bullying concerns and worries and be aware of anti-bullying policy as appropriate to the service;
- Evaluation of work practices where contact with children occurs on a regular basis;
- Reviewing and updating policies and procedures regularly;
- Keeping parents/guardians informed of any issues of concern regarding their children as appropriate to the service i.e. formal organised activities e.g. sports events;
- Ensuring appropriate, to the service, supervision (including a minimum of two adults) depending on age, abilities and activities involved;
- Ensuring that partner organisations are familiar with the Council's guidelines;
- Not ignoring concerns;
- Not letting a problem get out of control;
- Ensuring that there are adequate insurance arrangements in place to cover all relevant activities;
- If the meeting or event is to be photographed, recorded and/or Webcast, parents/guardians must be informed beforehand;
- If images of children are to be displayed, parents/guardians must be informed beforehand;
- Ensure appropriate internet policies at Local Authority access points.

Inappropriate Behaviour – Checklist for Employees/Volunteers

- Avoid spending excessive amounts of time alone with children;
- Avoid taking children on journeys alone in a car where possible and never without the consent of the parent/guardian;
- Where possible employees should avoid being in a one to one situation with a child;
- Do not use/allow offensive or sexually suggestive physical conduct and/or verbal language;
- Do not single out a particular child (for unfair favouritism, criticism or ridicule);
- Do not allow/engage in inappropriate touching of any form;
- Do not hit or physically chastise children;
- Do not socialise inappropriately with children e.g. outside of structured organisational activities;
- Where events are held in a part of a building or complex children/young people should not have free access to all parts of the building.
- Outside the normal office hours unaccompanied children/young people should not be permitted into the building.
- Where physical contact is an inherent part of an activity, it is important to seek consent of child/young person in relation to physical contact (except in an emergency or a dangerous situation); avoid horseplay or inappropriate touch; check with child/young person about their level of comfort when doing touch exercises i.e. games may involve holding hands and it is about ensuring that this is done openly and within safe and comfortable limits for the child or young person;
- Not revealing personal information about children in any way, subject to child protection concerns;

Considerations for the Health and Safety of Children

- Do not leave children unattended/unsupervised; this may require accompanying children/young people to the toilet. If such a request is made to you, the child/young person should be advised that they must be accompanied by the adult responsible for them. In an emergency situation, where the principal adult is not available, a member of staff may bring the child/young person to the toilet accompanied by another member of staff
- Ensure that children are not in contact with any dangerous materials;
- Provide a safe environment and where feasible ensure another employee/volunteer is present;
- Be aware of and comply with the Council's policy on Safety, Health and Welfare at Work;
- Ensure that you are familiar with and comply with the Council's procedures in relation to accidents;
- Familiarise yourself with and where necessary comply with the emergency evacuation procedures particular to the location in which you are located and brief the children in your care on what they are to do/where they must go in an emergency;
- Be familiar with the particular risks associated with the activity and/or location at which you are based. Read and understand the Safety Statement for that location;
- When undertaking a risk assessment take account of a child's natural curiosity and include appropriate precautions to safeguard a child's potential exposure;
- For any further advice in relation to health and safety issues you should contact the Council's Safety Advisor.
- First aid treatment is, wherever possible, carried out with more than one adult present except in the rare situation of serious injury where any delay in providing urgent first-aid pending the arrival of medical aid would be harmful to the child

Consideration for Children with Special Needs or Disabilities

Adhere to national legislation including Disability Act 2005, and Equal Status Acts 2000-2007 in relation to children with disabilities or special needs to ensure access to all Local Authority services and activities.

Strive to deliver universally accessible services and events for children in universally accessible environments.

General Supervision

Employees/volunteers shall endeavour to ensure that there are adequate adult/child ratios. The appropriate ratio will depend on the nature of the activity, the age of the children and any special needs of the group. A general guide may be 1:8 for under 12 years of age and 1:10 for over 12 years of age (good practice is a minimum of two or more adults). There shall be at least one adult of each gender with mixed parties. This ratio may not be appropriate at service points as distinct from organised activities.

- Employees/volunteers shall endeavour to avoid being left alone with children; Child protection will be of the highest priority in the recruitment, selection, training and supervisory procedures for staff working in one manned service points.
- Where an adult needs to meet with a child/young person alone, the door should be left open and another adult informed of the meeting.
- If an adult needs to talk separately to a child this should be done in an open environment in view of others whilst offering the child confidentiality;
- Employees should not be left alone with children at the end of an activity;
- Times for start and finish of activities should be clearly stated;
- Late collection of children by parents/guardians presents a potentially difficult situation, and employees/volunteers shall attempt to contact the child's parent/guardian on their contact number; Cavan County Council can refuse to enrol a child for an event who has not been picked up as scheduled at a previous event.

- Use an alternative contact name/number agreed with the child's parent/ guardian if necessary;
- Wait with the child with another employee member/volunteer present where possible;
- Make it clear to parents/guardians that it is not the Authority's responsibility to transport children home on behalf of parents/guardians who have been delayed;

Employees/volunteers shall not:

- Take the child home or to another location without permission from a parent /guardian;
- Send the child home with another person without permission from a parent/guardian;
- Leave a child unaccompanied.

Dealing with Challenging or Disruptive Behaviour

Disruptive behaviour is unacceptable, and disruptive children will be asked by employees to behave. Disruptive behaviour will be reported to parent/guardian. If a child continues to be disruptive s/he will be advised that s/he is causing a disturbance and given a warning.

A warning letter may be sent to the parent/guardian stating that further disruptions may result in withdrawal of facilities or services to the child. If a child is in danger to themselves or others further action may be required i.e. parent/gardaí to be contacted.

When dealing with a disruptive child it is recommended that where possible more than one employee or volunteer be present.

Instances of disruptive behaviour that require the intervention of the employee, and which put at risk the safety and well being of others, must be documented.

The Incident Report Form contained in Appendix 2 must be used in such case.

Section 3 Reporting Child Protection & Welfare Concerns

Recognising Child Abuse

Child abuse can often be difficult to identify and may present in many forms (see Appendix III for guidance on categories of child abuse). Early detection is important and individuals working with children should share their concerns about child protection or welfare with the Child Protection Liaison Officer in the Council.

Everyone must be alert to the possibility that children with whom they are in contact may be being abused.

If a child hints at or tells you that he or she is being abused, it must be handled very sensitively, and in the following way:

- Stay calm and listen – give the child time to say what she or he wants;
- Do not ask leading questions or details, or make suggestions;
- Do not stop the child recalling significant events, but do not make him or her repeat the story unnecessarily;
- Reassure the child, but do not promise to keep it a secret;
- Explain what needs to be done next;
- Record the discussion as carefully as possible.

The information shall then be passed on in accordance with the procedures outlined below.

The primary responsibility of the person who first suspects or is told of abuse is to report it and to ensure that their concern is taken seriously. The guiding principles in regard to reporting child abuse may be summarised as follows:

- The safety and well-being of the child must take priority;
- Reports should be made without delay;
- The principle of natural justice shall apply, as appropriate;

- A person is innocent until proven otherwise however any measures necessary to protect a child must be taken;
- The principle of confidentiality shall apply, whereby only those who need to know should be told of a suspicion/allegation/disclosure of abuse and the number that need to be kept informed shall be kept to a minimum.

