

# Skerries

# Community

# Association

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## Child Protection

## Policy

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1'Volunteers' refers to volunteers, facilitators and any event co-ordinators

2'Primary carer' refers to parent(s), carer(s) or responsible adult(s) as appropriate.

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## INTRODUCTION

All organisations and individuals working with children and young people have a responsibility to protect children in accordance with government guidelines and legislation. A background to legislation and legal obligations relevant to child protection can be found in the government guidelines, *Children First: National Guidelines for the Protection and Welfare of Children* (pp. 25-27).

Having clear policies and procedures in place to minimise the risk of abuse or harm to children and young people, and for dealing with complaints and allegations, should serve to support organisers, all staff and volunteers and ease anxiety around the issues of child protection and safety.

It is important for individuals to be familiar with the definitions of abuse and to be equipped to recognise any signs or symptoms and know how to take a concern or an incident forward. It is important that all those involved understand, accept and agree to abide by them.

## Skerries Community Association Child Protection Policy

Our Child Protection Policy comprises:

- a statement of policy, which expresses the Association's commitment to providing a safe environment for any children and young people with whom it interacts;
- an undertaking to apply that policy throughout the organisation;
- detailed procedures and steps to ensure that the Child Protection Policy is implemented across all activities undertaken by the Association.

## Section 1 – Child Protection Policy Statement

Skerries Community Association including all of its committees, is committed to a child-centred approach whenever working with children<sup>3</sup> and young people. We undertake to provide a safe environment and experience, where the welfare of the child/young person is paramount. We will adhere to the recommendations of *Children First: National Guidelines for the Protection and Welfare of Children*, published by the Department of Health and Children. We have procedures covering:

- Code of behaviour for all volunteers
- Reporting of suspected or disclosed abuse (see Appendix 1 for categories of abuse)
- Confidentiality
- Recruitment and selecting volunteers incl. Garda Vetting where appropriate
- Managing and training volunteers
- Involvement of primary carers
- Allegations of misconduct or abuse by volunteers
- Complaints and comments
- Incidents and accidents

This policy statement was adopted by on ddmmyyyy

Signed by Chairperson/Child Protection Officer \_\_\_\_\_

Committee \_\_\_\_\_

Date: \_\_\_\_\_

<sup>3</sup> The Child Care Act 1991 defines a child as a 'person under the age of 18 years other than a person who is or has been married' (S.2.1).

## Section 2 – Code of behaviour for Volunteers

The code of behaviour can be categorised under the following headings:

- A.** Child-centred approach
- B.** Good practice
- C.** Inappropriate behaviour
- D.** Physical contact
- E.** Health and safety

### ***A. Child-centred approach***

- Treat all children and young people equally
- Listen to and respect children and young people;
- Involve children and young people in decision-making, as appropriate;
- Provide encouragement, support and praise (regardless of ability);
- Use appropriate language (physical and verbal);
- Have fun and encourage a positive atmosphere;
- Offer constructive criticism when needed;
- Treat all children and young people as individuals;
- Respect a child's or young person's personal space;
- Discuss boundaries on behaviour and related sanctions, as appropriate, with children and young people and their primary carers;
- Agree group 'contract' before beginning session;
- Encourage feedback from group;
- Use age-appropriate teaching aids and materials;
- Lead by example;
- Be aware of a child's or young person's other commitments when scheduling rehearsals or activities, e.g., school or exams;
- Be cognisant of a child's or young person's limitations, due to a medical condition for example;
- Create an atmosphere of trust;
- Respect differences of ability, culture, religion, race and sexual orientation.

