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# Child Protection and Welfare Policy

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Turas Training

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## 1. Policy Statement

- 1.1. TURAS aims to be fully compliant with the standards outlined in Children First: National Guidelines for the Protection and Welfare of Children: 1999, Children First Act 2015 and Children First National Guidance 2017.

## 2. Purpose

- 2.1. The Department of Health and Children guidelines on protecting children place clear duties on service providers to protect children from abuse. It is therefore the responsibility of TURAS to report any suspicions about physical, emotional, sexual abuse or neglect to the Health Service Executive or the Gardaí.
- 2.2. This policy should be read in conjunction with the organisations Garda Vetting Policy.

## 3. Scope

- 3.1. This policy applies to all staff, volunteers, and locums under the banner of TURAS It also includes people from other agencies conducting in reach services in TURAS for the time they are on the premises.
- 3.2. This policy does not cover the safe practices necessary for a service providing activities specifically for services users under 18.

## 4. Glossary of Terms and Definitions

Chapter three of "Children First" provides guidelines on definitions and recognition of child abuse (pg 31):

- 4.1. Physical abuse: where it is known or suspected that injury was deliberately inflicted.
- 4.2. Sexual abuse: the use of children by others for sexual gratification. This can take many forms and includes rape and other sexual assaults, allowing children to view sexual acts or to be exposed to, or involved in, pornography, exhibitionism and other perverse activities.
- 4.3. Emotional abuse: adverse effects on behaviour and emotional development of a child caused by persistent or severe emotional ill treatment or rejection or exposure to on-going domestic violence.
- 4.4. Neglect: the persistent or severe neglect of a child whether wilful or unintentional which results in serious impairment of the child's health, development or welfare.

## 5. Children First Principles

- 5.1. The welfare of the child is of paramount importance.
- 5.2. A balance must be struck between protecting children and respecting the needs of parents/carers and families. Where there is a conflict, the welfare of the child must come first.
- 5.3. TURAS recognises that every child has the right to be safe at all times, and to be treated with respect and understanding. Taking account of their age and level of understanding, children should be consulted and involved in relation to all matters that affect their lives. To that end their concerns must be heard and taken seriously.
- 5.4. Early intervention and support should be available to promote the welfare of the child.
- 5.5. Parents / carers have a right to respect and should be consulted and involved in matters which concern their family.
- 5.6. Actions to protect the child, including assessment should not cause the child unnecessary stress.
- 5.7. Intervention should not deal with the child in isolation; the child must be seen in a family setting.
- 5.8. The criminal dimension of any act cannot be ignored.
- 5.9. Children should only be separated from their parents/carers when all other means have been exhausted. Re-union should always be considered.
- 5.10. All agencies and disciplines concerned with the protection and welfare of children must work cooperatively in the best interest of children and families.
- 5.11. Effective child protection involves compulsory training and clarity of responsibility.

## 6. Staff Training

- 6.1. "Children First" is to be made available to all staff on our website with further resources available at [www.tusla.ie](http://www.tusla.ie) and [www.hseland.ie](http://www.hseland.ie). All staff working directly with clients are required to complete the online 'Introduction to Children First' on HSEland.
- 6.2. All staff will be offered training in child protection, if they have not already received training from either an HSE training session or from the Child Protection Officer within the organisation.
- 6.3. It is the responsibility of senior management to ensure that all staff members are kept up to date with this training.
- 6.4. Staff are required to follow all procedures within this policy.

## 7. Confidentiality

- 7.1. No undertaking regarding secrecy can be given in any situations.
- 7.2. The Confidentiality Policy contains clear guidance in regard to extensions of confidentiality regarding issues relating to Child Protection. The confidentiality policy takes accordance of Children First, which states; 'giving information to others for the protection of a child is not a breach of confidentiality' (pg41). The Turas policy states that confidentiality may be extended when a service user discloses that:
  - 7.2.1. they have perpetrated sexual / physical abuse on another person,
  - 7.2.2. they intend to perpetrate sexual / physical abuse on another person,
  - 7.2.3. any other issues in relation to Child Protection, as described in Children First.

