



Code of Good Practice

Child Protection

for

The Youth Work Sector

2nd Edition May 2003



R. N. ROINN
OIDEACHAIS
AGUS EOLAÍOCHTA

DEPARTMENT OF
EDUCATION
AND SCIENCE



Code of Good Practice

Child Protection

for

The Youth Work Sector

2nd Edition

May 2003



AN ROINN OIDEACHAIS
AGUS EOLAÍOCHTA | DEPARTMENT OF
EDUCATION
AND SCIENCE

© 2003 Department of Education and Science
ISBN 0-7557-1570-5

Designed by Metaphor

Dublin
Published by the Stationery Office
To be purchased directly from the
Government Publications Sales Office
Sun Alliance House,
Molesworth Street, Dublin 2,
or by mail order from
Government Publications, Postal Trade Section,
51 St. Stephen's Green, Dublin 2
(Tel: 01-6476000 Fax: 01-6476843)
or through any bookseller

€2.50

Contents

Foreword by Ms. Síle de Valera, T.D., Minister for Youth Affairs	v
Introduction by Mr Pat Forde, Chairperson, National Youth Work Advisory Committee	vi
Acknowledgements	vii
Glossary	viii
Sections	
Section One	Introduction and Legal Framework 1
Section Two	Principles of Youth Policy 4
Section Three	The Rights of the Young Person 7
Section Four	The Development of Quality Standards in Youth Work 9
Section Five	Safe Practices in Youth Work 13
Section Six	Understanding and Recognising Child Abuse 16
Section Seven	Reporting Procedures in Respect of Suspected or Actual Child Abuse 24
Section Eight	Action to be taken when an Allegation is made Against Employees, Volunteers or other Members of the Organisation/Group 31
Appendices	
Appendix One	Sample Volunteer Application Form 35
Appendix Two	Sample Volunteer Reference Form 37
Appendix Three	Standard Form for Reporting Child Protection and/or Welfare Concerns 38
Appendix Four	Health Board Child Care contact addresses 41
Appendix Five	Contact addresses for Health Board information and Advice Officers 44
Appendix Six	Relevant Legislation Relating to the Storage of Information 47
Appendix Seven	Pre-Employment Consultancy Service (PECS) – Northern Ireland 48
Appendix Eight	Reference and Source Material 51
Appendix Nine	Useful Contacts 52

Foreword by Minister for Youth Affairs



The problem of child abuse has become more evident in recent years. This has made us more aware of our duties and responsibilities in the protection of young people under our care and in the prevention of child abuse. Child Protection is an issue which concerns every citizen of this State. The publication in 1999, of *Children First, National Guidelines for the Protection and Welfare of Children*, charged each and every organisation, whether statutory or voluntary, providing services to children, to produce a child protection policy tailored to their specific needs. While this policy is not covered by legislation, nevertheless the provision of guidelines is the responsibility of each organisation.

In keeping with the intention of *Children First*, my Department, in consultation with the partners in the Youth Work Sector has now reviewed the guidelines on Child Protection as it relates to youth work services. That review has been completed and has resulted in new guidelines entitled *Code of Good Practice, Child Protection for the Youth Work Sector*.

The main aim of youth work provision in Ireland is to assist all young people to realise their full potential as individuals and to become active participants in a democratic society. It is vital that young people are given the opportunity for their personal and social development in a safe environment. The overall aim of this Code is the protection and the well being of all participating children and young people.

This *Code of Good Practice* has been specifically prepared with the youth work sector in mind. It aims to assist and give direction and guidance to youth workers and youth work organisations/groups in protecting the children and young people under their care and in dealing with allegations or suspicions of child abuse.

In addition to this *Code of Good Practice*, I am committed to ensuring that a suitable training programme is undertaken for youth workers and especially for those who are designated as Child Protection Officers by their youth organisations.

In addition, this Code recognises the wonderful contribution made by many adults, primarily on a voluntary basis to the development of youth work activities among young people. The *Code of Good Practice* will assist both officials and volunteers involved in youth organisations in the adoption of proven procedures should problems arise regarding child protection issues.

I would like to express my thanks to all those who have been involved in the preparation of the *Code of Good Practice* especially the members of the National Youth Work Advisory Committee, and the members of the sub-committees on Child Protection who brought this very useful reference book to finalisation. I am confident that this Code will provide an important source of reference for all involved in Youth Work provision, in dealing with Child Protection. I know that many organisations will base their Child Protection policies on the contents of this publication.

Síle de Valera, T.D.,
Minister for Youth Affairs
September 2002.

Introduction



The development of a *Code of Good Practice, Child Protection for the Youth Work Sector* is the culmination of many months of work and co-operation by many individuals, groups and organisations. The main credit, however, for the final product must go to the sub-committees of NWyAC, established to prepare a *Code of Good Practice, Child Protection for the Youth Work Sector*, and to the staff of the Youth Affairs Section of the Department of Education and Science.

On behalf of the National Youth Work Advisory Committee (NWyAC), I would like to express our warm gratitude for the sustained energy, commitment and thoroughness in bringing this piece of work to a successful conclusion, which appeared as a daunting challenge some time ago.

The *Code of Good Practice, Child Protection for the Youth Work Sector* is a most welcome initiative for the Youth Work sector and should be most beneficial to all organisations involved in the provision of services to young people throughout Ireland.

Pat Forde
Chairperson

National Youth Work Advisory Committee (NWyAC)

Acknowledgements

The publication of this *Code of Good Practice* would not have been possible without the huge contribution made by the three sub-committees set up by the National Youth Work Advisory Committee. These are the:

Sub-Committee on Child Protection,
Child Protection Expert Group and
The Implementation Sub-Group on Child Protection.

Due to the many changes in representation on these committees in the time it has taken to get this Code to its successful conclusion, it is not possible to list all those who attended meetings and made contributions, both oral and written. Their efficiency and thoroughness deserves the highest commendation.

Image for cover provided by Colm Kavanagh, Programme Development Office, Catholic Scouts of Ireland.

Glossary

Caregiver	Any adult person who has responsibility for a child in the short or long term.
Child	For the purpose of this code, a ‘child’ means anyone who is under 18 years of age. This includes young people. In Ireland, the <i>Child Care Act, 1991</i> defines a child as any person under the age of 18 years, excluding a person who is or who has been married.
Child Abuse	Child Abuse can be categorised into a number of different types including: neglect, emotional abuse, physical abuse and sexual abuse. A child may be subject to more than one form of abuse at any given time.
Children/Young People	For the purpose of this Code, children or young people who are members of youth organisations/groups.
Child Protection Officer/ Designated Person	The Child Protection Officer is the title given to the designated person in each youth organisation, appointed to deal with child protection concerns reported by volunteers, employees or young people.
Emotional Abuse	This occurs when a child or young person’s needs for affection, approval, consistency and security are not met. Emotional Abuse is normally found in the relationship between a caregiver and a child.
Employees	Paid staff in youth organisations/groups.
Management Committee	Appointed to oversee club activities and the development of the organisation/group. Takes overall responsibility for an organisation/group and will often have a direct input into the nature and organisation of the organisation/group etc.
Neglect:	Neglect is normally defined in terms of an omission, where a 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 or medical care.
Organisations/Groups	For the purpose of this Code, any group which provides activities outside a child/young person’s formal education.
Physical Abuse	Any form of non-accidental injury that causes significant harm to a child.
Statutory Authorities	These are An Garda Síochána and the Health Boards. They are obliged under the law to investigate and intervene in child abuse cases.

Sexual Abuse

Sexual Abuse is defined here as when a child is used by another person for his or her gratification or sexual arousal, or for the gratification of others. It should be noted that this is not a legal definition and is not intended to be a description of the criminal offence of sexual abuse.

Volunteers:

Unpaid voluntary workers in youth organisations or groups.

Youth Work:

Youth Work has been defined by the *Youth Work Act, 2001* as a planned programme of education designed for the purpose of aiding and enhancing the personal and social development of young persons through their voluntary participation and which is complementary to their formal, academic or vocational education and training and provided primarily by voluntary youth work organisations.

Government Guidelines on Child Protection:

Children First: National Guidelines for the Protection and Welfare of Children, Department of Health and Children, 1999 (IRL).

Our Duty to Care: Department of Health and Children, April 2002 (IRL). Principles of good practice for the protection of children and young people.





Section One

Introduction and Legal Framework

1.1 Introduction

1.1.1

The *Code of Good Practice* contained in this document has been drawn up following discussions at the National Youth Work Advisory Committee. This *Code of Good Practice* is based on the new National Guidelines for the Protection and Welfare of Children (*Children First*), which was published in 1999 by the Department of Health and Children. This *Code of Good Practice* should be read in conjunction with *Children First*.

1.1.2

The primary aim of this *Code of Good Practice* for the Youth Work Sector is to give direction and guidance to youth work sector personnel in dealing with allegations/suspicious and disclosures of child abuse. In addition it also aims to provide sufficient information for those involved in the youth work sector to be vigilant and to be aware of what to do in situations where child abuse may be a concern or suspicion.

1.1.3

In all cases the most important consideration to be taken into account is the protection and welfare of children and young people. In this regard, this *Code of Good Practice* emphasises that the safety and well being of children and young people must be a priority. If the Youth Work Sector has concerns that children and young people with whom they have contact with are being abused, the matter should be reported without delay to the relevant Health Board.

1.1.4

In the interests of the welfare and protection of children and young people, it is incumbent on youth work organisations and youth workers to adhere to this *Code of Good Practice* in dealing with allegations or suspicions of child abuse.

1.2 Confidentiality

1.2.1

All information regarding concerns of possible child abuse should only be shared on “a need to know” basis in the interests of the child or young person. The test is whether or not the person has any legitimate involvement or role in dealing with the issue.

1.2.2

However, giving information to those who need that information, for the protection of a child or young person who may have been, or has been abused, is not a breach of confidentiality.

1.2.3

Any Child Protection Officer (please see Section 6.3, page 17–18 of this *Code of Good Practice*) who is submitting a report to the Health Board or An Garda Síochána should inform a parent/guardian, unless doing so is likely to endanger the child or young person or place the child or young person at further risk. A decision not to inform a parent/guardian should be briefly recorded together with the reasons for not doing so.

1.2.4

It is not the responsibility of Youth Work Personnel to make enquiries of parents or guardians, as in some cases it could be counter-productive for them to do so. It is a matter for the appropriate Health Board to assess suspected abuse and determine what action to take, including informing An Garda Síochána, whose role it is to investigate the suspected abuse.

1.2.5

In cases of emergency where a child or young person appears to be at immediate and serious risk, and it is not possible to make contact with the appropriate Health Board, An Garda Síochána should be contacted immediately. Under no circumstances should a child or young person be left in a dangerous situation pending Health Board intervention.

1.3 The Protection for Persons Reporting Child Abuse Act, 1998

1.3.1

The Protection for Persons Reporting Child Abuse Act, 1998 provides immunity from civil liability to persons who report child abuse “reasonably and in good faith” to the Health Board or the Gardaí. 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. This Act came into operation on 23rd January, 1999.

Its main provisions are:

1. the provision of immunity from civil liability to any person who reports child abuse “reasonably and in good faith” to designated officers of Health Boards or any member of the Garda Síochána
2. the provision of significant protections for employees who report child abuse. These protections cover all employees and all forms of discrimination up to and including, dismissal
3. the creation of a new offence of false reporting of child abuse where a person makes a report of child abuse to the appropriate authorities “knowing that statement to be false”.

This is a new criminal offence designed to protect innocent persons from malicious reports.

(This law does not exist in Northern Ireland where any person wrongly accused can seek recourse under the Laws of Slander, Libel or Malicious Prosecution.)