### ***B. Good practice***

- Have emergency procedures in place and make all volunteers aware of these procedures;
- Be inclusive of children and young people with special needs;
- Plan and be sufficiently prepared, both mentally and physically;
- Ensure primary carers, children/young people, visitors and facilitators are made aware of the Child Protection Policy and procedures;
- Ensure Parent/Guardian consent forms are completed for relevant activities;
- Report any concerns to the Designated Person and follow reporting procedures;
- Encourage children and young people to report any bullying, concerns or worries and to be aware of anti-bullying practices.
- Observe appropriate dress and behaviour;
- Evaluate work practices on a regular basis;
- Provide appropriate training for volunteers;
- Report and record any incidents and accidents;
- Update and review policies and procedures regularly;

- Keep primary carers informed of any issues that concern their children;
- Ensure proper supervision based on adequate ratios according to age, abilities and activities involved;
- Don't be passive in relation to concerns, i.e., don't 'do nothing';
- Don't let a problem get out of control;
- Avoid taking an event/activity on your own. If this is not possible then it should be in an open environment with the full knowledge and consent of primary carers
- Maintain awareness around language and comments made. If you think that something you said may have caused offence or upset, then try to address it in a sensitive manner

### ***C. Inappropriate Behaviour***

- Avoid spending excessive amounts of time alone with children/young people;
- Don't use or allow offensive or sexually suggestive physical and/or verbal language<sup>4</sup>.
- Don't single out a particular child/young person for unfair favouritism, criticism, ridicule, or unwelcome focus or attention;
- Don't allow/engage in inappropriate touching of any form;
- Don't hit or physically chastise children/young people;
- Don't socialise inappropriately with children/young people, e.g., outside of structured organisational activities

### ***D. Physical Contact***

- Seek consent of child/young person in relation to physical contact (except in an emergency or a dangerous situation);
- Avoid horseplay or inappropriate touch;
- Check with children/young people about their level of comfort when doing touch exercises

### ***E. Health and safety (more information in Health & Safety File – see SCA Health and Safety Policy)***

- Don't leave children unattended or unsupervised;
- Manage any dangerous materials;
- Provide a safe environment;
- Be aware of accident procedure and follow accordingly.

## Section 3 – Reporting procedures

### *Who to contact about issues related to child protection and welfare*

Names and contact details of designated person(s) to contact if you have an issue or concern about any aspect of a child's or young person's safety and welfare are in the box below. It is the responsibility of this person to support and advise volunteers about policy and procedures in relation to child protection and to ensure that procedures are followed.

It is also the responsibility of the Designated Person to liaise with the Health Service Executive /Túsia or Gardaí where appropriate.

[Name] can be contacted on mobile number [phone number]

[Name] has been designated as deputy Designated Person and can be contacted on [phone No.]

The following excerpt from *Children First: National Guidelines for the Protection and Welfare of Children* (4.3.2 - p.38) shows what would constitute reasonable grounds for concern:

- i. specific indication from the child or young person that s/he has been abused;
- ii. an account by a person who saw the child/young person being abused;
- iii. evidence, such as an injury or behaviour, which is consistent with abuse and unlikely to be caused another way
- iv. an injury or behaviour which is consistent both with abuse and with an innocent explanation but where there are corroborative indicators supporting the concern that it may be a case of abuse [an example of this would be a pattern of injuries, an implausible explanation, other indications of abuse, dysfunctional behaviour];
- v. consistent indication, over a period of time, that a child is suffering from emotional or physical neglect.

### *Recording Procedures*

[Name] Committee has an incident book which is kept [in the Child Protection File] located/ in the custody of [place/name]

The incident book is used for recording concerns about the protection of children and young people, e.g., an incident book. They should be stored securely and confidentiality should be maintained (see Section 4: Confidentiality statement).

Volunteers should record the following information in relation to children and young people:

- Suspicions;
- Concerns;
- Worrying observations;
- Behavioural changes;
- Actions and outcomes

### *Dealing with a disclosure*

- Stay calm and listen to the child/young person, allow him or her enough time to say what s/he needs to say;
- Don't use leading questions or prompt details;
- Reassure the child/young person but do not promise to keep anything secret;
- Don't make the child/young person repeat the details unnecessarily;
- Explain to the child/young person what will happen next (explanation should be age-appropriate).