Steps to be taken by an employee who knows about or suspects child abuse

- An employee/volunteer who knows or suspects that a child has been or is at risk of being harmed has a duty to convey this concern to the Child Protection Liaison Officer(s) without delay;
- The Child Protection Liaison Officer(s) will report the information to the Health Service Executive, who in turn, notifies An Garda Síochána;
- In an emergency, a report must be made directly to An Garda Síochána;
- If the suspected abuser is an employee/volunteer of the Council, the matter should be brought to the immediate attention of the Manager;
- The person who first encounters a case of alleged or suspected abuse is not responsible for deciding whether or not abuse has occurred. That is a task for the Health Service Executive or An Garda Síochána;
- Under no circumstances should any individual member of employee or volunteer attempt to intervene or deal with the problem of abuse alone.

Guidelines for Recognition

The ability to recognise child abuse depends as much on a person's willingness to accept the possibility of its existence as it does on their knowledge and information. There are commonly three stages in the identification of child abuse.

These are:

- considering the possibility;

- looking out for signs of abuse;
- recording of information.

The possibility of child abuse should be considered if any of the signs or symptoms referred to above are presented. Signs of abuse can be physical, behavioural, or developmental. They can exist in the relationships between children and parents/guardians or between children and other family members. A cluster or pattern of signs is likely to be more indicative of abuse. Children who are being abused may hint that they are being harmed and sometimes make direct disclosures. Disclosures should always be believed; less obvious signs could be gently explored with the child, without direct questioning. Play situations such as drawing or story telling may reveal information.

Most signs are non-specific and must be considered in the child's social and family context. It is important to always be open to alternative explanations for physical or behavioural signs of abuse.

If abuse is suspected, it is important to establish the grounds for concern (see examples from the 'Childrens First' National Child Protection Guidelines below). The HSE should always be informed when a person has reasonable grounds for concern that a child may have been abused, or is being abused, or is at risk of abuse.

The following examples would constitute reasonable grounds for concern.

- Specific indication from the child that (s)he was abused;
- An account by a person who saw the child being abused;
- Evidence, such as an injury or behaviour which is consistent with abuse and unlikely to be caused another way;
- An injury or behaviour which is consistent both with abuse and with innocent explanation but where there are corroborative indicators supporting the concern that it may be a case of abuse. An example of this would be a pattern of injuries, an implausible explanation, other indications of abuse, dysfunctional behaviour;

- Consistent indication, over a period of time that a child is suffering from emotional or physical neglect.

Observations should be accurately recorded and should include dates, times, names, and locations.

Steps to be taken by the Child Protection Liaison Officer

- When the designated Child Protection Liaison Officer receives a report about suspected or actual child abuse, they should consider whether there are reasonable grounds for reporting it to the Health Service Executive. It may be helpful to discuss the matter with a professional, such as a social worker, who can assist in deciding whether or not to formally report concerns to the Health Service Executive.

This may involve:

- Clarifying or getting more information about the matter. Recording and treating the information as confidential
- Where there is any doubt or uncertainty, consult informally initially with a HSE Duty Social Work Department to hear its view of the situation; (See Appendix IV for a list of HSE Area Social Work Contact Details);
- Making a formal referral to the Health Service Executive or An Garda Síochána.
- Informing parents about making the referral unless this would endanger the child;

A suspicion, which is not supported by any objective indication of abuse or neglect, would not constitute a reasonable suspicion or reasonable grounds for concern.

However, these suspicions should be recorded or noted internally as future suspicions may lead to the decision to make a report and, in those circumstances, earlier suspicions may provide important information.

Standard reporting procedure

Where reasonable grounds exist for the reporting of suspected or actual child abuse a report shall be made to the Health Service Executive in person, by telephone or in writing by the Child Protection Liaison Officer.

Reports may be made to the HSE Duty Social Worker Department or directly to the social worker. Each Health Service Executive office has a social worker on duty for a certain number of hours each day. The duty social worker is available to meet with, or talk on the telephone, to persons wishing to report child protection concerns.

In the event of an emergency, or the non-availability of HSE employees, the report should be made to An Garda Síochána. This may be done at any Garda Station. Under no circumstances should a child be left in a dangerous situation pending the intervention of the Health Service Executive

Information required when a report is being made

The ability of the Health Service Executive and/or An Garda Síochána to assess suspicions or allegations of child abuse will depend on the amount and quality of information conveyed to them by persons reporting their concerns.

A Template Form for Reporting Child Protection and/or Welfare Concerns is attached in Appendix I, and should be used for reporting suspected child abuse to the Health Service Executive or An Garda Síochána. If a report is made by phone, this form should be forwarded subsequently to the Health Service Executive.

Any employee/volunteer/Child Protection Liaison Officer(s) who suspects child abuse should inform the parents/guardians if a report is to be submitted to the Health Service Executive or An Garda Síochána unless doing so is likely to endanger the child or undermine an investigation. Guidance may be obtained from the Health Service Executive or An Garda Síochána on how this might be undertaken.

Any Council employee/volunteer who suspects child abuse shall not interview the child or the child's parents/guardians in any detail about the alleged abuse.

Additional guidance on the arrangements for reporting child abuse can be found in Chapter 4 of Children First – National Guidelines for the Protection and Welfare of Children issued by the Department of Health and Children.

All actions taken and outcomes should be recorded.

Cases where concerns are not referred on

In those cases where the Council decides that it should not refer concerns to the Health Service Executive or An Garda Síochána, the employee/volunteer who raised the concern must be given a clear written statement, from the Child Protection Liaison Officer, of the reasons why the Council is not doing so.

The employee/ volunteer should be advised that, if they remain concerned about the situation, they are free to consult with, or report to, the Health Service Executive or An Garda Síochána.

Malicious or vexatious allegations of child abuse made by employees/volunteers may be considered to be a disciplinary matter and dealt with accordingly, subject to 'The Protections for Persons Reporting Child Abuse Act , 1998' (see below).

Common Impediments to the Reporting of Child Abuse

Child abuse is a difficult and, to some people, distasteful subject. There is a common tendency to believe that it happens only to 'other people'. The identification of child abuse is frequently linked to personal experiences, values and beliefs, and there may be a reluctance to acknowledge its existence.

The belief that parents or other persons in charge of children would actually hurt or neglect them is not easy to sustain. It is easy, therefore, to deny, minimise or explain away any signs that a child is being harmed, even when evidence exists.

At times, it is hard to distinguish between abusive situations and those where other social problems such as unemployment, poverty, poor housing, mental illness or isolation are present. Sympathy for families in difficult circumstances can sometimes dilute personal or professional concerns about the safety and welfare of children.

Reluctance to act on suspicions about child abuse can often stem from uncertainty and fear. Individuals may be afraid of repercussions, afraid of being thought insensitive, afraid of breaking confidence, or afraid of being disloyal. Knowledge and information about child abuse will help to overcome reluctance to take action.

The Protections for Persons Reporting Child Abuse Act, 1998 provides immunity from civil liability to persons who report child abuse "reasonably and in good faith" to designated officers, the HSE or any member of An Garda Síochána. This means that, even if a reported suspicion of child abuse proves unfounded, a plaintiff who took an action would have to prove that the reporter had not acted reasonably and in good faith in making the report.

Section 4 Dealing with Complaints/Allegations against the Council, Employees and Volunteers

Allegations of a general nature

Allegations of a general nature (not related to the alleged abuse or neglect of a child) which are made against the Council, its employees or volunteers must be investigated, dealt with and managed by the Council in accordance with the Council's Complaints Procedure. A copy of the Council's Complaints Procedure is available at (<http://www.cavancoco.ie>).