1.4 Qualified Privilege

1.4.1

While the legal protection outlined in 1.3 above only applies to reports made to the appropriate authorities (i.e. the Health Boards and An Garda Síochána), this legislation does not alter the situation in relation to common law qualified privilege which continues to apply as heretofore. Communication would be regarded under common law as having qualified privilege, should a member of a Management Committee or Youth Work Personnel furnish information with regard to suspicions of child abuse to the Child Protection Officer or to the Chairperson of the Management Committee.

1.4.2

Qualified privilege arises where the person making the communication has a duty to do so, or a right, or interest in protecting the child or young person and where the communication is made to a person with a similar duty, right or interest. The person making the report, acting *in loco parentis*, would be expected to act in the child or young person's best interests and in making the report would be regarded as acting in such a manner. Privilege can be displaced only where it can be established that the person making the report has acted maliciously.

1.4.3

Furthermore, those reporting a child's or young person's disclosure are not regarded as making an allegation as a matter of charge, but simply carrying out their duty in good faith – they are not accusing or bringing a charge.

1.5 Freedom of Information Act, 1997

1.5.1

Any reports which are made to Health Boards may be subject to the provisions of the *Freedom of Information Act, 1997*, which enables members of the public to obtain access to personal information relating to them which is in the possession of public bodies. The *Freedom of Information Act, 1997* provides that public bodies may refuse access to information obtained by them in confidence but this decision may be overturned by the Information Commissioner or the Courts.

Section Two

Principles of Youth Policy

2.1 Introduction

2.1.1

Youth policy is based on an assessment and understanding of the social and economic conditions prevailing in Irish society today, and an appreciation of young people's needs and changing circumstances at the beginning of the twenty-first century. It is based on the assumption that if all young people are to become self-reliant, responsible and active participants in their community life and in society at large, they should be enabled to develop the capacity for critical reflection and informed action without which genuinely active citizenship is impossible¹.

2.2 Core Values and Principles of Youth Work

2.2.1

The organisation of youth work should be guided by a set of core principles.

Quality youth work:

- is a planned and systematic educational experience implemented outside of the formal school curriculum by voluntary youth organisations and groups
- is an active mode of learning which promotes an experiential learning model where young people are involved in learning by doing, in real life situations, and reflecting in a structured manner upon the experiences encountered
- involves young people on a voluntary basis and begins with issues and areas of interest and concern to them
- is a mutually beneficial, enjoyable and fun experience for both youth workers and young people
- is a partnership between volunteers, employees² and young people involving adults working with but not for young people in a manner that prioritises the active participation of young people as partners in the process
- is based primarily on the voluntary involvement of adults as voluntary youth workers and is set in a community context
- recognises that inequalities exist in society and seeks to raise the level of awareness of young people about society and how to act upon it

1 See Final Report of the National Youth Policy Committee (Costello Report) Dublin Stationery Office, 1984.

2 For the purposes of this document, paid staff in youth organisations/groups will be referred to as 'employees'; unpaid, voluntary workers will be referred to as 'volunteers' and members of the youth organisations/groups will be referred to as 'children' or 'young people'. The Health Board and An Garda Síochána will be referred to as 'statutory authorities' as they are the bodies who are obliged, under the law, to investigate and intervene in child abuse cases.

- 
- provides structures whereby young people participate in decision making, planning, organising and evaluation
 - enables communities to contribute to meeting the needs of their own young people.

2.2.2 Voluntarism

The voluntary principle has been a consistent feature and long established principle of youth work in Ireland. The three key components of this principle are the following:

- non-compulsory – young people are involved on a voluntary basis
- non-paid – the majority of people working with young people do so on a voluntary basis
- non-statutory – youth work in Ireland is provided in the main by voluntary youth organisations and groups.

2.2.3 Participation

Real participation of young people is crucial in order to enable young people to become critically aware and active citizens.

2.2.4 Integration

Youth work provision should be considered, not in isolation but in the framework of broader national, social and economic policies.

The above principles contribute to the overall development of quality standards in youth work and in the context of child protection give a framework within which young people can be catered for in a safe and encouraging environment.

2.3 Adults and Young People in Partnership

2.3.1

Youth work offers a facility for adults and young people to work in partnership within a youth group. The nature of this relationship allows young people the space and opportunity to develop and explore an agreed developmental programme, in a non-formal educational manner.

Volunteers and employees offer essential support to members at a crucial stage in their lives by listening to them, advocating on their behalf and assisting them on the basis of equality of opportunity to organise and participate in a range of activities delivered by their own particular youth group. All of this takes place through a developed partnership between the young person and the volunteer/employee.

2.4 Policies and Guidelines

2.4.1

All youth organisations/groups should adopt a set of policies and guidelines relevant to their work and to the ethos of the individual organisations/groups. This will ensure that standards have been set for the ongoing professional delivery of all aspects of quality youth work, and will provide a standard for evaluation. Organisations/groups should make their Child Protection Policy known to any other group/organisation who are jointly involved with them in the provision of services.

2.5 Youth Work and Child Protection

2.5.1

Good quality youth work allows young people and adults to work together in a safe environment, through a challenging programme of social, educational and recreational activities. While youth and community organisations/groups may adopt a number of different policies and guidelines relating to various aspects of their work, it is imperative that all youth organisations/groups adopt and implement a Child Protection Policy. Training in relation to this Policy should be provided at all levels within the organisation/group. This in turn will ensure that all aspects of their work including recruitment, training, programme delivery and the day to day running of organisations/groups take place within an agreed framework, safe structures and a developmental environment. It will also facilitate a preventative approach, which may pre-empt situations vulnerable to the occurrence of abuse.

2.6 Addressing the Problem of Child Abuse

2.6.1

This document fulfils the obligation outlined in *Children First: National Guidelines for the Protection and Welfare of Children*, whereby all statutory and voluntary/community organisations providing services to children should produce a child protection policy tailored to their specific needs. Guidelines, consistent with the content of this document, should be developed by each organisation/group. They should assist volunteers, employees and young people to prevent and respond to potential or actual child abuse and bring it, through the steps outlined in their Child Protection Policies, to the attention of the statutory authorities, that is, the Health Board and An Garda Síochána.

2.6.2 Guidelines Specific to Each Organisation

Local guidelines should outline the roles and responsibilities of those involved with youth organisations/groups, and promote co-ordination between youth organisations/groups and the statutory authorities. They should be made available to all volunteers, employees and young people. Child protection issues are complex and can be unpredictable; therefore it is essential that organisations/groups provide training for all personnel in the context of a clearly sign-posted system for dealing with any concerns which may arise.



Section Three

The Rights of the Young Person

3.1 Introduction

3.1.1

A Child Protection Policy should give due consideration to both the rights of the young person and the rights of adults while also seeking to protect both groups in their association and work with each other.

In promoting the development of young people, youth organisations/groups have a responsibility to ensure that they have sufficient knowledge and confidence to reject any behaviour from their peers or from adults which may threaten them in any way. To achieve this, young people should be facilitated to recognise their rights and obligations to one another and to adults. Good quality youth work recognises this requirement, and recognises the need to implement the rights and obligations of the young person and the adult. It has now been reinforced by current policy in relation to children and young persons.

3.2 United Nations Convention on the Rights of the Child

3.2.1

The rights of children have been clearly outlined in the **United Nations Convention on the Rights of the Child**, an international agreement that was adopted by the UN in 1989 and ratified by Ireland in 1992. The Convention represents a set of minimum standards – the bottom line – in protecting children’s rights. It is a binding international treaty and as a signatory, Ireland is obliged to implement its contents.

3.3 Definition of ‘child’

3.3.1

For the purpose of the Convention “a child” means anyone who is under 18 years of age – so this includes young people. In Ireland, the *Child Care Act 1991* defines a child as any person under the age of 18 years, excluding a person who is or who has been married.

3.4 The UN Convention and Youth Work

3.4.1

Good quality youth work should recognise and implement the fundamental tenets of the UN Convention, particularly in relation to the rights of children to care and protection. Youth work will ensure that children's rights and needs are balanced by nurturing their capacity to take responsibility and develop into active, participating citizens. Thus, it is clear that there is a relationship between what the Convention seeks for and on behalf of young people, and what youth work professes to deliver on a daily basis.

3.4.2 What Rights do Children Have?

A substantial number of rights are contained in the UN Convention on the Rights of the Child. Significant rights as they relate to Youth Work are:

- children having a say in their education
- protection of the environment in which children live
- reasonable standards of living
- protection from violence, abuse and exploitation
- protection of children cared for away from home and for children with a disability
- children being able to use their own language, enjoy their own culture and practice their own religion
- reasonable standards of health and development
- children suspected of committing a crime and children convicted of crimes shall be treated in a way that promotes their sense of dignity and worth and aims at reintegrating them into society.

Children's rights may be summarised under the following headings:

Provision

Rights to minimum standards of health, education, social security, physical care, family life, play, recreation, culture and leisure, and adequate standards of living;

Protection

Rights of children to be safe from discrimination, physical abuse, exploitation, substance abuse, injustice and conflict;

Participation

Rights of children to a name and identity, to be consulted and taken account of, to have access to information, to have freedom of speech and opinion, and to challenge decisions made on their behalf.



Section Four

The Development of Quality Standards in Youth Work

4.1. Introduction

4.1.1

Youth work should provide opportunities with and for young people to develop themselves spiritually, emotionally, physically and socially. It should strive to promote the welfare of young people, particularly those who are disadvantaged, by identifying their needs and promoting developmental programmes with them. It should provide opportunities for out-of-school educational activities, personal development and constructive use of leisure time. Youth work should encourage young people to participate in local, national and international activities, and it should offer experiences designed to promote equality of opportunity, participation and involvement. The nature of youth work is such that a wide range of programmes and activities are delivered in a variety of situations and within different communities. The delivery of these programmes should, however, take place within an agreed set of principles and in a suitable environment.

4.2 Recruitment and Selection of Employees and Volunteers

4.2.1

The majority of people who apply to work with youth organisations/groups on either a voluntary or paid basis are interested, well motivated and suitable for the various tasks involved. It is, nonetheless, essential that youth organisations/groups take all reasonable steps to ensure that only suitable people are recruited to work with young people. Unfortunately, persons with a propensity to child abuse are frequently attracted to positions and organisations/groups that offer them access and the opportunity to spend time with children and young people. A proper selection procedure is one of the most sensible and effective ways of assessing an applicant's suitability, and may in itself act as a deterrent to potential abusers, as well as assisting in the choice of appropriate staff and volunteers.

The following section outlines an approach to safe recruitment and selection practices. The actual procedures may vary according to the requirements of different organisations/groups, but the following key elements should be included:

For those organisations that work throughout the thirty-two counties, the Pre-Employment Consultancy Service can be availed of should they require information in relation to safe recruitment and selection practices in Northern Ireland. This service assists organisations working with children or adults with a learning disability to check the suitability of prospective employees, whether paid or unpaid in Northern Ireland only. (See Appendix Seven for details).

4.2.2 Clear Definition of the Role of Employees or Volunteers:

This means clarifying and agreeing expectations regarding the role of the new volunteer or staff member. It involves identification of the minimum level of qualities and skills required to fill the post.

4.2.3 Application Form

An application form, with a clear job description and information about the organisation/group should be supplied. The form should be designed, as far as possible, to elicit all relevant information about the applicant, including their past experience of working with children. (See Appendix One).

4.2.4 Declaration

All applicants should be required to sign a declaration stating that there is no reason why they would be unsuitable to work with young people. The organisation/group should have a clear policy regarding the type of factors that would exclude potential volunteers or employees.

