

Child Protection Policy and Code of Behaviour for Working with Children – Version 2.7

1. INTRODUCTION

The Institute works with children from time to time in a number of areas across a range of activities. The Institute is committed to creating a safe and healthy environment for the children with whom it works and is committed to ensuring their safety and welfare at all times.

The Institute recognises the need to have a child protection policy to help achieve its aims in this regard and to manage risks in this area. Accordingly, it produced a Policy based on “*Children First – National Guidelines for the Protection and Welfare of Children*” and “*Our Duty to Care – The Principles of Good Practice for the Protection of Children and Young People*”.

This version of the Policy has been updated to take account of the 2017 edition of *Children First* as well as requirements under the Children First Act 2015. This Act places specific obligations on organisations which provide services to children and young people, including the requirement to:

- Keep children safe from harm;
- Carry out a risk assessment to identify whether a child or young person could be harmed while receiving your services;
- Develop a Child Safeguarding Statement that outlines the policies and procedures which are in place to manage risks – This Policy, which includes a risk assessment at Appendix 1, is intended to be that document for the Institute;
- Appoint relevant persons to be the first point of contact in respect of the organisation’s Child Safeguarding Statement. The Institute’s Child Protection Officers as listed in Section 6 of this Policy are its relevant persons in this regard.

This version has also been prepared in consultation between Cork Institute of Technology and Institute of Technology Tralee with a view to aligning each Institute’s child protection policies and procedures in light of the anticipated merger and designation as a Technological University.

2. SCOPE & RISK ASSESSMENT

This Policy applies to all employees of the Institute or any other person who works with children at the Institute, including contractors (hereafter referred to collectively as “staff”). Everyone to whom this Policy applies should familiarise themselves with it.

Certain parts of the Institute operate from public buildings. The Institute does not supervise its students other than during official class times. Accordingly, there are limits to the extent that the Institute can control who enters the building and may come into contact with children.

As required under the Children First Act 2015, the Institute has carried out a risk assessment to examine all aspects of its service from a child safeguarding perspective to establish whether there are any practices or features that have the potential to put children at risk. Details of this assessment are **attached** at Appendix 1 and will be taken into account when implementing this Policy.

3. DUTY TO REPORT SUSPECTED OR ACTUAL ABUSE

Society has a duty of care towards children and everyone should be alert to the possibility that children with whom they are in contact may be being abused. Any person who suspects that a child is being abused or is at risk of abuse has a duty to report their concerns.

The Protection for Persons Reporting Child Abuse Act 1998 provides significant protections for persons who report child abuse. Please see Section 7 below for more information on this point.

Under the Criminal Justice (Withholding Of Information On Offences Against Children And Vulnerable Persons) Act 2012 it is a criminal offence to withhold information about a serious offence, including a sexual offence, against a person under 18 years or a vulnerable person. The offence arises where a person knows or believes that a specified offence has been committed against a child or vulnerable person and he or she has information which would help arrest, prosecute or convict another person for that offence, but fails without reasonable excuse to disclose that information, as soon as it is practicable to do so, to a member of An Garda Síochána.

The Children First Act 2015 is an important addition to the child welfare and protection system as it will help to ensure that child protection concerns are brought to the attention of Tusla without delay. The Act provides for mandatory reporting of child welfare and protection concerns by key professionals (See Section 6 below).

4. DEFINING AND IDENTIFYING CHILD ABUSE

A “*child*” is defined for the purposes of this Policy as a person under the age of 18 years who is enrolled on a course of study at the Institute or otherwise in attendance on its premises in connection with the activities of the Institute, excluding a person who is or has been married.

Child abuse can be categorised into four categories, namely:

- Neglect;
- Emotional abuse;
- Physical abuse; and
- Sexual abuse.