Employees/volunteers are required to co-operate with investigations by or on behalf of the Council in accordance with the Complaints Procedure. The Council's Disciplinary Procedure may be invoked in circumstances where it is found that an employee/volunteer has engaged in negligent, unsafe or otherwise inappropriate behaviour in respect of the allegation.

Allegations against an Employee or Volunteer

Where an allegation of abuse of a child is made against an employee or volunteer the reporting procedure must be dealt with and managed by the Council, guided by the Council's Child Protection Liaison Officer(s) as outlined under Children First: National Guidelines for the Protection and Welfare of Children.

It is important to note that the investigation of suspected child abuse is the responsibility of the statutory authorities i.e. Health Service Executive/An Garda Síochána and shall not be undertaken by the Council's Child Protection Liaison Officer(s) or other Local Authority employees.

Where such an allegation is made against an employee, or volunteer contact and consultation with the Health Service Executive and An Garda Síochána will take place as soon as reasonably practical. This may be done through the Council's Child Protection Liaison Officer(s). Following these consultations any action will be guided by the relevant Statutory Body.

Procedures for the reporting of such incidents are set out in Section 12 of Children First: National Guidelines for the Protection and Welfare of Children a copy of which can be made available on request or can be found on the website of the Department of Health and Children – www.dohc.ie

The Council will, as a matter of urgency, take any necessary protective measures that are proportionate to the level of risk and will balance its obligations to its employee with its obligations in respect of the best interests of children.

When an allegation is made against an employee, the following steps shall be taken:

- 1 The first priority shall be to ensure that no child is exposed to unnecessary risk. The employer should as a matter of urgency take any necessary protective measures. These measures should be proportionate to the level of risk.
- 2 Action shall be guided by the agreed internal procedures i.e. Council's Grievance and Disciplinary Procedures, the applicable employment contract and the rules of natural justice, where appropriate; (See Appendix IX: Employee/Volunteer Allegation Chart)
- 3 The Manager shall be informed as soon as possible;
- 4 The follow up on an allegation of abuse against an employee shall be made in consultation with the Health Service Executive and An Garda Síochána. An immediate meeting shall be arranged with these two agencies for this purpose;
- 5 When pursuing the question of the future position of the employee, the Child Protection Liaison Officer shall advise the person accused of the allegation and the agreed procedures shall be followed;
- 6 Local Authorities/Managers shall take care to ensure actions taken by them do not undermine or frustrate any investigations being conducted by the Health Service Executive or An Garda Síochána. It is strongly recommended that employers maintain a close liaison with these authorities to achieve this.

Employees/volunteer's may be subjected to erroneous or malicious allegations. Therefore any allegation of abuse will be dealt with sensitively and support will be offered to employees including counselling where necessary. However, the primary goal is to protect the child while taking care to treat the employee/volunteer fairly.

Section 5 Confidentiality

All information regarding concerns of child abuse shall be shared only on "a need to know" basis in the interests of the child. No undertakings regarding secrecy can be given. Ethical and statutory codes concerned with confidentiality and data protection provide general guidance. They are not intended to limit or prevent the exchange of information between different professional employees that have a responsibility for ensuring the protection of children. Giving information to others for the protection of a child is not a breach of confidentiality.

Anyone who receives information from colleagues about possible or actual child abuse must treat it as having been given in confidence, subject to above. Any breaches of confidential information may be regarded as a disciplinary matter, subject to above.

Records should be kept in accordance with the Data Protection Act, within an agreed HR filing system and be available only to those directly involved and within the confines of the obligations and duties of the Data Protection Act, 2003.

Section 6 Recruitment and Selection

The Council has a procedure for the vetting of employees and volunteers working with children/vulnerable adults. This procedure has been determined by An Garda Síochána and the Department of Environment, Heritage and Local Government.

All applicants for appointment or engagement will be required to supply information in writing on the prescribed Consent Form and to provide formal photographic identification in support of their application. This will include personal details, past and current work/volunteering experience and any qualifications or skills relevant to the post.

Applicants for employment will be required to make a declaration relating to previous criminal records (see Sample Declaration Form Appendix VI)

When a candidate is being considered for appointment or is being placed on a panel, the completed Consent Form will be sent to the Garda Central Vetting Unit by the Council's Authorised Signatory as appointed under the Garda Vetting Procedure.

Volunteers may be required to supply information in writing on the prescribed Consent Form with a view to being vetted by An Garda Síochána. This requirement will be determined through liaison with the Council's Authorised Signatory. The Authorised Signatory should seek advice on the possibility of vetting volunteers through the Garda Vetting Unit.

All candidates being considered for employment will be subject to reference checks. It is the policy to gain at least two recent employment references from those who have knowledge of the individual's recent career in a professional context.

Each reference check will be validated by a phone call.

Section 7 Grant Funding

In circumstances where there is grant assistance to festivals or community groups under the Arts or any grant scheme, the relevant Local Authority should ensure that the group or festival has appropriate policies in place as regards child protection. The relevant Local Authority should also require confirmation that the appropriate insurance policies are in place.

Section 8 Further information

Further information on child protection and welfare is available from the Council's Child Protection Liaison Officer(s) from the Health Service Executive and from the Department of Health and Children.

Section 9 Review

This policy will be reviewed on a bi-annual basis or earlier as required.

Appendix I Standard form for reporting Child Protection and/or Welfare Concerns

Private and Confidential

In case of emergency or outside Health Board hours, contact should be made with An Garda Síochana.

A.To Principal Social Worker / Designate: _____

This will be printed as relevant to each Community Care Area.

1. Details of Child:

Name: _____

Male:

Female:

Address: _____

_____ Age/D.O.B.: _____

_____ School: _____

1a.Name of Mother: _____

Name of Father: _____

Address of Mother if different to Child:

Address of Father if different to Child:

Telephone _____
Number:

Telephone _____
Number:

1b. Care and custody arrangements regarding child if known:

1c. Household Composition:

Name	Relationship to child	Date of Birth	Additional Information e.g. School/Occupation

Note: A separate report form must be complete in respect of each child being reported.

2. Details of concern(s), allegation(s) or incident(s), dates, times, who was present, description of any observed injuries, parent's view(s), child's view(s) (if known).

3. Details of person(s) allegedly causing concern in relation to the child:

Name: _____ Age: ____ Male: Female:

Address: _____

Relationship
to Child: _____

Occupation: _____

4. Name and Address of other personnel or agencies involved with this child:

Social
Workers: _____ School: _____

Public

Health

Nurse _____

Gardaí: _____

G.P.: _____

Pre-School/Crèche/Youth Club:

Hospital: _____

Other, Specify e.g. Youth Groups, After School Clubs:

5. Are Parents/Legal Guardians aware of this referral to the SocialWork Department?

Yes No

If Yes, what is their

attitude? _____

6. Details of Person Reporting Concern:

(Please see Guidance Notes re Limitations of Confidentiality)

Name: _____ Occupation: _____

Address: _____

Telephone

Number: _____

Nature and extent of contact with _____
Child/Family:

7. Details of Person completing form:

Name: _____ Date: _____

Occupation: _____ Signed: _____

Guidance Notes.

Health Boards have a statutory responsibility under the *Child Care Act, 1991*, to promote the welfare and protection of children in their area. Health Boards, therefore, have an obligation to receive information about any child who is not receiving adequate care and/or protection.