### *Reporting procedures*

- Record all details, including the date, time and people involved in the concern or disclosure and the facts (for example in an incident book). Information recorded should be factual. Any opinions should be supported by facts;
- Actions and outcomes should be noted;
- The information should be recorded in the language used by the child – use their quoted words in the document rather than formal language
- The person who expresses the concern should be involved and kept informed
- Inform the Designated Person or his or her deputy, if unavailable;
- The most appropriate person should discuss the concern or consult with primary carers. Parents, carers or responsible adults should be made aware of a report to Tusla Health Service Executive unless it is likely to put the child/young person at further risk
- The Designated Person may contact the Health Service Executive Duty Social Work Department for an informal consultation prior to making a report
- Information will be shared on a strictly 'need to know' basis (see Section 4: Confidentiality statement);
- If there are reasonable grounds for concern as outlined above, the designated person will contact the Duty Social Worker in the Health Service Executive area using the standard reporting form available. (see Appendix 3 for sample form) Reports to the Duty Social Worker can be made verbally initially and then followed by the standard reporting form. Reports should be made to the Health Service Executive without delay
- If the Designated Person or Deputy Designated Person is not available, contact the local Duty Social Worker of the Health Service Executive directly;
- In case of emergencies outside of Health Service Executive Social Work Department hours, contact the Gardaí. In situations that threaten the immediate safety of a child/young person, it may be necessary to contact the Gardaí.



## Section 4 – Confidentiality statement

We in [Name of Committee] are committed to ensuring peoples' rights to confidentiality. However, in relation to child protection and welfare we undertake that:

- Information will only be forwarded on a 'need to know' basis in order to safeguard the child/young person;
- Giving such information to others for the protection of a child or young person is not a breach of confidentiality;
- We cannot guarantee total confidentiality where the best interests of the child or young person are at risk;
- Primary carers, children and young people have a right to know if personal information is being shared and/or a report is being made to Tusla/the Health Service Executive, unless doing so could put the child/young person at further risk;
- Images of a child/young person will not be used for any reason without the consent of the parent/carer (however, we cannot guarantee that cameras/videos will not be used at public performances);
- Procedures will be put in place in relation to the use of images of children/ young people;
- Procedures will also be put in place for the recording and storing of information in line with our confidentiality policy.

## Section 5 – Recruiting and selecting volunteers incl. Garda vetting

### *Recruitment Policy statement*

We will ensure that volunteers working directly with children and vulnerable adults are carefully selected and trained to provide a safe environment for all children and young people, by observing the following principles:

- Roles and responsibilities will be clearly defined for every role;
- We will endeavour to select the most suitably qualified personnel;
- Any volunteers working directly with children or young people for a given length of time e.g. workshops, will be asked to complete a Declaration form (Appendix 4) This form will be kept on file for 5 years
- No person who would be deemed to constitute a 'risk' will be accepted;
- Some of the exclusions would include:
  - any child-related convictions
  - refusal to participate in training
  - insufficient documentary evidence of identification where a personal recommendations is not available
  - concealing information on one's suitability to working with children;

## *Garda Vetting*

It is a legal requirement for a relevant organisation to receive a vetting disclosure from National Vetting Bureau, for any person who will undertake relevant work or activities on behalf of the affiliate.

Relevant Work or Activities – means any work or activity which is carried out by a person where a necessary and regular part of the work consists mainly of the person having access to, or contact with children or vulnerable adults.

The e-Vetting process is carried out online following the completion by the person to be vetted of an Inviter Form in hard copy. The application process is administered by the designated SCA Vetting Contact person who will submit the completed Inviter Form for processing via the Liaison Person (Fingal Volunteer Centre acts as Liaison Person for SCA).

## Section 6 - Managing and training volunteers

### *Volunteer Management policy statement*

To protect both volunteers and children/young people, we undertake that:

All volunteers will:

- Take part in a mandatory induction training session;
- Be made aware of the organisation's code of conduct, child protection procedures, and the identity and role of who has been designated to deal with issues of concern;
- Be expected to have read and signed the Child Protection Policy Statement;
- Be provided with child protection training.

## Section 7 – Involvement of primary carers

### *Policy statement on the involvement of primary carers*

We are committed to being open with all primary carers.

We undertake to:

- Advise primary carers of our child protection policy;
- Inform primary carers and schools of all activities and potential activities;
- Issue contact/consent forms where relevant;
- Comply with health and safety practices;
- Operate child-centred policies in accordance with best practice;
- Adhere to our recruitment guidelines;
- Ensure as far as possible that the activities are age-appropriate;
- Encourage and facilitate the involvement of parent(s), carer(s) or responsible adult(s), where appropriate.