## 8. Reporting A Concern

- 8.1. Designated Child Protection Officer
  - 8.1.1. Turas has a designated staff member whose role is to ensure that procedures and arrangements are in place within the organisation to protect children in line with national guidelines. This role will be referred to as the Child Protection Officer/s.
  - 8.1.2. The Child Protection Officer/s within TURAS is the Assistant Project Coordinator.
- 8.2. Responsibility to Report
  - 8.2.1. Every employee has a statutory responsibility to report any child protection concerns. Within TURAS the procedure is for all staff concerns to be reported to the designated Child Protection Officer. It is the responsibility of this officer to then determine whether there are reasonable grounds for concern and where there are reasonable grounds for concern to report this to the appropriate agency; either the HSE or An Garda Síochána.
  - 8.2.2. The Protections for Persons Reporting Child Abuse Act, 1998 provides immunity from civil liability to persons who report child abuse in "reasonable and in good faith" to designated officers, HSEs or any member of the garda.
- 8.3. Reasonable Grounds for Concern

In accordance with Children First, reasonable grounds for concern are defined as:

  - 8.3.1. specific indication from a child that he/she was abused;
  - 8.3.2. an account by a person who saw the child being abused;
  - 8.3.3. evidence, such as an injury, which is consistent with abuse and is unlikely to have been caused in any other way;
  - 8.3.4. an injury that is consistent both with abuse and with an innocent explanation but where there are corroborative indicators supporting the concern that it is a case of abuse;
  - 8.3.5. Consistent indication over time that a child is suffering from emotional or physical neglect.
- 8.4. Standard Reporting Procedures (Staff)
  - 8.4.1. Staff should ensure that notes are taken of any issues that cause concern. These may be vital if the concerns become reportable. It is essential to keep accurate notes with dates, times and factual objective information. These should be recorded in the case file. See Record Keeping Policy for instruction on best practice in writing case notes.

- 8.4.2. It can be difficult for staff to determine whether suspicions about child abuse are real. Before a staff member acts on these they need to consider whether there is an alternative explanation to be explored, the staff member should ask the following questions of themselves:
- Is there any other reason why the parent or child involved might be acting in a particular way?
  - Is there a pattern to this kind of occurrence?
  - Did you or anyone else see what was happening?
  - Has the child said anything to indicate that he/she is being harmed
  - Could injuries or signs have been caused in another way?
- 8.4.3. If the staff member has considered these questions and is still concerned, it is likely that there are reasonable grounds to take action. Staff should contact the TURAS Child Protection Officer.
- 8.4.4. Where serious abuse is suspected immediate action will be required. Staff are to inform the Turas Child Protection Officer at the earliest possible opportunity and as a matter of urgency. If the Child Protection Officer is not available the issue should be raised with Project Manager In no case should serious concerns be left unaddressed or unreported.
- 8.4.5. It is important to be aware that the person who first encounters a case of alleged or suspected abuse is not responsible for deciding whether or not abuse has occurred. That is a task for the Gardaí or the HSE. Under no circumstances should any individual member of staff or the centre itself attempt to deal with the problem of abuse alone.

#### 8.5. Standard Reporting Procedure (Child Protection Officer)

- 8.5.1. The Child Protection Officer may contact a member of the Board of Management for advice around reporting the matter to the HSE. They may also contact the Public Health Nurse or Social Work Department who can assist them in deciding whether or not to report the issue formally to the HSE.
- 8.5.2. Tusla's online reporting system will be used through its portal whenever possible.
- 8.5.3. A report should be made to the HSE (to the Duty Social Worker) in person, by telephone or in writing; see page 39 of "Children First" for an outline of the information required when a report of child abuse is being made. Also see page 136 (Appendix 3) in "Children First" for a list of HSE phone numbers and addresses.
- 8.5.4. In the event of an emergency, or the non-availability of the HSE, the report should be made to a Garda. This may be done at any Garda Station (page 38, Children First Guidelines).
- 8.5.5. The reporting form at the back of the Children First Guidelines must be completed at this stage to facilitate Social Worker/Gardaí decision making. This may entail:
- 8.5.5.1. clarifying or getting more information about the matter:
  - 8.5.5.2. where there is doubt or uncertainty, consulting initially with statutory child protection agency to receive their guidance on the matter:
  - 8.5.5.3. making a formal referral to a statutory child protection agency or the Gardaí.
- 8.5.6. A social worker may wish to speak to the person who first witnessed the incident, received the disclosure, or experienced the concern; if the report is made by the Child Protection Officer, staff should be informed of this possibility.
- 8.5.7. It is essential to keep accurate notes with dates, times and factual objective information when assessing or reporting abuse

### 9. A Member of Staff / Volunteer is Accused of Abuse

- 9.1. If a member of staff / volunteer is accused of abuse, the matter will be investigated immediately in collaboration with external authorities.
- 9.2. If an allegation is made against a worker, two separate procedures must be followed:
- 9.2.1. The standard reporting procedure in respect of suspected child protection concerns (outlined in sections 8.4 and 8.5) and,
  - 9.2.2. The procedures outlined below:
- 9.3. Procedures to follow for dealing with the worker involved in the complaint:
- 9.3.1. Inform the Chairperson of the Board of Management.