This reporting form is for use by:

- Health Board Personnel
- Professionals and individuals in the provision of child care services in the community who have service contracts with the Health Boards
- Designated person in a voluntary or community agency
- Any professional, individual or group involved in services to children who becomes aware of a child protection or child welfare concern, or to whom a child protection or child welfare concern is reported.

Please fill in as much information and detail as is known to you. (Health Board personnel should do this in consultation with their line manager.) This will assist the Social Work Department in assessing the level of risk to the child, or support services required. If the information requested is not known to you, please indicate by putting a line through the question. It is likely that a social worker will contact you to discuss your report.

Health Boards aim to work in partnership with parents. If you are making this report in confidence you should note that the Health Board cannot guarantee absolute confidentiality as:

- A Court could order that information be disclosed
- Under the *Freedom of Information Act, 1997*, the Freedom of Information Commissioner may order that information be disclosed.

You should also note that in making a 'bona fide' report, you are protected under the *Protection for Persons reporting Child Abuse Act, 1998*.

If you are unsure if you should report your concerns, please telephone the duty social worker and discuss your concerns with him/her. (*Local Arrangement to be inserted*).

Appendix II Incident Report Form

Confidential

Type of incident _____

Occurred on: date / / time _____

Reported on: date / / time _____

Location: _____

Event / activity: _____

Particulars of Incident _____

Relevant Child Details

Witness Details (if appropriate)

<p>Name: _____</p> <p>Address: _____</p> <p>_____</p> <p>_____</p> <p>Tel: _____ DOB <u> / / </u></p>	<p>Name _____</p> <p>Address: _____</p> <p>_____</p> <p>_____</p> <p>Tel: _____</p>
---	---

Were gardaí contacted Yes No Date / /

Was security contacted Yes No Date / /

Were medical personnel contacted Yes No Date / /

Was parent / guardian contacted Yes No Date / /

If yes, provide brief details:

- Please submit to the Human Resources Department
- Any supporting evidence or other relevant documentation should be attached to this form

Appendix III Guidance on Categories of Child Abuse

1. Recognition 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.

2. Neglect

Neglect can be defined in terms of an omission, where the child suffers significant harm or impairment of development by being deprived of food, clothing, warmth, hygiene, intellectual stimulation, supervision and safety, attachment to and affection from adults and medical care. Harm can be defined as the ill-treatment or the impairment of the health or development of a child. Whether it is significant is determined by his/her health and development as compared to that which could reasonably be expected of a child of similar age.

Neglect generally becomes apparent in different ways over a period of time rather than at one specific point. The threshold of significant harm is reached when the child's needs are neglected to the extent that his or her well-being and/or development are severely affected.

3. Signs and Symptoms of Child Neglect

A distinction can be made between "willful" neglect and "circumstantial" neglect. For instance, "willful" neglect would generally incorporate a direct and deliberate deprivation by a parent/guardian of a child's most basic needs e.g. withdrawal of food, shelter, warmth, clothing, contact with others, whereas "circumstantial" neglect more often may be due to stress/inability to cope by parents or guardians.

Child neglect may 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 or adequate clothing
- 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 not alone due to malnutrition but also due to emotional deprivation
- Failure to provide adequate care for the child's medical problems
- Exploited, overworked

4. Emotional Abuse

Emotional abuse is normally to be found in the relationship between a care-giver and a child rather than in a specific event or pattern of events. It occurs when a child's need for affection, approval, consistency and security are not met. Unless other forms of abuse are present, it is rarely manifested in terms of physical signs or symptoms.

Examples of emotional abuse of children include:

- the imposition of negative attributes on children, expressed by persistent criticism, sarcasm, hostility or blaming;
- conditional parenting in which the level of care shown to a child is made contingent on his or her behaviours or actions;
- emotional unavailability by the child's parent/guardian;
- unresponsiveness, inconsistent, or inappropriate expectations of the child;
- premature imposition of responsibility on the child;
- unrealistic or inappropriate expectations of the child's capacity to understand something or to behave and control himself in a certain way;
- under or over-protection of the child;

- failure to show interest in, or provide age-appropriate opportunities for, the child's
- cognitive and emotional development;
- use of unreasonable or over-harsh disciplinary measures;
- exposure to domestic violence.

The threshold of significant harm is reached when abusive interactions dominate and become typical of the relationship between the child and the parent/guardian.

5. Signs and Symptoms of Emotional Child Abuse

Emotional abuse is not easy to recognise because the effects are not easily observable. Emotional abuse can be defined in reference to the following indices. However, it should be noted that no one indicator is conclusive of emotional abuse.

- Rejection
- Lack of praise and encouragement
- 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)
- 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's behaviour - relative to his/her age and stage of development.

6. Physical Abuse

Physical abuse is any form of non-accidental injury or injury which results from wilful or neglectful failure to protect a child. Examples of physical injury include the following:

- shaking
- use of excessive force in handling
- deliberate poisoning
- suffocation
- Munchausen's Syndrome by Proxy
- allowing or creating a substantial risk of significant harm to a child.

7. Signs and Symptoms of Physical Abuse

Unsatisfactory explanations or varying explanations for the following events are highly suspicious:

- Bruises
- Fractures
- Swollen joints
- Burns/Scalds(see below for more detail)
- Abrasions/Lacerations
- Hemorrhages (retinal, subdural)
- Damage to body organs
- Poisonings - repeated (prescribed drugs, alcohol)
- Failure to thrive
- Coma/Unconsciousness
- Death.

8. Sexual Abuse

Sexual abuse occurs when a child is used by another person for his or her gratification or sexual arousal or for that of others. Examples of child sexual abuse include the following::

- exposure of the sexual organs or any sexual act intentionally performed in the presence of the child;
- intentional touching or molesting of the body of a child whether by a person or object for the purpose of sexual arousal or gratification;
- masturbation in the presence of the child or the involvement of the child in an act of masturbation;
- sexual intercourse with the child whether oral, vaginal, or anal;

Sexual exploitation of a child includes inciting, encouraging propositioning, requiring or permitting a child to solicit for, or to engage in, prostitution or other sexual acts. Sexual exploitation also occurs when a child is involved in the exhibition, modelling or posing for the purpose of sexual arousal, gratification or sexual act, including its recording (on film, video tape or other media) or the manipulation, for those purposes, of the image by computer or other means. It may also include showing sexually explicit material to children which is often a feature of the “grooming” process by perpetrators of abuse.

For the purposes of the criminal law, the age of consent to sexual intercourse is 17 years. This means, for example, that sexual intercourse between a 16 year-old girl and her 17 year-old boyfriend is illegal, although it might not be regarded as constituting child sexual abuse.