If we have concerns about the welfare of the child/young person, we will:

- Respond to the needs of the child or young person;

- Inform the primary carers on an on-going basis unless this action puts the child or young person at further risk;
- Where there are child protection and welfare concerns we are obliged to pass these on to the Duty Social Worker and, in an emergency, the Gardaí;
- In the event of a complaint against a member of volunteer, we will immediately ensure the safety of the child/young person and inform primary carers as appropriate.

We are committed to putting the interest of the child/young person first. To that end we will:

- Contact local Tusla/Health Service Executive and Gardaí where there is a child protection welfare concern;
- Have a designated contact person available for consultation with primary carers in the case of any concern over a child or young person's welfare.

## Section 8 – Dealing with allegations against volunteers

In the event of allegations being made against a volunteer, the protection of the child/young person is the first and paramount consideration.

The [Name] Committee has a dual responsibility in respect of both the child/young person and volunteer.

An allegation against a volunteer should be assessed promptly and carefully. If reasonable grounds for concern exist, a formal report to the Health Service Executive should be made. The reporting procedures outlined in Section 3 of this policy document should be followed.

[Name] Committee should maintain a close liaison with the Health Service Executive and the Gardaí. They should also ensure that their actions do not undermine or frustrate any assessment or investigation by Health Service Executive and the Gardaí.

[Name] Committee may want to seek legal advice on procedures or protocol to deal with allegations against volunteers.

Two separate procedures must be followed:

1. In respect of the child/young person [Name of person] will deal with issues related to the child/young person.
2. In respect of the person against whom the allegation is made [Name] will deal with issues related to the volunteer.
  - The first priority is to ensure that no child or young person is exposed to unnecessary risk;
  - If allegations are made against the Designated Person, then the Deputy Designated Person should be contacted;
  - The reporting procedures outlined in Section 3 of these guidelines should be followed. Both the primary carers and child/young person should be informed of actions planned and taken. The child/young person should be dealt with in an age-appropriate manner;
  - The volunteer will be informed as soon as possible:
    - of the nature of the allegation;
    - the volunteer should be given the opportunity to respond;
  - The chairperson/head of the organising committee should be informed as soon as possible;
  - Any action following an allegation of abuse against an employee should be taken in consultation with Health Service Executive and Gardaí;
  - After consultation, the chairperson/head of organising committee should advise the person accused and agreed procedures will be followed.

## Section 9 – Complaints and comments procedures

### *In the event of complaints or comments:*

- Complaints or comments will be responded to within 2 weeks;  
[Name] has responsibility for directing complaints/comments to the appropriate person;
- Verbal complaints will be logged and responded to.

## Section 10 – Accidents procedure

All the procedures for accidents and incidents are clearly described in the Health & Safety File.

Key points to note are:

- External organisations with whom [Name] Committee has dealings must provide proof that they have public liability insurance;
- Availability of first-aid should be in accordance with the organising committee's Health and Safety guidelines. The location of accident/incident books must be known to volunteers
- Children and young people must be advised of risks of dangerous material;
- Record details of risky equipment used and take steps to minimise risk; (see risk assessments)

## Appendix 1: Definitions of abuse

There are four main categories of abuse as outlined in *Children First: National Guidelines for the Protection and Welfare of Children*. The following is a synopsis of the information contained in that document. For the full definitions please refer to *Children First: National Guidelines for the Protection and Welfare of Children* 1993 (pp.32-34).

### 1. Neglect

"Neglect can be defined as being where the child suffers significant harm or impairment of development by being deprived of food, clothing, warmth, hygiene, intellectual stimulation, supervision and safety, attachment to and affection from adults, medical care....The threshold of significant harm is reached when the child's needs are neglected to the extent that his or her well-being and/or development are severely affected." (*Children First* p.31)

### 2. Emotional abuse

Emotional abuse usually happens where there is a relationship between a carer and a child rather than as a specific incident or incidents. "Unless other forms of abuse are present, it is rarely manifested in terms of physical signs or symptoms." (*Children First* p.31)

Rather, it can manifest in the child's behaviour or physical functioning. Examples of these include 'anxious' attachment, unhappiness, low self-esteem, educational and developmental underachievement and uncooperative or hostile behaviour.