4.2.5 Interview

All applicants should be interviewed by a panel comprising of at least two senior representatives of the youth organisation/group. Interviewers should explore the information stated on the application form and assess the applicant's suitability. The information supplied by the applicant and any other information supplied on their behalf should only be seen by persons directly involved in the recruitment procedure.

4.2.6 References

An applicant will be expected to supply the names of two referees (not family members) who will testify as to their character, their suitability to the role of volunteer/employee, or any other issues which may affect their ability to perform the tasks required of them. An acceptable reference will indicate that the person is known to the referee and is considered suitable by them to work with young people. All references should be received in writing and later confirmed by telephone, letter or personal visit. Any additional information should be attached to the Reference Form. (See Appendix Two).

4.2.7 Identification

The organisation/group should ensure that the identity of the applicant is validated.

4.3 Role of Volunteers

4.3.1

The youth services hold a long tradition of the involvement of volunteers who contribute their unpaid, personal time to different programmes and activities. Given the responsible roles played by volunteers it is essential that their work with young people is supported, and that their ability to deal with young people in a fair and ethical manner is consistently supervised. Contracts should be agreed between volunteers and youth organisations/groups, which clearly outline the job descriptions, roles, responsibilities, and duties of both parties, as well as the training and resources to be provided.

4.4 Induction and Training

4.4.1

If, following the application and interview process the applicant is accepted, they should then be required to undertake an induction course. Induction is a planned training programme that enables volunteers/employees to get to know the organisation, their colleagues, their job and other organisations or agencies doing similar or related work. It provides an opportunity for members to explain the organisation's/group's structure, names and functions of those involved, expectations, conditions and procedures for dealing with discipline, grievances and allegations.

No new volunteer should be permitted to carry out leadership role(s) prior to undertaking an Induction Training Programme.

Every organisation needs to develop its own procedures for ensuring that volunteers and employees are adequately and appropriately inducted. It is best if one person has responsibility for co-ordinating the structure and delivery of the induction programme. The following approach is recommended:

- a. the content of training programmes in youth organisations/groups may vary in detail but generally contains a standard set of core training requirements to assist the volunteer/employee in learning, experiencing and carrying out certain tasks under the supervision of a trained leader (See Section 4.4.2 below). As with any job that one undertakes, the introductory period may be the most important time spent with the new volunteer
- b. it is vital that the trainee receives sufficient information at the outset to enable them to grasp the true nature of the organisation that they seek to work with and the true nature and responsibilities attached to working with young people.

4.4.2 Objectives of an Induction Training Programme

One of the aims of induction is to facilitate the potential volunteer in deciding whether s/he wishes to join the organisation. They should also be familiar with the aims of youth work, the expectations that will be expected of them along with the structure and activities of organisations/groups. Participants should also be clear about what the organisation/group can offer them in terms of further training and support.

4.4.3 The content of an Induction Training Programme should include:

- a. the purpose and process of youth work
- b. the structure, programmes, activities and membership of youth organisations/groups
- c. the role of volunteers/employees in youth organisations/groups
- d. an outline of organisational policies
- e. a specific outline and explanation of the Child Protection Policy adopted and implemented by the organisation/group
- f. the disciplinary/grievance procedures operated by the organisation/group
- g. information on the organisation/group.

4.4.4 Induction Partners

During the induction period, where feasible, participants should be partnered with an experienced volunteer/employee who will guide them through this process. Their induction partners will:

- inform the participants about the youth group and the organisation
- introduce them to other volunteers
- introduce them to the group's activities
- discuss their experiences within the group

- assist them in identifying the age group, activities that may best suit their skills, ability and availability
- observe how they behave and interact with other leaders and with members
- give feedback on strengths and weaknesses
- encourage them to contribute to the process through expressing their ideas.

4.5 Probationary Period

4.5.1

A probationary period overlaps with, but is completely separate from, the induction. Induction is a training and learning process: a probationary period is an opportunity for the employee and employer to decide whether they are suited to each other. Formal reviews should be held midway through the probationary period and shortly before the end. A written record should be kept of any matters arising during the trial period. Records are to be kept in a safe and confidential place.

4.6 Acceptance of new volunteer/employee

4.6.1

This decision should be reached following consultations between the partners, the course trainers and the volunteer applicants themselves. A decision should be reached between all three, agreed upon and recorded in writing.

4.7 Additional training

4.7.1

To maintain quality standards and good practice, training should be provided on an ongoing basis for all volunteers and employees, employers and Boards of Management. Potential areas could be:

- youth/group work skills
- child protection
- health and safety
- team-building
- conflict resolution
- financial management.



Section Five

Safe Practices in Youth Work

5.1 Introduction

5.1.1

Volunteers and employees carry a duty of care in relation to the young people who participate in the activities of youth organisations/groups. The operation of safe recruitment procedures as outlined in the previous section will help to minimise the possibility of young people coming to harm in the organisation, but the following principles of good practice should be implemented and consistently followed.

5.1.2

There should be defined criteria for membership of the organisation, and the records kept on all young people should include parental consent to membership, medical details, any special needs and emergency contact telephone numbers. Attendance records should be kept and there should be an accident and incident book in which details of any accidents and incidents are fully recorded. While an accident book should record accidents, an incident book is for the recording of breaches of professional standards and/or related concerns which might arise. All records should be reviewed regularly and any irregularities reported by the person(s) charged with the responsibility of overseeing these records to the appropriate management personnel.

5.1.3

Volunteers and employees should also ensure that buildings or facilities that they use for activities with young people are safe and secure. All occupied parts of the building should be monitored and parts not in use should be out of bounds. There should be adequate heating and ventilation, sanitation facilities, fire precautions, first aid facilities and access to a telephone. Young people should never be left unattended, and leaders should be aware of members' whereabouts, and what they are doing. All activity should have constant adult supervision.

5.1.4

The minimum adult/young person ratio in any group should ideally be one adult per group of eight plus one other adult, and allowing an additional adult for each group of eight thereafter. Local circumstances, the ages of the children, the experience of the volunteers and the staff should be taken into consideration. Safety, ability/disability of young people and the nature of the activities being undertaken may require that these ratios be considerably lower.

5.1.5

Volunteers and employees (especially within the context of youth organisation/group activities involving large numbers of young people) are recommended to make sure that there is sufficient help available for activities to be organised in a way that maximises fun, learning, safety and participation. When dealing with group members of mixed sex, it is important that there are sufficient adults of both sexes to properly manage all activities and areas of any premises in use.

5.2 Dealing with Challenging or Disruptive Behaviour

5.2.1

When dealing with a disruptive individual(s) it is recommended that where possible more than one employee or volunteer be present. It is recommended that instances of disruptive behaviour which require the intervention of the worker and which put at risk the safety and well being of others be documented in a report book set aside for this purpose. This book should be available to other employees and volunteers involved with the group.

The report should describe:

- a. the programme running at the time
- b. what happened
- c. who was involved
- d. where and when it happened
- e. what was said if significant
- f. any injury to person or property
- g. how the situation was resolved.

5.3 Trips Away From Home

5.3.1

When taking young people away on trips volunteers and employees should always be attentive to such matters as:

- a. safety – activities, buildings, transport etc.
- b. insurance – adequate to cover all aspects of the trip
- c. parental consent – written consent should be obtained from parents before taking young people under 18 away on trips
- d. medical concerns – medical information which might be relevant e.g. allergies etc., should be known to employees and volunteers prior to leaving for a trip
- e. sleeping arrangements – sleeping areas for males and females should be in separate quarters and supervised by two (if possible) workers of the same sex as the group being supervised
- f. maintaining standards and good youth work practice in the relaxed atmosphere of a trip away from home may be difficult as normal boundaries and standards of behaviour can be inadvertently crossed over. Experience indicates that many of the cases of alleged child abuse within the youth work setting occur during trips away from home.

5.3.2

Volunteers and employees should always be respectful of the privacy of young people in dormitories, changing rooms, showers and toilets. It is recommended that when present in such areas, employees and volunteers do not spend time alone with young people. (see 5.4.6)



5.4 Codes of Behaviour between Volunteers, Employees and Young People

5.4.1

Volunteers and employees should be sensitive to the risks involved in participating in some contact sports with young people and exercise particular caution in areas such as swimming pools, showers, etc.

5.4.2

Volunteers and employees should be sensitive to the fact that jokes of a sexual nature may be offensive to others and should never be told in the presence of children.

5.4.3

Volunteers and employees should be sensitive to the possibility of becoming over involved or spending a great deal of time with any one young person. They need to be clear about the purpose and nature of their relationship with any young person e.g. whether the relationship is constructive in building up the independence and autonomy of the young person or is being used to satisfy some need or desire of the worker.

5.4.4

Where a volunteer/employee has a concern about the nature of a particular relationship involving themselves or another employee, volunteer or young person, they should discuss it with a supervisor or experienced colleague. Similarly, long term 'helping' or 'support' relationships that arise in one's work situation should also be reviewed on a regular basis.

5.4.5

It is recommended that each youth organisation/group devise a policy on countering 'bullying' behaviour that is known and understood by all involved with the group. All members should be encouraged to report cases of bullying behaviour to a volunteer/employee of their choice.

5.4.6

It is recommended that volunteers/employees be sensitive to the potential risk to personal safety and false allegations which may arise when they meet alone with a young person in a room. Where it is feasible they might consider leaving the door slightly ajar or informing another colleague that they will be alone in the room with the individual in question. It is recommended that each organisation/group develop a positive attitude among young people that respects the personal space, safety and privacy of their peers.

5.4.7

It is not recommended that volunteers/employees give lifts in their cars to individual young people, especially on long journeys.

5.4.8

Physical contact of a comforting and reassuring nature is a valid way of expressing concern and care for children, where such contact is acceptable to all persons concerned. Training should indicate what physical contacts are inappropriate and enable volunteers/employees to become aware of actions that might be misunderstood and situations which might render them vulnerable. Volunteers or employees must never physically punish or be in any way verbally abusive to a young person.

5.4.9

Youth organisations/groups should offer ongoing development opportunities for volunteers and employees to facilitate the operation of safe practices.

Section Six

Understanding and Recognising Child Abuse

6.1 Introduction

6.1.1

It is not always easy to acknowledge that child abuse may take place in youth organisations/groups or within families. It is often assumed that people who work in services for young people, particularly in a voluntary capacity, are caring individuals who would never inflict harm on anybody. The possibility that a colleague, who is popular and apparently trustworthy, might be capable of abusing a young person is extremely difficult to accept. Similarly, it is hard to imagine that parents or carers who appear committed, involved and devoted to their children might neglect or harm them.

Reluctance to think badly of people, or lack of awareness that such things can happen, can lead to resistance in hearing, recognising and dealing with the possibility of abuse. It is important that volunteers and employees are aware of the possibility for abuse to take place within and outside the organisation and it is essential that a mechanism exists to enable them to address any Child Protection concerns that they may experience.

6.2 Child Protection Policy

6.2.1

Children First: National Guidelines for the Protection and Welfare of Children published by the Department of Health and Children, 1999 stipulates that all organisations/groups providing services to children should adopt and implement a Child Protection Policy consistent with that outlined in the National Guidelines. Such a policy should provide information and enable volunteers/employees to be alert to the possibility of child abuse. It should clearly outline the steps to take when child abuse is suspected. It is essential that all action taken in respect of child protection is co-ordinated and recorded carefully. Part of the policy should be the appointment of a Child Protection Officer³. (See Section 6.3.)

6.2.2

A commitment to adhere to the organisation's Child Protection Policy should form part of an employee's written contract of employment and should also form part of the condition of affiliation/registration by any group to the organisation. A commitment to adhere to the organisation's Child Protection Policy and an acknowledgment that the policy is understood should also be sought in writing from trained leaders.