- 9.3.2. Ensure no child is exposed to unnecessary risk.
- 9.3.3. Confidentiality is of the utmost importance and only those who need to be informed should be notified or made aware of the situation.
- 9.3.4. A worker may be suspended with pay to protect the child and other children attending the organisation, at all times considering the employees contract and the rules of natural justice.
- 9.3.5. Staff / volunteers may be subject to erroneous or malicious allegations. Therefore all allegations should be dealt with sensitivity and support, such as counselling, offered.
- 9.3.6. An action following an allegation of abuse against an employee should be managed in consultation with the HSE and the Gardaí. An immediate meeting should be arranged with these bodies for this purpose.
- 9.3.7. After these consultations and when pursuing the future position of a worker, the Chairperson should advise the person accused of the allegation and the procedure that is to be followed.
- 9.3.8. The Director and Board of Management should take care that the actions taken by them do not undermine or frustrate any investigations being conducted by the HSE or Gardaí.
- 9.4. It is recommended that the same person should not have responsibility for the **reporting issues** and the employment **issues**. They should be separated and managed independently. There may be situations where the allegations turn out to be unfounded. But it is important that suspicions are treated seriously and in the manner outlined above.

## 10. Special Considerations

- 10.1. Abuse by visitors to the service
  - The possibility of abuse by a visitor must be recognised. If such abuse occurs, it should normally be dealt with in the same way as other incidents of suspected abuse.
- 10.2. Peer abuse
  - 10.2.1. In child abuse cases the alleged perpetrator will also be a child. In such cases the management of the case should be as follows (see page 105 Children First):
    - 10.2.1.1. In a situation where child abuse is alleged to have been carried out by another child, the child protection procedures should be adhered to for both the victim and the alleged perpetrator (meaning it should be considered a childcare and protection issue for both children).
    - 10.2.1.2. Staff should report all incidents to the organisations Child Protection Officer as above.
    - 10.2.1.3. The Organisation's Child Protection Officer should refer to the HSE or Gardaí as above.
- 10.3. Admission of retrospective abuse
  - 10.3.1. Where there is disclosure by adults of abuse which took place in their childhood, and the Garda or HSE are aware of this any further action by these agencies will be based on the consideration of whether any child may be in contact with the alleged abuser. The service user needs to be informed of this policy and offered appropriate support services including onward referrals and counselling.

## 11. Follow up on Child Protection Report with Statutory Services

- 11.1. Where the organisation has an ongoing relationship with the case, follow up with the relevant social worker can be organised as part of the care plan; where there is consent provided by the adult service user involved in the case. Ideally this will be occur through the medium of a case meeting which aims to reach an agreement on what supports need to be provided and which agency is most suitable to provide these. In some cases this may be done through phone or mail communications.
- 11.2. Follow up contact should also be made where there is repetition of the concerns relating to child protection, or where new concerns arise. In this case consent from the adult involved in the case is not required.
- 11.3. If no consent for sharing of information is provided by the adult then the Statutory services will not be able to provide any information following receipt of the initial report.

**12. Garda Vetting**

- 12.1. See garda vetting policy for further detail. In essence the policy outlines that all staff working directly with under 18s or vulnerable adults will be required to furnish details of past addresses to facilitate garda vetting and that any individuals with past offences in relation to child abuse will not be facilitated access to children or vulnerable adults by the organisation.

**13. Safe Practice**

- 13.1. If a parent or a guardian brings a child into the service, the service will record the name and address of the child, but the child will be the responsibility of the parent / guardian.
- 13.2. In the event that a child is brought into the organisation accompanied by an adult who is not their parent / guardian, and where this is a new arrangement or unknown arrangement, the manager should be contacted; they have a role of determining whether this arrangement is suitable.
- 13.3. Children should at no time be left unattended. As far as possible the child will remain with the adult. In the event that this is not the case, there should be two staff with the child at all times. Staff should not at any time be in a closed room with a child.