9. Signs and Symptoms of Child Sexual Abuse

Guardians 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 which involve undressing, e.g. games/swimming

Particular behavioural signs and emotional problems suggestive of child abuse in young children (0-10 yrs):

- Mood change, e.g. child becomes withdrawn, fearful, acting out;
- Lack of concentration (change in school performance)
- Bed wetting, soiling
- Psychosomatic complaints; pains, headaches
- Skin disorders
- Nightmares, changes in sleep patterns
- School refusal
- Separation anxiety
- Loss of appetite
- Isolation

Particular behavioural signs and emotional problems suggestive of child abuse in older children (10 yrs +):

- Mood change, e.g. depression, failure to communicate
- Running away
- Drug, alcohol, solvent abuse
- Self mutilation
- Suicide attempts
- Delinquency
- Truancy
- Eating disorders
- Isolation

Appendix IV HSE Nationwide: List of Duty Social Work Contact Details

Location	Address	Contact
Dublin South (Dún Laoghaire)	Our Lady's Clinic Patrick St Dún Laoghaire (NB Jan-Apr '08 - Northumberland Ave, Dún Laoghaire)	Tel: 01 6637300 Fax: 01 2844955
Dublin South East	Duty Social Work Team Leader HSE, Vergemount Hall Clonskeagh Dublin 6	Tel: 01 2680320 / 01 2680333 Fax: 01 2680406
Wicklow	North Team (Bray Area) Bray Health Centre, Block B Civic Offices, Main St., Bray South Team (Wicklow / Arklow Area) Seafront Office Unit 3 North Quay, Wicklow	Tel: 01 2744100 / 01 2744180 Fax: 01 2744136 Tel: 0404 60800 Fax: 0404 60888

Location	Address	Contact
Dublin South City	Duty Team Leader HSE Dublin Mid Leinster Carnegie Centre 21-25 Lord Edward St Dublin 2	Tel: 01 6486555 Fax: 01 6486702
Dublin South West	Duty Team Leader Millbrook Lawns Health Centre St Dominic's Tallaght, Dublin 24	Tel: 01 4275000 Fax: 01 4275090
Dublin West	Bridge House Social Work Department Community Services Dublin West Cherry Orchard Hospital Ballyfermot Dublin 10	Tel: 01 6206387 Fax: 01 6206388
Kildare West Wicklow	Social Work Dept Swan Centre Fairgreen Naas Co Kildare	Tel: 045 882400 Fax: 045 882424

Location	Address	Contact
Laois	Social Work Department Child and Family Centre Portlaoise	Tel: 057 86 92567 Fax: 057 86 62535
Offaly	Social Work Department Derry Suite Castle Buildings Tara St Tullamore, Co Offaly	Tel: 057 93 70700 Fax: 057 93 70748
Longford	Social Work Department Tivoli House Dublin Road Longford	Tel: 043 50584 Fax: 043 50798
Westmeath	Duty Social Work Athlone Health Centre Coosan Road Athlone Co Westmeath Duty Social Work Child and Family Centre Springfield Mullingar Co Westmeath	Tel: 090 64 83106 Fax: 090 64 91329 Tel: 044 93 84450 Fax: 044 93 84396

Location	Address	Contact
Cavan	HSE Community Child & Family Services Drumalee Cross Cavan	Tel: 049 4377305 & 049 4377306 Fax: 049 4377377
Monaghan	Duty Social Work Department Local Health Care Unit Rooskey Monaghan	Tel: 047 30426 / 047 30427 Fax: 047 77908
Dublin North Central	Duty Social Work Office 22 Mountjoy Square Dublin 1 Ballymun Civic Centre (2 nd floor) Main St Ballymun Dublin 9	Tel : 01 855 6871 Fax: 01 855 0589 Tel: 01 8467235 Fax: 01 8467522
North Dublin	Coolock Health Centre Cromcastle Rd Coolock Dublin 5	Tel: 01 8160314 / 8160373 Fax: 01 8487747

Location	Address	Contact
North-West Dublin	Wellmount Health Centre Finglas Dublin 11	Tel: 01 8567704 Fax: 01 8567702
Louth	Social Work Department Local Health Care Unit Wilton House Stapleton Place Dundalk Co Louth	Tel: 042 9392200 Fax: 042 9392264
Meath	Duty Social Work 25 Brewshill Navan Co Meath	Tel: 046 9030616 Fax: 046 9030648
Carlow	Duty Social Work Office Ground Floor St Dymphna's Hospital Athy Road Carlow	Tel: 059 9136587 / 059 9136588 Fax: 059 9136502

Location	Address	Contact
Kilkenny	Social Work/Child Care Dept HSE South Community Services James's Green Kilkenny (moving to new premises some time in 2008)	Tel: 056 7784532 / 056 7784017 Fax: 056 7784000
Cork - North Lee	Duty Social Work Dept. Blackpool (adjacent to Shopping Centre) Blackpool Cork	Tel: 021 4927000 Fax: 021 4927001 / 021 4927002
Cork - South Lee	Duty Social Worker South Lee Social Work Dept. St Finbarr's Hospital Cork	Tel: 021 4923001 Fax: 021 4312960
West Cork	Social Work Department HSE South West Cork Community Services Coolnagarrane Skibbereen Co Cork	Tel: 028 40447 Fax: 028 40449

Location	Address	Contact
North Cork	HSE Social Work/Child Protection Offices 134 Bank Place Mallow Co Cork	Tel: 022 54100 Fax: 022 54150
Kerry	Kerry Community Services, Rathass Tralee Co Kerry Killarney Duty Social Work Department St Margaret's Road Killarney Co Kerry	Tel: 066 7195641 / 066 7195642 / 066 7195643 Fax: 066 7195610 Tel: 064 36030 / 064 50700 Fax: 064 70714
Tipperary South Tipperary	Duty Social Work Team South Tipperary Community Care Services Western Road Clonmel, Co Tipperary	Tel : 052 77303 Fax: 052 77301

Location	Address	Contact
Waterford	Social Work Service HSE, Waterford Community Services Cork Rd Waterford	Tel: 051 842827 / 051 842841 Fax: 051 842811
Dungarvan	Duty Social Work Department Dungarvan Community Services St Joseph's Hospital Dungarvan Co Waterford	Tel: 058 20921 / 058 20906 Fax: 058 44485
Wexford North	Gorey Health Centre Hospital Grounds Gorey Co Wexford Enniscorthy Health Centre Millpark Road Enniscorthy Co Wexford	Tel: 053 21374 / 053 9430100 Fax: 053 9421492 Tel: 053 9233465 / 053 9243700 Fax: 053 9233469

Location	Address	Contact
Wexford South	New Ross Health Centre Hospital Grounds New Ross Co Wexford Duty Social Work Dept Ely Hospital Ferrybank Wexford	Tel: 051 421445 Fax: 051 421238 Tel: 053 9123522 Ext 201 Fax: 053 9147706

Location	Address	Contact
Donegal	<p>East Team, Links Business Centre Lisfannon Buncrana</p> <p>West Team Euro House Killybegs Road Donegal Town</p> <p>East Central Team Millennium Court Pearse Road Letterkenny</p> <p>West Central Team Millennium Court Pearse Road Letterkenny</p>	<p>Tel: 074 9320420 Fax: 074 9320419</p> <p>Tel: 074 9723540 Fax: 074 9723489</p> <p>Tel: 074 9123672 Fax: 074 9123697</p> <p>Tel: 074 9123770 Fax: 074 9123697</p>
Clare	<p>Social Work Dept River House Gort Road Ennis Co Clare</p>	<p>Tel: 065 6863908 / 065 6863907 Fax: 065 6863984</p>

Location	Address	Contact
Galway City	Duty Social Worker Local Health Office, HSE West 25 Newcastle Road Galway	Tel: 091 546366 / 546370 / 546325 / 546369 Fax: 091 527601