³ Some organisations may call this person a 'designated officer' or 'designated person'. For the purposes of this document, the term 'Child Protection Officer' will be used.



Breaches of this commitment will be processed through the organisation's grievance procedures and/or disciplinary procedures as appropriate. It will also be necessary for all affiliated/registered groups to commit in writing to the organisation's Child Protection Policy and Procedures.

6.2.3

Volunteers/employees may have to deal with two different contexts in which child protection concerns may arise:

- a. situations where it becomes apparent that a child or young person is being harmed or is at risk of harm within his or her family context or home environment
- b. situations where an allegation of child abuse is made against an employee or volunteer within the youth organisation.

Essentially, the steps to be taken in respect of child or youth members of the organisation are similar in both situations. For procedures to be followed in respect of an allegation against an employee or volunteer within the organisation, see Section Seven. This section offers definitions of what constitutes child abuse and outlines procedures for good child protection practice.

6.3 The Child Protection Officer/Designated Person

6.3.1

The 'Child Protection Officer' is the title given to the designated person appointed in each youth organisation to deal with child protection concerns reported by volunteers, employees or young people. It is recommended that each organisation appoints, trains or alternatively contracts a professional outside the organisation to carry out the functions and responsibilities associated with the implementation of a child protection policy. Ideally, there should be one male and one female Child Protection Officer.

The Child Protection Officer should:

- a. ideally have a knowledge of community/youth work
- b. have good listening/feedback skills
- c. possess a level of knowledge on the topic of child abuse and associated issues appropriate to the role
- d. be at ease in discussing matters relating to all aspects of abuse.

Child Protection Officers should be accessible to all persons associated with the organisation, and will also need appropriate support structures and supervision. A clear job description should outline his or her responsibilities to victims, volunteers, employees, the organisation and the statutory authorities. Reporting procedures to and from the Child Protection Officer, with reference to existing organisational structures, need to be agreed, clear and known to all.

The Child Protection Officer will:

- a. operate within the guidelines set by the appropriate authorities and those approved by his/her organisation
- b. report suspicions and allegations of child abuse to the statutory authorities, i.e. the Health Board or An Garda Síochána
- c. liaise between the organisation, young people, staff and the statutory authorities where necessary
- d. create and maintain links with the statutory authorities and other relevant agencies and resource groups
- e. facilitate the provision of support to any victim, volunteer or employee making a referral and provide support also to the person against whom the allegation has been made
- f. advise the organisation, members or staff on individual cases
- g. advise on good practice

- h. organise/facilitate training and workshops on guidelines in Child Protection
- i. maintain proper records on all cases referred to him/her in a secure and confidential manner
- j. keep up-to-date on current developments regarding provision, practice, support services, legal obligations/requirements and policy.

It is recommended that the Child Protection Officer should not be directly responsible for dealing with any allegation/disclosure concerning an employee. This task should be carried out by the Chief Executive Officer/Director. However, it is also recommended that the Child Protection Officer be consulted or informed in order that any information, which might be available to him/her, is also taken into consideration in this case.

The Child Protection Officer should report to the Chairperson or equivalent senior member of the organisation on a regular basis, and keep him or her informed of any Child Protection concerns which may have arisen in the organisation.

6.4 Definition of Child Abuse

6.4.1

Child abuse can be categorised into four different types: neglect, emotional abuse, physical abuse and sexual abuse. A child⁴ may be subjected to more than one form of abuse at any given time. *Children First* have adopted the following definitions:

6.4.2 Neglect

Neglect is normally defined in terms of an *omission*, where a 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, or 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 similar child.

Neglect generally becomes apparent in different ways *over a period of time* rather than at one specific point. For instance, a child who suffers a series of minor injuries is not having his or her needs met for supervision and safety. A child whose ongoing failure to gain weight or whose height is significantly below average may be deprived of adequate nutrition. A child who consistently misses school may be deprived of intellectual stimulation. The threshold of significant harm is reached when the child's needs are neglected to the extent that his/her well-being and/or development are severely affected.

6.4.3 Emotional Abuse

Emotional abuse is normally to be found in the relationship between a caregiver⁵ and a child rather than in a specific event or pattern of events. It occurs when a child's needs for affection, approval, consistency and security are not met. It is rarely manifested in terms of physical symptoms. Examples of emotional abuse include:

- a. persistent criticism, sarcasm, hostility or blaming
- b. conditional parenting, in which the level of care shown to a child is made contingent on his or her behaviour or actions
- c. emotional unavailability by the child's parent/carer
- d. unresponsiveness, inconsistent or inappropriate expectations of a child
- e. premature imposition of responsibility on a child

⁴ For the purposes of this document, a 'child' means an unmarried person under the age of 18 years.

⁵ The term 'caregiver' can be defined as any adult person who has responsibility for a child in the short or long term.

- 
- f. unrealistic or inappropriate expectations of a child's capacity to understand something or to behave and control himself in a certain way
 - g. under or over protection of a child
 - h. failure to show interest in, or provide age appropriate opportunities for a child's cognitive and emotional development
 - i. use of unreasonable or over harsh disciplinary measures
 - j. exposure to domestic violence.

Children show signs of emotional abuse by their behaviour (for example, excessive clinginess to, or avoidance of the parent/carer), their emotional state (low self-esteem, unhappiness), or their development (non-organic failure to thrive). The *threshold of significant harm* is reached when abusive interactions become typical of the relationship between the child and parent/carer.

6.4.4 Physical Abuse

Physical abuse is any form of non-accidental injury that causes significant harm to a child, including:

- a. shaking
- b. use of excessive force in handling
- c. deliberate poisoning
- d. suffocation
- e. munchausen's syndrome by proxy (where parents fabricate stories of illness about their child or cause physical signs of illness)
- f. allowing or creating a substantial risk of significant harm to a child.

6.4.5 Sexual Abuse⁶

Sexual abuse occurs when a child is used by another person for his/her gratification or sexual arousal, or for that of others, for example:

- a. exposure of the sexual organs or any sexual act intentionally performed in the presence of a child
- b. intentional touching or molesting of the body of a child whether by a person or object for the purpose of sexual arousal or gratification
- c. masturbation in the presence of a child or involvement of the child in the act of masturbation
- d. sexual intercourse with the child, whether oral, vaginal or anal
- e. sexual exploitation of a child
- f. consensual sexual activity between an adult and a child under 17 years. In relation to child sexual abuse, it should be noted that, 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.

6 The definition of child sexual abuse presented here is not a legal definition, and is not intended to be a description of the criminal offence of sexual assault.

6.5 Other Forms of Abusive Behaviour Towards Young People

6.5.1

Apart from the above very serious forms of abuse, volunteers and employees should also be on the alert for other forms of behaviour that may be harmful to young people. The following behaviours are unacceptable among young people, staff and volunteers:

6.5.2 Organised Abuse

Child abuse can occur in a number of ways, including organised abuse. This occurs when one person moves into an area/institution and systematically entraps children for abusive purposes (mainly sexual) or when two or more adults conspire to similarly abuse children using inducements.

6.5.3 Peer Abuse

In some cases of abuse the alleged perpetrator will also be a child. In these situations the Child Protection Procedures should be adhered to for both the victim and the alleged abuser. If there is any conflict of interest between the welfare of the alleged abuser and the victim, the victim's welfare is of paramount importance.

6.5.4 Verbal abuse

This can include name-calling, sarcasm, and criticism, making reference to some physical characteristic, destructive criticism, derogatory remarks and gestures.

6.5.5 Bullying

Bullying behaviour can be defined as repeated aggression be it verbal, psychological or physical which is conducted by an individual or group against others.

Examples of bullying include:

- teasing
- taunting
- threatening
- hitting
- extortion.

Bullying behaviour may take place in any setting whether it be in schools, the home or in a youth services setting. In the first instance, it is the responsibility of volunteers/employees to deal with bullying which may take place within the organisation. The more extreme forms of bullying behaviour would be regarded as physical or emotional abuse, and are reportable to the statutory authorities. Each youth group should have a clear policy on countering bullying behaviour which is known to members and implemented by leaders. Incidents should be dealt with immediately and not tolerated under any circumstances.

6.5.6 Unwelcome behaviour

This can include favouritism, exclusion, sexual harassment and sexual innuendo, humiliating and embarrassing others, deprivation of basic rights and harsh disciplinary regimes.



6.6 Recognising Child Abuse

6.6.1

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 knowledge and information. It is important to note that child abuse is not always readily visible, and may not be clearly observable. It is also important to avoid either a situation where volunteers/employees are constantly wary and on the lookout for abuse or one where complacency exists. Essentially, volunteers/employees should consider, in a measured way, the possibility of child abuse if:

- a young person appears to have suffered a suspicious injury for which no reasonable explanation can be offered
- a young person seems distressed without obvious reason or displays persistent or new behavioural problems
- a young person shows unusual or fearful responses to an adult who is responsible for their care at any particular time.

It is important to remember that many signs of child abuse are non-specific, and that alternative explanations for indicators should always be considered.

6.7 Indicators of Concern/Possible Abuse that Require Attention

6.7.1

Young people will sometimes, though not always, disclose that they are being physically or sexually abused, and are less likely to disclose emotional abuse or neglect. It is possible that volunteers/employees will become concerned because of a young person's behaviour, or because of something that is reported by another person. The following examples would constitute reasonable grounds for concern and should be reported to the designated person/Child Protection Officer:

- disclosures of abuse by a young person
- age-inappropriate or abnormal sexual play or knowledge
- specific injuries or patterns of injuries
- signs of injury for which there is no explanation, or which is consistent with abuse and unlikely to be caused in any other way
- absconding from home
- attempted suicide
- under-age pregnancy or sexually transmitted disease
- someone else (a parent, friend, co-worker) may disclose that a young person has told them they are being abused, or may have witnessed the abuse themselves
- a young person's behaviour may raise concerns
- a volunteer/employee may personally witness abuse taking place
- there may be consistent indication, over a period of time, that a young person is suffering from emotional or physical neglect
- signs in one or more of the above categories at any one time.

6.7.2

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

6.7.3

Under no circumstances should any individual member of staff or volunteer attempt to confront an alleged abuser. Proper procedures should be followed at all times. The Health Board and/or An Garda Síochána will determine how far and in what manner an investigation should be conducted.

6.8 Dealing with a Disclosure of Abuse from a Young Person

6.8.1

Youth work can provide a secure environment that enables young people to share their concerns. It is important that a young person who discloses abuse feels supported and facilitated in what, for him or her, may be a frightening and traumatic process. He or she may feel perplexed, afraid, angry, despondent and guilty. It is important that any negative feelings that the young person may have are not increased by the kind of response that the disclosure elicits. A young person who divulges abuse to a volunteer/employee makes a profound act of trust and should be treated with respect, sensitivity and care. It is important to remember the following:

- a. react calmly, as over-reacting may alarm the young person and compound feelings of anxiety and guilt
- b. listen carefully and attentively; take the young person seriously
- c. reassure the young person that they have taken the right action in telling
- d. do not make false promises, particularly regarding secrecy
- e. do not ask the young person to repeat the story unnecessarily
- f. ask questions only for the purpose of clarification. Be supportive, but do not ask leading questions or seek intimate details beyond those volunteered by the child. Detailed investigative interviews will, if necessary, be carried out by Health Board staff or members of An Garda Síochána
- g. check with the young person to ensure that what has been heard and understood by you is accurate
- h. do not express any opinions about the alleged abuser
- i. record the conversation as soon as possible, in as much detail as possible. Sign and date the record
- j. explain and ensure that the young person understands the procedures which will follow
- k. pass the information to the Child Protection Officer/designated person, who will in turn report it to the Statutory Authorities for investigation
- l. treat the information confidentially, sharing it only with persons who have a right to hear it.