"The threshold of significant harm is reached when interaction is predominantly abusive and become typical of the relationship between the child and the parent/ carer." (*Children First* p.32)

Examples of emotional abuse in children include:

- Imposition of negative attributes on children, expressed by persistent criticism, sarcasm, hostility or blaming;
- Emotional unavailability by the child's parent/carer;
- Unresponsiveness, inconsistent or inappropriate expectations of the child;
- Premature imposition of responsibility on the child;
- Unrealistic or inappropriate expectations of the child's capacity to understand something or to behave and control him/herself in a certain way;
- Under or over-protection of the child;
- Use of unreasonably harsh discipline;
- Exposure to domestic violence.

### 3. Physical abuse

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

- Shaking;
- Use of excessive force in handling;
- Deliberate poisoning;
- Suffocation;
- Allowing or creating a substantial risk of significant physical harm to a child.

### 4. Sexual abuse

Sexual abuse involves the use of a child for gratification or sexual arousal by a person for themselves or others. Examples of sexual abuse include:

- Exposure of the sexual organs or any sexual act intentionally performed in the presence of a child;
- Intentional touching or molesting of the body of a child whether by a person or object for the purpose of sexual arousal or gratification;
- Masturbation in the presence of the child or involvement of the child in an act of masturbation;
- Sexual intercourse with a child whether oral, vaginal or anal;
- Sexual exploitation of a child... may also include showing sexually explicit material to children which is often a feature of the 'grooming' process by perpetrators of abuse;
- Consensual sexual activity involving an adult and an under-age person.

## Appendix 2: List of Tusla/Health Service Executive Area Social Work Department Contact Details

Duty Social Work Department, 180-189 Lakeshore Drive, Airside Business Park, Swords, Co. Dublin.

Phone 01 8708000

## Appendix 3

The Standard Reporting Form and guidance can be accessed at:

<http://www.tusla.ie/children-first/publications-and-forms>



## Appendix 4

### *Confidential Declaration form for all those working with children and young people.*

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_

Address: \_\_\_\_\_

Tel. No: \_\_\_\_\_ Mobile No: \_\_\_\_\_

Any other name(s) previously known as: \_\_\_\_\_

Is there any reason that you would be considered unsuitable to work with children and young people?                      Yes                      No

If yes, please outline the reason below.

Have you ever been convicted of a criminal offence?                      Yes                      No

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

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

## Appendix 5

### **Skerries Community Association Consent Form**

EVENT ..... DATE(S) .....

VENUE .....

All participants who are under the age of 18 on the date of the event must hand in a fully completed Health and Consent Form in advance to: .....

#### **To be completed by the parent/guardian of any participant who is under 18**

Full name of participant: .....

Date of birth: .....

Address: .....  
.....

Home telephone number: .....

Parent/ Guardian's Name: .....

Parent/ Guardian's emergency contact telephone number: .....

#### **Photography and images of children**

During your child's participation in the event we may wish to take photographs of activities that involve your child. The photographs may be used for displays, publications and on a web-site by us or by the media.

When filming or photography is carried out by the news media, children will only be named if there is a particular reason to do so (e.g. they have won a prize), and home addresses will never be given out. Images that might cause embarrassment or distress will not be used nor will images be associated with material on issues that are sensitive.

Before taking any photographs of your child, we need your permission. You can ask to see images of your child held by Skerries Soundwaves Music Festival. You may withdraw your consent at any time.

I understand that:

- the media may take images of activities showing organisers and its participants in a positive light;
- photographers acting on behalf of the SCA ..... Committee may take images for use in displays, in publications or on a website;
- embarrassing or distressing images will not be used

#### **Permissions**

- *I authorise my child to take part in ..... (name of event)*
- *I give my consent for photographs or video of my child to be taken and used as outlined above.*

Signature of person responsible for the child: .....

Name (printed): .....

Relationship to the participant: .....

Date: .....