Location	Address	Contact
Galway County	Tuam Social Work Department Health Centre Vicar Street Tuam	Tel: 093 24492 Fax: 093 24608
	Loughrea Social Work Department Health Centre Loughrea	Tel: 091 847820 Fax: 091 842927
	Ballinasloe Social Work Department - Health Centre Brackernagh Ballinasloe	Tel: 09096 46200 Fax: 09096 46211
	Oughterard Social Work Department Health Centre Oughterard	Tel: 091 552200 Fax: 091 552023

Location	Address	Contact
Limerick East & West	Limerick East, Roxtown Health Centre Old Clare St Limerick	Tel: 061 483091 Fax: 061 419063
	Moyross Health Centre Moyross Limerick	Tel: 061 483790 / 061 326010 Fax: 061 329314
	Ballynanty Health Centre Kileely Rd Ballynanty, Limerick	Tel: 061 457100 (if Moyross not available) Fax: 061 457101
	SW Dept. South Hill Health Centre South Hill Limerick City	Tel: 061 209985 Fax: 061 209998
	Limerick West SW Dept Newcastle West Health Centre Gortboy Newcastle West, Co Limerick	Tel: 069 66653 Fax: 069 62980

Location	Address	Contact
Mayo	<p>Ballina Social Work Team Health Centre Mercy Road Ballina</p> <p>Castlebar Social Work Team Hill House Mountain View Castlebar</p> <p>Swinford Social Work Team, Health Centre Swinford</p>	<p>Tel: 096 21511 / 096 24841</p> <p>Fax: 096 70442</p> <p>Tel: 094 9022333</p> <p>Fax: 094 9026110</p> <p>Tel: 094 9251900</p> <p>Fax: 094 9252570</p>
North Tipperary	<p>North Tipperary Social Work Department Annbrook</p> <p>Limerick Rd Nenagh</p> <p>Co Tipperary</p> <p>St Mary's Health Centre Parnell Street Thurles</p> <p>Co Tipperary</p>	<p>Tel: 067 41934</p> <p>Fax: 067 42069</p> <p>Tel: 0504 27609</p> <p>Fax: 0504 24638</p>

Appendix V Children First – National Guidelines for the Protection and Welfare of Children

Chapter Twelve

Allegations of Abuse against Employees and Volunteers

12.1 Purpose

This chapter provides guidance to employers in a situation where an allegation of abuse is made against an employee. In this context, employees also include unpaid volunteers as well as foster-parents. Employers may encompass disability organisations, schools, crèches or nongovernmental organisations such as sports clubs. The guidelines are offered to assist managers in having due regard for the rights and interests of the child on the one hand and those of the employee against whom the allegation is made on the other hand. Employers have a dual responsibility in respect of both the child and the employee. All employers should have agreed procedures to address situations where allegations of child abuse are made against an employee.

12.2 General Procedures

12.2.1 It is important to note that there are two procedures to be followed here:

- (i) the reporting procedure in respect of the child;
- (ii) the procedure for dealing with the employee.

In general it is recommended that the same person should not have responsibility for dealing with both the reporting issues and the employment issues. It is preferable to separate these issues and manage them independently. These procedures should be followed in the event of suspicion or disclosure of abuse against an employee.

12.2.2 Staff/volunteers may be subjected to erroneous or malicious allegations.

Therefore any allegation of abuse should be dealt with sensitively and support provided for staff including counselling where necessary. However, the primary goal is to protect the child while taking care to treat the employee fairly.

12.3 Guidance on Reporting

12.3.1 All organisations providing services to children should have clear written procedures on the action to be taken if allegations of abuse against employees are received. Guidance should be provided for both children and staff/volunteers on how to report suspected abuse. The need for awareness and to report concerns should be reinforced through training and supervision.

12.3.2 Employers should ensure that children and staff are aware of internal line management reporting procedures. Employees should also be aware of the appropriate authorities to whom they should report outside the organisation if they are inhibited for any reason in reporting the incident internally or where they are dissatisfied with the internal response.

12.4 Employer's Responsibility to Report to Statutory Authorities

12.4.1 Where an employer becomes aware of an allegation of abuse by an employee the standard procedure for reporting allegations to the health board should be followed without delay (see Chapter Four). Health Boards should have their own internal reporting procedures in place in regard to allegations made against their employees.

12.4.2 Action taken in reporting an allegation of child abuse against an employee should be based on an opinion formed reasonably and in good faith. When an allegation is received it should be assessed promptly and carefully. It will be necessary to decide whether a formal report should be made to the health board; this decision should be based on reasonable grounds for concern as outlined in Chapter Four.

12.4.3 When an employer becomes aware of an allegation of abuse of a child or children by an employee during the execution of that employee's duties, the employer should privately inform the employee of the following:

- (i) the fact that an allegation has been made against him/her;
- (ii) the nature of the allegation.

The employee should be afforded an opportunity to respond. The employer should note the response and pass on this information when making the formal report to the health board.

12.4.4 Organisations as well as individuals may avail of the immunity from civil liability provided in the Protections for Persons Reporting Child Abuse Act, 1998 provided they report "reasonably and in good faith" to the appropriate authorities. Section 3(1) of the Act states:

"3.(1) A person who, apart from this section, would be so liable shall not be liable in damages in respect of the communication, whether in writing or otherwise, by him or her to an appropriate person of his or her opinion that

(a) a child has been or is being assaulted, ill-treated, neglected or sexually abused, or

(b) a child's health, development or welfare has been or is being avoidably impaired or neglected, unless it is proved that he or she has not acted reasonably and in good faith in forming that opinion and communicating it to the appropriate person"

12.5 Procedures for Dealing with Employees and Employer's Duty of Care to Children

12.5.1 When an allegation is made against an employee, the following steps should be taken:

(i) Action should be guided by the agreed procedures, the applicable employment contract and the rules of natural justice.

(ii) The Chairperson (or equivalent head of organisation) should be informed as soon as possible.

(iii) The first priority should be to ensure that no child is exposed to unnecessary risk. The employer should as a matter of urgency take any necessary protective measures. These measures should be proportionate to the level of risk and should not unreasonably penalise the employee, financially or otherwise, unless necessary to

protect children. Where protective measures do penalise the employee, it is important that early consideration be given to the case.

(iv) The follow up on an allegation of abuse against an employee should be made in consultation with the health board and An Garda Síochána. An immediate meeting should be arranged with these two agencies for this purpose.

(v) After these consultations referred to above and when pursuing the question of the future position of the employee, the Chairperson (or equivalent head of organisation) should advise the person accused of the allegation and the agreed procedures should be followed.

(vi) Employers/Managers should take care to ensure actions taken by them do not undermine or frustrate any investigations being conducted by the health board or An Garda Síochána. It is strongly recommended that employers maintain a close liaison with these authorities to achieve this.

12.6 Guidance for Health Boards

12.6.1 Health boards will regularly receive allegations of abuse against people who have contact with children in their workplace or in a sports or youth club. If the health board considers that children are, or may be, at risk from the alleged abuser, they should contact the institution or employer immediately. In this situation it is not necessary to notify the alleged abuser in advance of the allegations against him or her.

12.6.2 Where a health board proposes to notify an alleged abuser's employer or person-in charge of a club where (s)he attends, and where there is no immediate danger to children, the alleged abuser must be notified in advance of the allegations against him/her. The approach to an employer/person-in-charge in such cases may take place at any stage in the wider investigation and it may be practical that such an approach does not take place until any criminal or health board investigation has concluded.

12.6.3 Health boards should put arrangements in place to provide feedback to employers/persons-in-charge in regard to the progress of a child abuse investigation

involving an employee. Efforts should be made by health boards to investigate complaints against employees promptly and to complete their assessment as quickly as possible bearing in mind the serious implications for the innocent employee.