6.9 Confidentiality

6.9.1

It is important that the Child Protection Policy of an organisation operates strict codes of confidentiality. Confidentiality is about managing sensitive information that arises in a trusting relationship and doing so in a manner that is respectful, professional and purposeful. Youth work is based upon trusting relationships and it is not uncommon for members to want to share personal information with volunteers or employees. Anyone, (volunteer/employee or young person) disclosing information in this context needs to know in advance the limits of confidentiality and the responsibilities attached.

In matters of child abuse a volunteer/employee should never promise to keep secret any information which is divulged. If a young person discloses information to a volunteer/employee, he or she should explain that it cannot be kept secret. The volunteer/employee should also, as supportively as possible, explain what will happen to the information and what the outcome of reporting it is likely to be. Those working with a child and family should make this clear to all parties involved. All information regarding concern or assessment of child abuse should be shared only on “a need to know” basis in the best interest of the child. In other words, it should never be the subject of conversation between any other persons in the organisation, employees, volunteers or young persons, unless they are directly involved. Passing information to relevant authorities is not a breach of confidentiality.

Information, which is gathered for one purpose, should not be used for any other purpose without consulting the person who provided that information.

Section Seven

Reporting Procedures in Respect of Suspected or Actual Child Abuse

7.1 Responsibility to Report Suspected or Actual Child Abuse

7.1.1

An employee or volunteer who knows or suspects that a young person has been harmed or is at risk of being harmed has a duty to convey this concern to the designated person/ Child Protection Officer, who in turn will report the information to the Health Board. The Health Board will, in turn notify An Garda Síochána. In an emergency, a report should be made directly to An Garda Síochána. Allegations should always be handled in a sensitive and discreet manner. Section 7.5 below details the steps to be followed by volunteers and employees in making reports to the Child Protection Officer. Young persons should be encouraged and supported in making known any concerns that they may have, to an employee or volunteer.

7.2 Protections for Persons Reporting Child Abuse

7.2.1

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 the Health Board or An Garda Síochána.

This protection applies to organisations/groups as well as individuals. It is considered, therefore, that in the first instance, organisations/groups should assume responsibility for reporting child abuse to the appropriate authorities. Reports to Health Boards and An Garda Síochána should be made by the Child Protection Officer, following their own organisation’s procedures, which should be consistent with the standard reporting procedure outlined in *Children First*. Each organisation should ensure that reports are passed on as quickly as possible to the statutory authorities.

7.3 Reporting Procedures and Responsibilities of Individual Organisations/Groups

7.3.1

Youth organisations/groups should ensure that volunteers/employees and young people are aware of the organisation's reporting procedures. They should also be aware of the appropriate authorities to whom they may 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.

In making any report an individual needs to take the following into consideration:

- a. that the protection and safety of the child should be considered paramount
- b. reports should be made without delay to the Health Board
- c. the principle of natural justice should apply, which means that a person is innocent until proven otherwise
- d. the principle of confidentiality should apply, whereby only those that need to know should be told of a suspicion/allegation/disclosure of abuse and the number of people that need to be kept informed should be kept to a minimum.

There are many organisations/groups providing services to children and young people. Some are statutory, some are voluntary and/or not for profit organisations/groups; others are private, for profit organisations/groups. Whatever the motivation for the service provision, there is a moral obligation on any organisation involved with children to provide them with the highest possible standard of care in order to promote their well-being and safeguard them from harm. Organisations/groups may also be legally responsible for failure to provide adequate care and safeguards for the children in their care. This applies to all youth work organisations/groups and agencies.

7.4 Referral Procedures within Organisations/Groups

7.4.1

In the case of a disclosure or reasonable suspicion the volunteer, employee or young person should discuss the case with the Child Protection Officer within their organisation. If the suspected abuser is an employee of the organisation/group, the matter should be brought to the attention of the CEO or equivalent senior person in the organisation. When the Child Protection Officer/CEO has been notified they should refer the matter as soon as possible to the Health Board, who will in turn notify An Garda Síochána. In this regard, the organisation/group should be sensitive to the fact that those with "a need to know" should be restricted to the minimum number possible.

If any person has misgivings about the safety of a child and would find it helpful to discuss their concerns with a professional, they should not hesitate to contact someone in the Health Board such as a Social Worker, Public Health Nurse or staff in a Health Centre to discuss the matter. This should help them decide whether or not to formally report their concerns to the Health Board. Contacting the Health Board will not automatically trigger off a child protection investigation – the Health Board will determine whether or not the matter requires further exploration.

7.5 Standard Reporting Procedure and Information Required when a Report is being made

7.5.1

If a child abuse case is suspected or alleged, the following steps should be taken by the designated person/Child Protection Officer, or by an individual volunteer or employee wishing to make the report themselves:

- a. a report should be made to the Health Board in person, by telephone or in writing. Reports may be made to the Child Care Manager or directly to the Social Worker. Each Health Board 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. (There is a list of contact numbers in Appendix Four.)
- b. it is generally most helpful if persons wishing to report child abuse concerns make personal contact with the duty Social Worker. This will facilitate the Social Worker in gathering as much information as possible about the child and his or her situation. If a third person, such as a Child Protection Officer makes the report, it is likely that the Social Worker will wish to speak to the person who first witnessed the incident, received the disclosure, or felt the concern.
- c. in the event of an emergency, or the non-availability of Health Board staff, the report should be made to An Garda Síochána. This may be done at any Garda Station. Under no circumstances should a young person be left in a dangerous situation pending the intervention of the Health Board.

This procedure should be followed even where the suspicion arises in another organisational context but is disclosed to a volunteer/employee who is delivering a programme in another setting, for example, in a school. In this instance, he or she should report to the Child Protection Officer in his or her own organisation, for example, the school where the child abuse is suspected or alleged.

The ability of the statutory authorities to investigate and assess a case of potential or actual child abuse will depend on the quality of information available to them. Different levels of information will be available to persons reporting who may or may not be familiar with the young person's personal situation. It is important not to ask leading questions, nor to seek intimate details beyond those volunteered by the young person. Within these constraints, every effort should be made to clarify the grounds for concern and assist the statutory authorities to decide how far and in what manner to pursue an investigation. A standard reporting form is contained in Appendix Three. When completing a reporting form factual detail is required not opinions or impressions. Check the details against the first record made of the incident or concern to ensure accuracy. Sign the form and date it when completed. While the information in some cases will be limited, **as much as possible** of the following detail should be included in a report where this is readily available to you:

- a. names and addresses of the young person, parents/carers and any other children in the family
- b. name and address of the person alleged to be causing harm to the young person
- c. a full account of the current concern about the young person's safety or welfare
- d. the source of any information which is being discussed with the Health Board
- e. dates of any incidents being reported
- f. circumstances in which the incident or concern arose
- g. the young person's own statement, if relevant
- h. name of young person's school
- i. name of young person's General Practitioner
- j. reporter's own involvement with the young person and their parents/carers

- 
- k. details of any action already taken in relation to the young person's safety and welfare
 - l. names and addresses of any agency or key person involved with the family
 - m. identity of person reporting, including name, address, telephone number, occupation and relationship with the family.

7.6 Dealing with Anonymous Complaints

7.6.1

Anonymous complaints can be difficult to deal with but should not be ignored. In all cases the safety and welfare of the child or young person is paramount. Any such complaints relating to inappropriate behaviour should be brought to the attention of the Child Protection Officer. This information should be checked out and handled in a confidential manner. Any such complaints relating to Child Protection Concerns should be handled in accordance with the procedures outlined in this Code.

7.7 Co-operation with Parents/Carers

7.7.1

Parents or carers of any young person deemed to be at risk should be treated with respect. For this reason, families should be informed by an appropriate person if a report about them is submitted to the Health Board or An Garda Síochána, unless doing so is likely to endanger the child or undermine an investigation. Advice may be sought from the statutory authorities about the best procedure to follow.

7.8 When a Suspicion is not referred to the Health Board or Gardaí

7.8.1

In situations where the organisation decides that it should not refer reported concerns to the Health Board or An Garda Síochána, the individual volunteer, employee or young person who raised the concern should be given a clear written statement of the reasons why the organisation is not taking action. The volunteer, employee or young person should be advised that, if they remain concerned about the situation, they are free to consult with, or report to, the Health Board or An Garda Síochána. The provisions of the *Protections for Persons Reporting Child Abuse Act, 1998* apply once they report "reasonably and in good faith".

7.9 Where Reasonable Grounds for Concern are not Immediately Apparent

7.9.1

Where a volunteer or employee has a suspicion of abuse and there may be insufficient evidence to substantiate it, s/he should continue to monitor the situation. The following steps are also recommended:

- the volunteer or employee should, as soon as possible, discuss the situation with his or her supervisor, employer or organisation's Child Protection Officer. All discussions should be restricted to those with an obligation to know
- alternatively, he or she may contact the Health Board's Child Care Manager or Social Worker for advice. Any communication of a suspicion of abuse, provided it is not made maliciously, is legally privileged and protected under *The Protection for Persons Reporting Child Abuse Act, 1998*.
- the volunteer or employee may continue to observe the behaviour of the young person and the suspected abuser, recording any information which may be relevant using the guidelines for completing the Standard Reporting Form as contained in this policy under the section on Recording and Retention of Information

- the volunteer or employee should endeavour to be available to the young person involved. This has to be done in a sensitive manner. It is not proper for the worker to intimate or suggest to a person that s/he may have suffered an abuse.

7.10 Recording and Retention of Information

7.10.1

In all situations, including those in which the cause of concern arises from a disclosure made in confidence, it is extremely important to record the details of an allegation or reported incident, regardless of whether or not a referral is subsequently made to a statutory agency. This should happen as soon as possible after the incident has taken place.

Appendix Three outlines the need to give accurate and detailed information when making a report. This should be considered when a report is being made in order to provide as much detail as possible.

Any reports/completed forms should be stored in a safe and secure location. **The need for good record-keeping at all stages of the Child Protection Process cannot be over emphasised.** Every agency and organisation should have a policy on secure record-keeping. Volunteers/employees need to be mindful of the *Data Protection Act and the Freedom of Information Act* (See Appendix Six.)

Organisations/groups should devise arrangements regarding the accessing of these reports. Adjustments cannot be made to an existing document. In the event of new developments/information a new document should be completed which will accompany the existing document. These documents should be stored permanently as they belong to the organisation, not to the person who first made the report.

When an individual makes a report to the statutory authorities, the possibility always exists that he/she may be called to give evidence should legal action be taken. It is therefore important to record details of disclosure and any other relevant information that may have been heard and seen.

7.11 Need for ongoing Co-operation between Youth Organisations/Groups and the Statutory Authorities

7.11.1

The Health Board has overall responsibility for the assessment and management of Child Protection concerns. An Garda Síochána has responsibility for the investigation of alleged offences. However, all persons involved with a child protection case may have a particular contribution to make to ensure the young person's future safety and welfare. It is essential, therefore, that a co-ordinated response is made by all persons involved with a young person deemed to be at risk.

Effective inter-agency co-operation will depend on:

- a. understanding and acceptance by all professionals and persons working with children and young people of their responsibilities and roles in the promotion of child welfare
- b. mutual trust and sharing of information
- c. willingness of personnel to respect the contributions made by each other, irrespective of status and position within agencies and organisations/groups
- d. joint training between statutory Child Protection authorities and Youth Organisations/Groups.



If the Health Board or An Garda Síochána decide to pursue a report made by a youth organisation/group, it is likely that a Social Worker will want to speak to the first person who either witnessed an incident of abuse or became concerned about a young person. It is also possible that An Garda Síochána may wish to take a witness statement from the person who originally reported the concern. The Child Protection Officer should make him or herself available as a mediator, if necessary.

Inter-agency and inter-professional co-operation is as important in the later stages of child protection work as it is at the outset. Efforts should be consistently made by all personnel who are working with the child or young person at risk to remain in contact, and to communicate any relevant information to the key worker, usually the Health Board Social Worker.

7.11.2

All areas regardless of location, whether rural or urban, in both statutory and voluntary settings, have networks of professionals working in the field of Child Protection and Welfare. It can be very helpful to make formal or informal contacts between organisations, on an inter-agency basis, sharing events such as training sessions, conferences or inter-agency meetings. The existence of ongoing contacts between organisations in normal circumstances can greatly assist and facilitate good co-operation, when events such as disclosure or discovery of child abuse have to be investigated.

7.11.3

Children First: National Guidelines for the Protection and Welfare of Children suggests that the Health Boards invite participants from community settings to participate in some of their training events. Such practices should be encouraged together with any potential opportunities to foster relationships. These could include:

- a. distribution of an inter-agency directory of personnel, to be revised at least annually
- b. distribution of information leaflets on individual organisations, stating their mission statements, standards and policies
- c. dissemination of “Child Protection Guidelines” booklet to all relevant agencies in the region
- d. inter-agency procedures which clarify what each agency expects of its staff in relation to working with other agencies as well as what they can expect from other agencies
- e. invitations to members of different agencies to relevant events.

7.12. Health Boards and An Garda Síochána Child Protection Policies

7.12.1

A joint protocol has been agreed between the Health Boards and An Garda Síochána. An Garda Síochána notify all cases to the Health Boards. Health Boards notify cases of sexual, physical abuse and wilful neglect to the Gardaí. Both are obliged to conduct a preliminary assessment/investigation. Reports that are made anonymously will be followed up, but those reporting will be informed that anonymity may greatly restrict the ability of professionals to intervene to protect a child.

It is important to note that the ability of the Health Board and An Garda Síochána to respond to reports of suspected child abuse will depend on the quality and extent of information reported to them.

7.12.2 Emergency action to protect a child

If it appears on receipt of a report of child abuse that a child has been harmed or is at immediate risk of harm, emergency action will be taken by the Health Board and An Garda Síochána. This may involve having the child medically examined, and/or moving the child to a safe environment such

as a foster home, or to the home of relatives. This intervention may be made voluntarily with the parents/carers' consent, or may involve an Emergency Care Order under the *Child Care Act, 1991*.

7.12.3 Assessment and Investigation

Where the perceived harm or risk to the child does not appear to warrant emergency action, the assessment/investigation will be carried out as quickly as possible in a co-ordinated manner, in consultation with other professionals involved with the child and parents/carers. This will involve interviews with the child and parents/carers, and possible referral to medical or specialist services for more detailed assessment. An Garda Síochána will prepare a file for the Director of Public Prosecutions if appropriate.

7.12.4 Notification to the Child Care Manager/Child Protection Officer

The Child Protection Notification System is a Health Board record of every child about whom following a preliminary assessment, a child protection concern exists. Notifications are first made to the Child Care Manager by the Health Board staff member who carries out the initial assessment of a Child Protection concern. The Child Care Manager will ensure that all notified reports are reviewed initially and at six monthly intervals until a final outcome of assessment is known and an agreed intervention has been put in place.

7.12.5 Child Protection Meetings

Three types of child protection meeting may be organised by the Health Board during the management of a case as follows:

- a. A **Strategy Meeting** may be held at the outset of a Child Protection Assessment when it appears that a child is at serious risk and in need of immediate protection. A strategy meeting may also be held at any point in an assessment when such a meeting is deemed appropriate. This meeting will normally involve Health Board staff and members of An Garda Síochána, but may also involve any or all other professionals involved. Its main aims are to share information and plan a strategy for early intervention and further assessment.
- b. A **Child Protection Conference** may take place when initial enquiries and any necessary emergency actions have taken place. Its participants include all professionals involved in the case. The child (where appropriate) and the child's parents/carers should be invited unless a specific reason for their exclusion is identified. Its aims are to pool all available information, outline a Child Protection Plan, and identify the tasks to be carried out by different professionals. All professionals who are invited to a Child Protection Conference should attend and produce written reports in advance for the Chairperson, who will normally be the Child Care Manager/Child Protection Officer. The completion of a comprehensive assessment and finalisation of the Child Protection Plan takes place after the Child Protection Conference.
- c. **Child Protection Reviews** are held at six monthly intervals where a child's name is listed in the Child Protection Notification System, where s/he is still residing with his or her parents/carers and where s/he is still considered to be at risk. Child Protection reviews should be attended by the core group of professionals involved with the case, and each should submit a written report in advance. The child (where appropriate) and the child's parents/carers should be invited unless a specific reason for their exclusion is identified. The aim of a child protection review is to consider the child's current situation, co-ordinate the view of participants, and update the Child Protection Plan.



Section Eight

Action to be taken when an Allegation is made against Employees, Volunteers or Other Members of the Organisation/Group

8.1 Introduction

8.1.1

Employers should ensure that volunteers/employees and young people are aware of the internal line management reporting procedures for dealing with allegations of abuse against volunteers, employees or other members of the organisation/group. Employers should also be aware of Employment Legislation and any other Employee Relations Policies. When an allegation of abuse is made against a volunteer or employee, the organisation has a dual responsibility in respect of both the young person and the volunteer/employee or other accused person. These 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 person against whom the allegation is made on the other hand. The organisation/group should, as a matter of urgency, take any necessary protective measures to ensure that no child is exposed to unnecessary risk.

8.2 General Procedures

8.2.1

There are two procedures to be followed when allegations of abuse are made against volunteers or employees, providing services to children in organisations/groups:

- a.** the reporting procedure in respect of the child
- b.** the procedure for dealing with the alleged abuser.

It is recommended that the same person should not have responsibility for dealing with both the reporting issues and the employment/contractual issues. The Child Protection Officer will normally have responsibility for the young person. He or she will also deal with allegations made against a volunteer. The Chief Executive Officer or equivalent senior person within the organisation will have responsibility for dealing with allegations made against an employee. The Child Protection Officer should follow the standard reporting procedure outlined in Section Six.

The possibility of collusion of other members of staff should be recognised. It will be necessary for An Garda Síochána and senior staff within the organisation to agree their strategy for

investigation and remain in contact. The *Protections for Persons Reporting Child Abuse Act, 1998* applies equally to organisations/groups provided they report the matter ‘reasonably and in good faith’.

There are various situations in which allegations may be made involving persons associated with the organisation. The most common are:

- a. an allegation of abuse against an employee within the organisation
- b. an allegation of abuse against a volunteer within the organisation
- c. a complaint or allegation against a young person who is a member of the organisation.

Though the duty to report remains the same in each situation, individual procedures may differ slightly, and are detailed as follows.

8.3 Procedure where a Complaint or Allegation has been made against an Employee

8.3.1

If an allegation is made against an employee, the matter should be reported to the CEO or equivalent senior person within the organisation. Action taken in reporting an allegation against an employee should be based on an opinion formed reasonably and in good faith. All allegations 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 Section Seven. The following steps should be taken:

- a. the first priority should be to ensure that no child is exposed to unnecessary risk. The CEO or equivalent senior person 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 this action is necessary to protect children. Legal advice should be sought in this regard
- b. if a decision is made to report the matter to the Health Board, the Child Protection Officer should follow the standard reporting procedure outlined in Section Seven in respect of the young person. The CEO or equivalent senior person should inform the employee that an allegation has been made and explain the nature of that allegation. The employee should be afforded the right to respond in accordance with established grievance procedure. The response should be noted and passed to the Health Board if a formal report is being made. The CEO or equivalent senior person should also notify the Health Board of any other organisation working with children with which the alleged abuser is thought or known to be involved
- c. the parents/carers of the young person should be informed immediately of the complaint against the employee unless by doing so you endanger the young person. Advice should be taken from the statutory authorities as to how this might best be done
- d. 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
- e. after the consultations referred to above have taken place, and when pursuing the question of the future position of the employee the Chairperson should advise the employee of the situation and should follow the agreed procedures
- f. employers should ensure that any 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 close liaison with the relevant authorities to maintain this co-operation
- g. the person accused will need support pending an investigation. It would be unwise



for this to be provided within the organisation, and external services should be accessible to the employee for this purpose.

These procedures apply in all cases, including those cases where the employee is employed or contracted on a part time or consultancy basis.

8.4 Procedure where an Allegation is made against a Volunteer

8.4.1

If an allegation is made against a volunteer, the matter should be reported to the Child Protection Officer. Where the allegation is made against a Child Protection Officer who is a volunteer, the allegation should be reported to the most senior person within the organisation, or to the Health Board. Action taken in reporting an allegation against a volunteer should be based on an opinion formed reasonably and in good faith. All allegations 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 Section Seven. The following steps should be taken:

- a.** the first priority should be to ensure that no child is exposed to unnecessary risk. The Child Protection Officer should as a matter of urgency take the necessary protective measures. These measures should be proportionate to the level of risk and should not unreasonably penalise the volunteer, unless this action is necessary to protect children
- b.** if a decision is made to report the matter to the Health Board, the Child Protection Officer should follow the standard reporting procedure outlined in Section Seven in respect of the young person. The Child Protection Officer should inform the volunteer that an allegation has been made against him/her and explain the nature of that allegation. The volunteer should be afforded the right to respond. The response should be noted and passed to the Health Board if a formal report is being made. The Child Protection Officer should also notify the Health Board of any other organisation working with children with which the alleged abuser is thought to be involved. The Health Board, if appropriate, will include these organisations in any investigation
- c.** the parents/carers of the young person should be informed immediately unless by doing so, you endanger the young person. Advice should be taken from the statutory authorities as to how this might best be done
- d.** the follow up on an allegation of abuse against a volunteer should be made in consultation with the Health Board and An Garda Síochána. An immediate meeting should be arranged with both agencies for this purpose
- e.** after these consultations, and when pursuing the question of the future position of the volunteer, the Child Protection Officer should advise the volunteer of the situation and agreed procedures should then be followed
- f.** Child Protection Officers should ensure that any 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 the Child Protection Officer maintain close liaison with authorities to ensure close co-operation between the parties.
- g.** the person accused will need support pending an investigation. It would be unwise for this to be provided within the organisation, and external services should be accessible to the volunteer for this purpose.

8.5 Procedure to be followed where an Allegation is made against Another Young Person

8.5.1

If an allegation is made against another young person, it should be considered a Child Protection issue for both the young people involved and Child Protection Procedures should be adhered to for both the victim and the alleged abuser. The parents/guardians of the young people concerned should be informed immediately. Advice should be taken from the Statutory Authorities as to how this might best be done. Decisions regarding the future participation in the youth organisation of the young person alleged to have committed abuse should be made at management level.

8.6 Application of Fair Treatment

8.6.1

Volunteers or employees about whom there are concerns should be treated fairly. They should be helped to understand the concerns expressed and the processes being operated, and be clearly informed of the outcome of any investigation and its implications for their future employment or contractual arrangements with the organisation/group. The investigation should be completed as soon as possible.

The fact that legal action may not always be possible should not mean that action in relation to protecting children or disciplining the volunteer or employee should not be taken. It is important that allegations are thoroughly assessed and a decision reached.