Employers/persons-in-charge should be notified of the outcome of an investigation. The health board should pass on reports and records to the employer and to the employee in question where appropriate. This will assist the employer/person-in-charge in reaching a decision as to the action to be taken in the longer term concerning the employee.

Children First Information and Advice Officers

Name	Area	Contact Address	Contact Numbers
Jan Perrin Edwina Flavin	HSE Dublin Mid-Leinster Dublin South City, Dublin South West, Dublin West Kildare, West Wicklow	Children and Families Training and Development Unit, Unit 4044 City West Business Campus Saggart, Co Dublin	Phone: (01) 4691720 Fax No: (01) 4691728 edwina.flavin@hse.ie jan.perrin@hse.ie
Lorraine Egan	HSE Dublin Mid-Leinster LHOs: Dublin South (Dún Laoghaire); Dublin South East; Wicklow	Block B, Civic Centre Main St Bray, Co Wicklow	Phone: (01) 2744273 Fax No: (01) 2744287 lorraine.egan@hse.ie
Charney Weitzman	HSE Dublin Mid-Leinster Longford/Westmeath & Laois/Offaly	Child Care Unit, Block 4, Central Business Park, Tullamore, Co Offaly	Phone: (057) 9357842 Fax No: (057) 9357846 charney.weitzman@hse.ie

Name	Area	Contact Address	Contact Numbers
	HSE Dublin North East LHOs Dublin North West; Dublin North Central; Dublin North	Child Care & Development Unit, 3 rd Floor, Park House, North Circular Road, Dublin 7	Phone: (01) 8823433 Fax No: (01) 8823491
Deirdre Horan-Martin	HSE Dublin North East Cavan/Monaghan	Office of the Local Health Manager HSE PCCC Cavan & Monaghan Rooskey Monaghan	Phone: (047) 30470 Fax No: (047) 38532 deirdrem.horanmartin@hse.ie
Kathryn Morris	HSE Dublin North East Meath	Child Care Services Enterprise Centre Trim Rd Navan, Co Meath	Phone: (046) 9097846 Fax No: (046) 9097900 kathryn.morris@hse.ie
Anne Purcell	HSE South Carlow, Kilkenny. Wexford, Waterford, South Tipperary	Health Centre, Castlehill, Carlow	Phone:(059)9133797/9136520 Fax No: (0503) 36550 ann.purcell@hse.ie
Margaret Fitzgerald	HSE South North Lee, North Cork, Kerry	Ellis House, Ballyvolane Commercial Park, Ballyvolane, Cork	Phone: (021) 4529010 Fax No: (021) 4529028 margareta.fitzgerald1@hse.ie
Sheelagh Broderick	South Lee, North Lee		sheelagh.broderick@hse.ie
Maureen Crowley	West Cork, Kerry		maureen.crowley@hse.ie
Bríd Burke	HSE West Galway	Community Services, The Annex, Western Area, HSE, Seamus Quirke Rd, Galway	Phone: (091) 548440 Fax No: (091) 524226 brid.burke@hse.ie

Name	Area	Contact Address	Contact Numbers
Sandra Claxton	HSE West Roscommon, Mayo	Primary, Community & Continuing Care, 2 nd Floor, St Mary's Headquarters, Castlebar, Co. Mayo	Phone: (094) 90 42579 Fax No: (094) 90 20452 sandra.claxton@hse.ie
Noreen Herron	HSE West Sligo, Leitrim, Donegal, Cavan	Markievicz House, Barrack Street, Sligo	Phone: (071) 9155181 Fax No: (071) 9155131 noreen.herron@hse.ie
Jan Godfrey	HSE West Clare	River House, Gort Road, Ennis, Co Clare	Phone: (065) 6863919 Fax No: (065) 6863983 jan.godfrey@hse.ie
Anne Murray	HSE West Limerick	87 O'Connell St., Limerick	Phone: (061) 483520 Fax No: (061) 468902 annem.murray@hse.ie
Laura Nee	HSE West Tipperary North	Child Care Manager's Dept, Annbrook, Limerick Road, Nenagh, Co Tipperary	Phone: (067) 38314 Fax No: (067) 38301 laura.nee@hse.ie

Appendix VI Declaration Form

Confidential

Declaration Form for all those working with children and young people.

Surname:

Firstname:

Date of Birth:

Place of Birth:

Address:

Tel. No:

Mobile No:

Any other name(s) previously known as:

Is there any reason that you would be considered unsuitable to work with children and young people?

Yes

No

If yes, please outline the reason below.

Have you ever been convicted of a criminal offence?

If yes, please state below the nature and date(s) of the offence(s):

Signed:

Date:

Appendix VII Key Legislative Provisions and National Guidelines

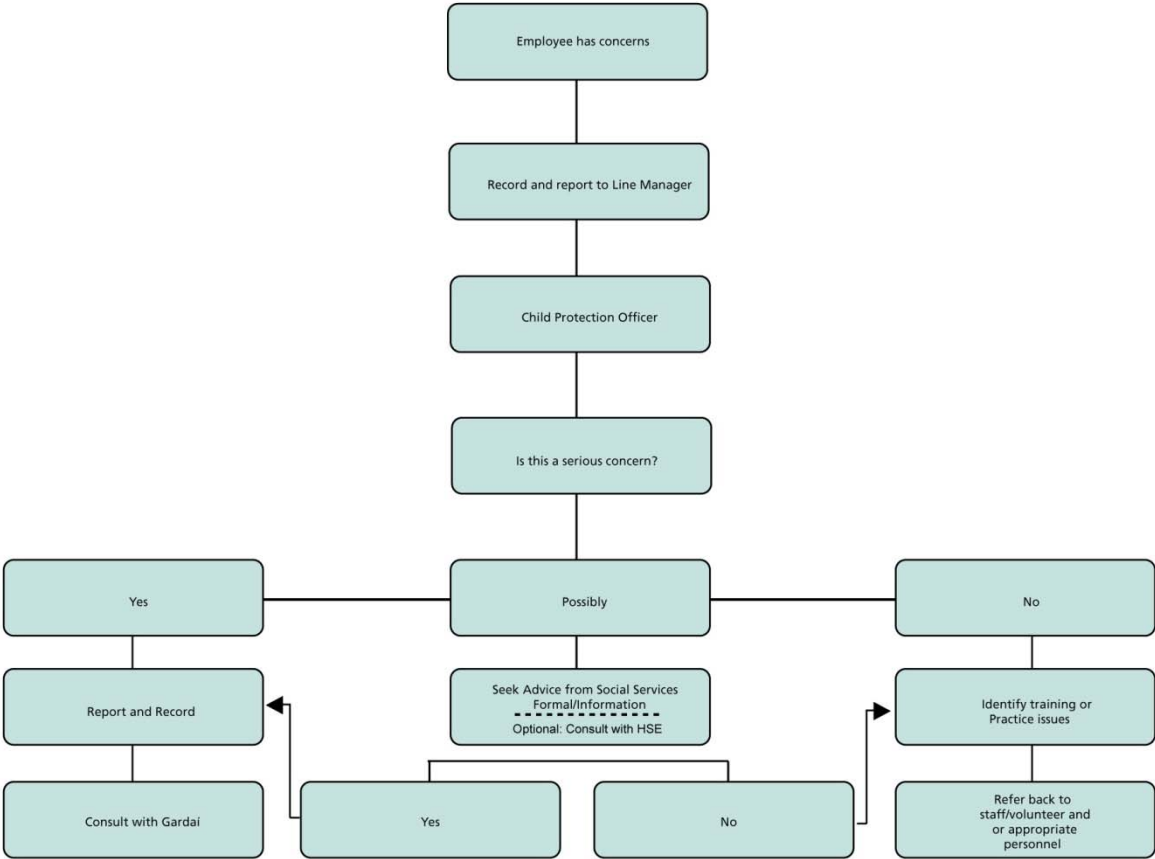
- The Child Care Act 1991
- The Domestic Violence Act 1996
- Protection for Persons Reporting Child Abuse Act 1998
- The Data Protection Acts 1988 - 2003
- The Education Act 1998
- The Non-Fatal Offences Against the Person Act 1997
- The Freedom of Information Acts 1997 – 2003
- The Equal Status Acts 2000-2004
- Children First National Guidelines for the Protection and Welfare of Children
- Department of Health and Children, September 1999
- Our Duty to Care, The principles of good practice for the protection of children and young people Department of Health and Children, 2002
- Our Duty to Care, The principles of good practice for the protection of children and young people
- Department of Health and Children, 2002