8.7 Good Practice for the Organisation

8.7.1

Organisations should develop an internal policy on support and supervision. This document should cover the following headings:

- guidelines for the organisation
- training in matters of Child Protection
- the appointment of a Child Protection Officer
- the role of the Child Protection Officer
- reporting relationship between the Child Protection Officer and Director
- legal advice guidelines
- storage facilities for safety of records
- support for a Youth Worker dealing with a disclosure
- support for a Youth Worker or Volunteer against whom an allegation has been made within the context of carrying out their duties on behalf of the organisation
- transfer of information
- external support services
- crisis response plan in the event of an arising emergency
- inter-agency protocol and co-operation between core groups
- insurance coverage.

Appendix One

Sample Volunteer Application Form

1. Name (Mr/Mrs/Ms) _____

2. Any other name previously known as _____

3. Address _____

Tel. No. (Daytime) _____ (Evening) _____

4. Date of Birth ____/____/____ Place of Birth _____

5. Occupation _____

6. Please outline why you wish to become a volunteer/employee:

7. Please give details of youth training/any previous experience/involvement in youth activity/clubs.

8. Do you suffer from any illness/disability/medical condition which may at times affect your ability to work with young people? If so, please give details.

9. Times available (Please indicate times when you will be available)

Daytime	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Morning							
Afternoon							
Evening							

9.1 Please supply the name, address, telephone numbers and position of two people (non-relative), who know you well and can provide us with a reference:

<p>9.2 _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Tel No. _____</p> <p>Position _____</p>	<p>9.3 _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Tel No. _____</p> <p>Position _____</p>
---	---

Declaration: (Confidential)

10. Have you ever been convicted of a Criminal Offence or been the subject of a Caution or of a Bound Over Order.

Yes No

Signed: _____

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

Nature of Offence	Date of Offence
_____	_____
_____	_____
_____	_____

Signed: _____

10.1 I confirm that nothing within my personal or professional background deems me unsuitable for a post which involves working with children.

10.2 I declare that the above information is true and agree that I will abide and accept the terms and conditions of membership/participation.

Signed: _____

Date: _____

For Group/Office Use Only

Checked by phone _____ Visit _____ Letter _____

Checked by: _____

Date: _____

Appendix Two

Sample Volunteer Reference Form

Confidential

_____ has expressed an interest in becoming a volunteer with this club/organisation and has given your name as a referee.

This post involves substantial access to children and as an organisation committed to the welfare and protection of children, we are anxious to know if you have any reason at all to be concerned about this applicant being in contact with children or young people

Yes No

If you have answered yes, we will contact you in confidence.

If you are happy to complete this reference form, all information contained on the form will remain confidential and will only be shared with the applicant's immediate supervisor, should they be offered a volunteer position. We would appreciate you being extremely candid in your evaluation of this person.

How long have you known this person? _____

In what capacity? _____

What attributes does this person have which you would consider makes them a suitable volunteer?

How would you describe their personality?

Please rate this person on the following (please tick)

	Poor	Average	Good	V. Good	Excellent
Responsibility					
Maturity					
Self Motivation					
Motivation of Others					
Energy					
Trustworthiness					
Reliability					

Signed _____ Date _____

Occupation: _____

Appendix Three

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 Síochána.

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 completed 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 Social Work Department?

Yes No

If Yes, what is their attitude? _____

6. Details of Person Reporting Concerns:

(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 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 Four

Health Board Child Care Contact Addresses

East Coast Area Health Board

Community Care Area	Address	Phone No.	Fax No.
Area 1	Tivoli Road, Dun Laoghaire, Co. Dublin	01-2843579	01-2808785
Area 2	Vergemount Hall, Clonskeagh, Dublin 6	01-2698222	01-2830002
Area 10	Glenside Road, Wicklow	0404-68400	0404-69044

Northern Area Health Board

Community Care Area	Address	Phone No.	Fax No.
Area 6	St. Joseph's School for the Deaf, Social Work Department, Navan Road, Dublin 7	01-8385034	01-8385060
Area 7	Rose Cottage, Convent Avenue, Off Richmond Road, Fairview, Dublin 3	01-8575431	01-8575449
Area 8	Coolock Health Centre, Cromcastle Road, Coolock, Dublin 5	01-8476122	01-8479944

South Western Area Health Board

Community Care Area	Address	Phone No.	Fax No.
Area 3	Unit 43, The Malting Business Park, 54/55 Marrowbone Lane, Dublin 8	01-4544733	01-4544827
Area 4	Old County Road, Health Centre, Crumlin, Dublin 12	01-4154700	01-4154701
Area 5	Community Services, Dublin West, Cherry Orchard Hospital, Ballyfermot, Dublin 10	01-6206092	01-6206265
Area 9	Poplar House, Poplar Square, Naas, Co. Kildare	045-876001	045-879225

Midland Health Board

Community Care Area	Address	Phone No.	Fax No.
Longford/ Westmeath	Health Centre, Longford Road, Mullingar, Co. Westmeath	044-40221	044-39170
Laois/Offaly	Health Centre, Arden Road, Tullamore, Co. Offaly	0506-46254	0506-46157

Mid-Western Health Board

Community Care Area	Address	Phone No.	Fax No.
Limerick	Vocational Training Centre, Dooradoyle, Limerick	061-482792	061-482759
Clare	Tobartaaiscain, Ennis, Co. Clare	065-6823921	065-6823926
Nth. Tipperary	Child Care Manager Dept., Annbrook, Limerick Road, Nenagh, Co. Tipperary	067-38300	067-38301

North-Eastern Health Board

Community Care Area	Address	Phone No.	Fax No.
Cavan/Monaghan	Child Care Dept., Local Health Care Unit, Rooskey, Monaghan	047-30475	047-30796
Louth	Louth Community Services, Community Care, Dublin Road, Dundalk	042-9332287	042-9332496
Meath	County Clinic, Navan, Co. Meath	046-78748	046-22818

North-Western Health Board

Community Care Area	Address	Phone No.	Fax No.
Donegal/ Sligo/Leitrim	Sheil House, College Street, Ballyshannon, Co. Donegal	071-9822776	071-9822779

South-Eastern Health Board

Community Care Area	Address	Phone No.	Fax No.
Carlow/Kilkenny	Community Care Centre, James Green, Kilkenny	056-52208	056-64172
Waterford	Community Care Centre, Cork Road, Waterford City	051-842800	051-842811
Wexford	Community Care Centre, George's Street, Wexford	053-23522	053-21842
South Tipperary	Community Care Centre, Western Road, Clonmel, Co. Tipperary	052-77285	052-25337

Southern Health Board

Community Care Area	Address	Phone No.	Fax No.
South Lee	Floor 2, Abbeycourt House, George's Quay, Cork	021-4923833	021-4923953
North Lee	Floor 2, Abbeycourt House, George's Quay, Cork	021-4923952	021-4923953
North Cork	Gouldshill House, Mallow, Co. Cork	022-31244	022-30211
West Cork	13/14 Hibernian Building, Main Street, Skibbereen, Cork	028-40580	028-23172
Kerry	6 Denny Street, Tralee, Co. Kerry	066-7184811	066-718480

Western Health Board

Community Care Area	Address	Phone No.	Fax No.
Galway	Community Care Offices, 25 Newcastle Road, Galway	091-523122	091-524231
Mayo	Mayo Community Services, Western Health Board, 3rd Floor, St. Mary's Hospital, Castlebar, Co. Mayo	094-22333	094-27106
Roscommon	Child Care Office, Abbey Town House, Abbey Street, Roscommon	0903-26732	0903-26776

Appendix Five

Contact Addresses for Health Board Information and Advice Officers

Information and Advice Officers Provide Guidance and Advice to Organisations on Child Protection

East Coast Area Health Board

Community Care Area	Address	Phone No.	Fax No.
Area 1, 2, 10 (Wicklow)	Southern Cross House, Southern Cross Business Park, Boghall Road, Bray, Co. Wicklow	01-2014273	01-2014288

Northern Area Health Board

Community Care Area	Address	Phone No.	Fax No.
Area 6, 7, 8	Child Care and Development Unit, NAHB 3rd floor, Park House, North Circular Road, Dublin 7	01-8823431	01-8823491

South Western Area Health Board

Community Care Area	Address	Phone No.	Fax No.
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.	01-4691720	01-4691728

Midland Health Board

Community Care Area	Address	Phone No.	Fax No.
Longford, Westmeath, Laois, Offaly	Child Care Services Training and Development, Market Square, Tullamore, Co. Offaly	0506-28350	0506-46226

Mid-Western Health Board

Community Care Area	Address	Phone No.	Fax No.
Tipperary North	Child Care Manager's Dept, Annbrook, Limerick Road, Nenagh.	067-38314	067-38301
Clare	River House, Gort Road, Ennis, Co. Clare.	065-6863919	065-6863983
Limerick	87 O'Connell St., Limerick.	061-483520	None

North-Eastern Health Board

Community Care Area	Address	Phone No.	Fax No.
N.E.H.B-Region	Old Rooskey Offices, N.E.H.B., Rooskey, Monaghan.	047-30470	046-73178
	N.E.H.B., 26 Brew Hill, Navan, Co. Meath.	046-73178	046-27359

North-Western Health Board

Community Care Area	Address	Phone No.	Fax No.
Sligo, Leitrim, Donegal, Cavan	Markievicz House, Barrack Street, Sligo	071-55181	071-55131

South-Eastern Health Board

Community Care Area	Address	Phone No.	Fax No.
Carlow, Kilkenny, Wexford, Waterford, South Tipperary	Community Care, S.E.H.B., Athy Road, Carlow.	0503- 33797/36520	0503-36550

Southern Health Board

Community Care Area	Address	Phone No.	Fax No.
North Lee, North Cork, Kerry	Ellis House, Ballyvolane Commercial Park, Ballyvolane, Cork	021-4529010	021-4529028
South Lee, West Cork	Ellis House, Ballyvolane Commercial Park, Ballyvolane, Cork.	021-4529010	021-4529028

Western Health Board

Community Care Area	Address	Phone No.	Fax No.
Galway	Community Care Services, W.H.B, ALDI, Seamus Quirke Rd, Galway	091-548440	091-524226
Roscommon, Mayo	Mayo Community Services St. Mary's Hospital, Castlebar, Co. Mayo	094-42579	094-20452



Appendix Six

Relevant Legislation Relating to the Storage of Information:

Data Protection Act, 1998

The Act only applies to the automatic processing of personal data. It gives a right to every individual, irrespective of nationality or residential status, to establish the existence of personal data, to have access to any such data relating to him and to have inaccurate data rectified or erased. It requires data controllers to make sure that the data they store is collected fairly, is accurate and up-to-date, is kept for lawful purposes and is not used or disclosed in any manner incompatible with those purposes. It also requires both data controllers and data processors to protect the data they keep, and imposes on them a special duty of care in relation to the individual about whom they keep such data.

There are only three exclusions under the Act:

- a. data relating to State Security
- b. information that is required by Law to be made available to the public
- c. personal data kept only for personal or recreational purposes.

Freedom of Information Act, 1997

This Act enables members of the public to obtain access to the greatest extent possible consistent with the public interest and the right to privacy, to information in the possession of public bodies.

Main features of the Act

The Act has established three new statutory rights:

- a. a legal right for each person to access information held by public bodies
- b. a legal right for each person to have official information relating to him/herself amended where it is incomplete, incorrect or misleading
- c. a legal right to obtain reasons for decisions affecting oneself.

In addition, an independent Office of the Information Commissioner has been established under the Act to review decisions relating to FOI made by public bodies.

The Act is also designed to protect the privacy of individuals and, in general, requires the prior consent of an individual before releasing personal information about them. Where the release of social work or medical records contains information that would be harmful to a person's well-being, the release may be made to a Health Professional who acts on the person's behalf.

Under the Act, there are regulations and guidelines relating to access by parents to their children's records; these emphasise that the over-riding concern is the best interests of the child.

Appendix Seven

Pre-Employment Consultancy Service (PECS) – Northern Ireland

For those organisations that work throughout the thirty-two counties, the Pre-Employment Consultancy Service can be availed of – in Northern Ireland **only**. This is a service which helps organisations working with adults or children with a learning disability to check the suitability of prospective employees, whether paid or unpaid.

Organisations wishing to use the Service must make an application to the Child Care Unit in Dundonald House. The Pre-Employment Consultancy Service (PECS) can only be used by those organisations which clearly meet the criterion of having posts involving “substantial access” to children or to adults with a learning disability. It must be stressed that not all organisations, which apply, will be successful.

Organisations should, if possible, “design out” the potential risk by removing the “substantial access” instead of using the Service. This could be done, for example, by changing the supervision or management arrangements for the post. Applications must, therefore, show that this issue has been carefully considered and the reasons given why the “substantial access” and “designing out” access is given below:

If one wishes to apply to use the Service one must include the following information:

- a description of what the organisation is about
- details of the organisation itself, that is, structure and constitution, the names and addresses of all office bearers (Chairman, Treasurer, Secretary, Committee Members)
- details (including job descriptions) of the post which involves “substantial access” to children or adults with a learning disability, including the nature of the access, and the reasons why such access cannot be avoided
- written confirmation that the organisation will conform as far as possible, to the principles contained in “*Our Duty to Care*” booklet.

When the application has been considered, the applicant will be informed of the decision in writing, and if successful, will be sent guidance on the use of the Service entitled “Making the Right Choice”. This guidance covers the principles and operating procedures for the Service along with details of opportunities for training.



“Substantial Access”

1. There is no precise definition of “substantial access”. However in making a decision, you should ask yourself the following questions in relation to each post. This list is not exhaustive. It is not necessary that all the questions be answered “yes” for the post to require a check – a positive answer to one or more of the questions may be sufficient.

Does the post involve one-to-one access?

Such contact especially if it occurs on a regular basis away from the client’s home, or separate from other adults or children, is likely to involve substantial access.

Is the post supervised or accompanied?

Where no other responsible adult is likely to be present, and the post involves appreciable periods of time with children or people with a learning disability, this suggests that substantial access is involved.

Is the situation isolated?

Children or people with a learning disability who are away from home are particularly vulnerable, for example, if they are living in residential care, or on holiday. The further they are from their family home, or the fewer the opportunities for family visits the greater their vulnerability. Most posts in this type of situation will involve substantial access.

Is there regular contact?

The more regular the contact which a person has with the same child or person with a learning disability, the greater the opportunity to put them at risk. This is especially so if the contact is unsupervised, or occurs away from other children or people with a learning disability. Intermittent limited contact would not normally be regarded as substantial access.

2. To assist you, the following are examples of posts where checks should/should not normally be requested. It must be stressed that the examples are for illustrative purposes only – you must examine each individual post within your organisation.

“Designing out Access”

3. Having decided that a post involves “substantial access”, you must consider whether such access is unavoidable, or whether the management or supervisory arrangements can be changed to “design out” the access and thus remove the risk.
4. “Designing out” access may not be easy, but you must bear in mind that PECS can never guarantee an applicant’s suitability, and the most effective means of safeguarding both your clients and your organisation is to ensure that as few people as possible have substantial access to children or people with a learning disability.
5. We recognise, of course, that for many posts, “designing out” access will not be possible. Many organisations will be involved in activities which simply could not take place without “substantial access”, for example, providing residential care, or running holiday schemes for children, or any post involving the provision of personal care. However, we are asking you to look carefully at every post within your organisation, which involves substantial access. If, having done so, you decide that it is not possible to “design out” the access, then you may use PECS for the post, provided you tell us the reasons why a check is necessary.

6. Examples of the types of changes which you may consider are:

Posts involving one-to-one access

Is this necessary or could other children or people with a learning disability be involved?

Unsupervised or unaccompanied posts

Clearly we do not expect staff to go about in pairs at all times, but can the level of supervision be increased or can you reorganise activities so that one member of staff is not left alone with your clients? Remember that this would also offer protection to staff from false allegations.

Isolated Situations

Where and when does the access take place? Is it an isolated part of the premises? Or away from your premises altogether? Your organisation should have a clear policy on whether contact with clients away from your premises or outside normal working hours is acceptable. This policy should be clearly understood by all staff, all clients and their families or carers.

Types of posts for which a particularly careful judgement is required:

- youth organisation leaders
- posts in community centres, sports clubs, etc.
- office bearers in clubs and societies.

Protection of Children and Vulnerable Adults Bill

The *Protection of Children and Vulnerable Adults Bill* promotes the concept of ‘accreditation’ (clause 16) and deals with concerns currently not addressed in the present use of the P.E.C.S. system. Currently there is no obligation on non-childcare organisations (voluntary/sports organisations for example) to refer those dismissed for harming children or indeed carrying out checks against the Department of Health’s register. Accreditation will be a pro-active measure that will result in improved child protection standards in non-regulated organisations. Accreditation will relate to:

- a. receiving funding
- b. setting standards for accreditation
- c. powers to refuse accreditation.

The *Protection of Children and Vulnerable Adults Bill* had its second reading on the 3rd July 2002, but will not be passed as legislation until 2003.

Guidelines on Using the Pre-Employment Consultancy Service

The Guidelines on using P.E.C.S. is split into a simple process consisting of six stages:

- a. Contact a Child Care Unit to request an application form to register for P.E.C.S. Telephone 028 90524316
- b. Child Care Unit issues P.E.C.S application letter and a copy of *Our Duty to Care* if appropriate
- c. National Governing Body returns form to Child Care Unit enclosing **all** necessary information
- d. Child Care Unit issues letter accepting/not accepting Governing Bodies application to use P.E.C.S and enclosing a copy of *Making the Right Choice*. For a copy of *Pre-Employment Consultancy Service – A Simple Guide* contact the Child Protection in Sport Unit
- e. Governing Body forwards a completed user agreement to the Child Care Unit
- f. Governing Body is advised to contact the Volunteer Development Agency (VDA) on 028 90236100 regarding P.E.C.S. training.



Appendix Eight

Reference and Source Material:

Reference Material:

- Catholic Guides of Ireland. **Child Protection Policy**
- City of Dublin Youth Services Board. **Child Abuse Guidelines**
- City of Dublin Youth Services Board. **Notification of Child Abuse between Health Boards and Gardaí**
- Cumann Lúthchleas Gael. **Guidelines for the Investigation and Management of Allegations of Child Abuse**
- FÁS. **Community Employment Scheme – Guidelines and Procedures for Dealing with Protection of Vulnerable Groups.**
- Foróige. **Protecting Young People**
- Irish National Teachers Organisation. **Guidance for Teachers – A Professional Response to Changing Times**
- Irish Society for the Prevention of Cruelty to Children. **Protecting Children and Young People. Guidelines for Youth Workers on Child Abuse**
- National Youth Federation. **Dealing with Sexual Abuse – Guidelines for Youth Workers**
- Northern Ireland Volunteer Development Agency. **Our Duty to Care – Principles of Good Practice for the Protection of Children and Young People.**

Statutory Bodies Reference Material:

- Department of Education and Science. **Procedures for Dealing with allegations or Suspicions of Child Abuse**
- Department of Education and Science. **Report on the Survey of the Child Abuse Prevention Programme (Stay Safe)**
- Department of Health and Children. **Children First; National Guidelines for the Protection and Welfare of Children**
- Department of Health and Children. **Child Abuse Guidelines**
- Department of Health and Children. **Notification of Cases of Child Abuse between Health Boards and Gardaí**
- Department of Health and Children. **Our Duty to Care**
- Irish Sports Council. Department of Tourism and Sport. **Code of Ethics and Good Practice for Children’s Sport in Ireland.**

Other Source Material:

- **UN Convention on the Rights of the Child, 1992**
- **Protections for Persons reporting Child Abuse Act, 1998.**

Appendix Nine

Useful Contacts:

Eastern Health Board

Regional Directors
Child Care and Family Support Services
Dr Steven's Hospital
Dublin 8
Tel: 01 6790700
Fax: 01 6771523

Mid-Western Health Board

Regional Director
Child Care and Family Support Services
St Joseph's Hospital
Mulgrave Street
Limerick
Tel: 061 461437
Fax: 061 416744

South-Eastern Health Board

Regional Director
Child Care and Family Support Services
Dublin Road
Lacken
Kilkenny
Tel: 056 84198
Fax: 056 84389

North-Western Health Board

Manorhamilton
Co Leitrim
Tel: 072 20400
Fax: 072 20431

The Garda Commissioner

An Garda Síochána
Garda Headquarters
Phoenix Park
Dublin 8
Tel: 01 6660000

Midland Health Board

Regional Director
Child Care Unit
Midland Regional Hospital
Tullamore, Co Offaly
Tel: 0506 46283
Fax: 0506 46226

North-Eastern Health Board

Director of Governance, Planning and Evaluation
Children and Family Services
Aerbridge House
Dunshaughlin Business Park
Dunshaughlin, Co Meath.
Tel: 01 8250907
Fax: 01 8250695

Western Health Board

Regional Director
Child Care and Family Support Services
Child Care Unit
Merlin Park Hospital
Galway
Tel: 091 775301
Fax: 091 775632

Southern Health Board

Wilton Road
Cork
Tel: 021 4545011

Irish Sports Council

21 Fitzwilliam Square
Dublin 2
Tel: 01 2407700
Fax: 01 2407777

Department of Education and Science

Youth Affairs Section
Floor 2, Block 2
Marlborough Street
Dublin 1
Tel: 01 8892179
Fax: 01 8896536
Web: <http://www.education.ie>

Pre-Employment Consultancy Service

Child Care Unit
Department of Health and
Social Services and PS
Room 508a, Dundonald House
Upper Newtownards Road
Belfast BT4
Tel: +44 289 0524 290

Northern Ireland Programme Manager Family and Child Care Addresses:

Programme Manager Family and Child Care

Ulster Community and Hospital Trust
39 Regent Street
Newtownards
BT23 4AD
Tel: 048 91 8166 66

Programme Manager Family and Child Care

Foyle HSS Trust
Riverview House
Abercorn Road
Derry
BT48 6SB
Tel: 048 71 2661 11

Programme Manager Family and Child Care

Sperrin Lakeland HSS Trust
Tyrone and Fermanagh Hospital
Hospital Road
Omagh
BT79 ONS
Tel: 048 82 2452 11

Programme Manager Family and Child Care

Sperrin Lakeland Health and Social Care Trust
Community Services
2 Coleshill Road
Enniskillen
BT74 7HG
Tel: 048 66 3440 00

Programme Manager Family and Child Care

Newry and Mourne HSS Trust
Oakdale House
Dromalane Road
Newry
BT35 8AP
Tel: +44 208 308 25120

Programme Manager Family and Child Care

Armagh and Dungannon HSS Trust
Headquarters
St Luke's Hospital
Loughgall Road
Armagh
BT61 7NQ
Tel: 048 3752 2381

Programme Manager Family and Child Care

Craigavon and Banbridge Trust
Headquarters
Barnvale Road
Guildford
Co Down
Tel: 048 38 8319 83

Programme Manager Family and Child Care

Down Lisburn HSS Trust
Health Centre
22-25 Linenhall Street
Lisburn
BT28 1LU
Tel: 048 92 6651 81

Notes



10K-05/03