Appendix VIII List of areas in the Council with regular contact with children*

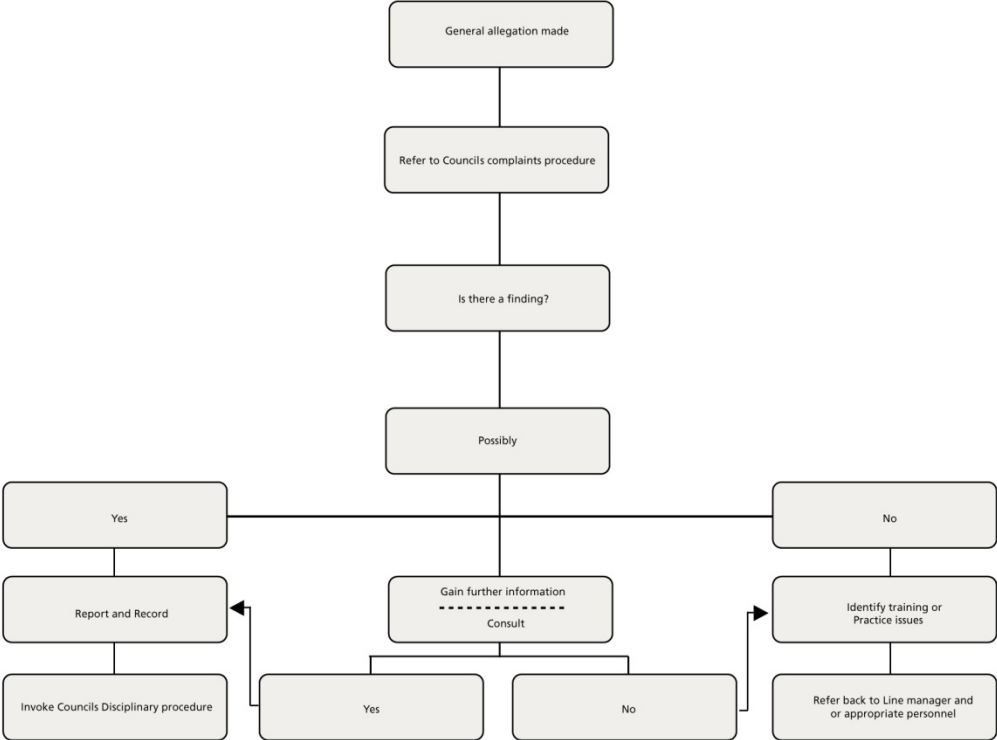
- All Library posts
- School Wardens
- Road Safety Officer
- Arts Officers
- Housing Staff (Housing and Maintenance)
- Litter Wardens and Dog Wardens
- Fire Service (particularly those involved in visiting schools)
- Caretakers
- Sports Centres
- Museum employees
- Environmental Schools Programme
- Revenue Collectors
- Community Liaison Officers
- RAPID Co-Ordinators
- Community and Enterprise Officers
- Civil Defence (employees and volunteers)
- Comhairle na nÓg (employees and volunteers)
- Junior Achievement (employees and volunteers)
- Volunteers engaged in a range of activities

* Please note that list is non-exhaustive and the Council must assess each post for relevance of the Child Protection Policy.

Appendix IX Reporting Procedures A - Employee Concern

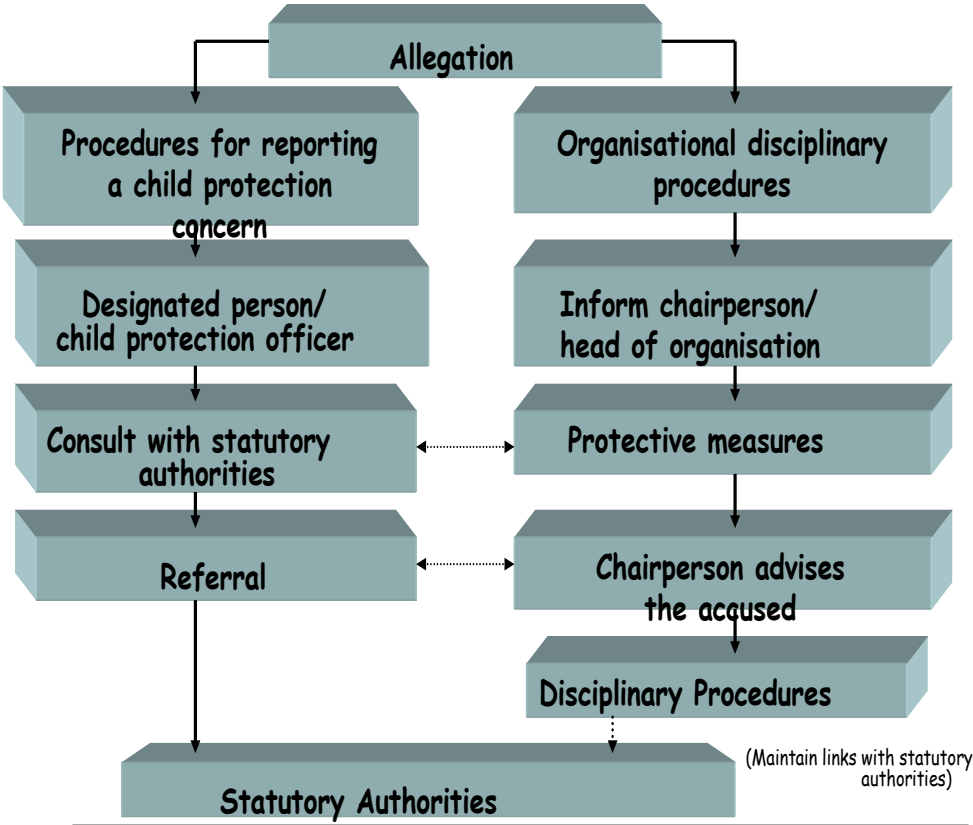


Appendix IX Reporting Procedures B - General Allegation



Appendix IX Reporting Procedures Employee Volunteer Allegation

ALLEGATIONS OF ABUSE AGAINST EMPLOYEES AND VOLUNTEERS



This Policy is not a legal interpretation of the legislation