Neglect

“*Neglect*” occurs when a child does not receive adequate care or supervision to the extent that the child is harmed physically or developmentally. It is generally defined in terms of an omission of care, where a child’s health, development or welfare is impaired by being deprived of food, clothing, warmth, hygiene, medical care, intellectual stimulation or supervision and safety. Emotional neglect may also lead to the child having attachment difficulties. The extent of the damage to the child’s health, development or welfare is influenced by a range of factors. These factors include the extent, if any, of positive influence in the child’s life as well as the age of the child and the frequency and consistency of neglect.

Neglect is associated with poverty but not necessarily caused by it. It is strongly linked to parental substance misuse, domestic violence, and parental mental illness and disability.

A reasonable concern for the child’s welfare would exist when neglect becomes typical of the relationship between the child and the parent or carer. This may become apparent where a child is seen over a period of time, or the effects of neglect may be obvious based on having seen the child once.

The following are features of child neglect:

- Children being left alone without adequate care and supervision;
- Malnourishment, lacking food, unsuitable food or erratic feeding;
- Non-organic failure to thrive, i.e. a child not gaining weight due not only to malnutrition but also emotional deprivation;
- Failure to provide adequate care for the child’s medical and developmental needs, including intellectual stimulation;
- Inadequate living conditions – unhygienic conditions, environmental issues, including lack of adequate heating and furniture;
- Lack of adequate clothing;
- Inattention to basic hygiene;
- Lack of protection and exposure to danger, including moral danger, or lack of supervision appropriate to the child’s age;
- Persistent failure to attend school;
- Abandonment or desertion.

The Children First Act 2015 defines “*neglect*” as “*to deprive the child of adequate food, warmth, clothing, hygiene, supervision, safety or medical care.*”

Emotional Abuse

“*Emotional abuse*” is the systematic emotional or psychological ill-treatment of a child as part of the overall relationship between a caregiver and a child. Once-off and occasional difficulties between a parent/carer and child are not considered emotional abuse. Abuse occurs when a child’s basic need for attention, affection, approval, consistency and security are not met, due to incapacity or indifference from their parent or caregiver. Emotional abuse can also occur when adults responsible for

taking care of children are unaware of and unable (for a range of reasons) to meet their children's emotional and developmental needs. Emotional abuse is not easy to recognise because the effects are not easily seen.

A reasonable concern for the child's welfare would exist when the behaviour becomes typical of the relationship between the child and the parent or carer.

Emotional abuse may be seen in some of the following ways:

- Rejection
- Lack of comfort and love
- Lack of attachment
- Lack of proper stimulation (e.g. fun and play)
- Lack of continuity of care (e.g. frequent moves, particularly unplanned)
- Continuous lack of praise and encouragement
- Persistent criticism, sarcasm, hostility or blaming of the child
- Bullying
- Conditional parenting in which care or affection of a child depends on his or her behaviours or actions
- Extreme overprotectiveness
- Inappropriate non-physical punishment (e.g. locking child in bedroom)
- Ongoing family conflicts and family violence
- Seriously inappropriate expectations of a child relative to his/her age and stage of development

There may be no physical signs of emotional abuse unless it occurs with another type of abuse. A child may show signs of emotional abuse through their actions or emotions in several ways. These include insecure attachment, unhappiness, low self-esteem, educational and developmental underachievement, risk taking and aggressive behaviour.

It should be noted that no one indicator is conclusive evidence of emotional abuse. Emotional abuse is more likely to impact negatively on a child where it is persistent over time and where there is a lack of other protective factors.

Physical Abuse

"*Physical abuse*" of a child is when someone deliberately hurts a child physically or puts them at risk of being physically hurt. It may occur as a single incident or as a pattern of incidents. A reasonable concern exists where the child's health and/ or development is, may be, or has been damaged as a result of suspected physical abuse.

Physical abuse can include the following:

- Physical punishment;
- Beating, slapping, hitting or kicking;
- Pushing, shaking or throwing;
- Pinching, biting, choking or hair-pulling;
- Use of excessive force in handling;
- Deliberate poisoning;
- Suffocation;

- Fabricated/induced illness;
- Female genital mutilation.

The Children First Act 2015 includes a provision that abolishes the common law defence of reasonable chastisement in court proceedings. This defence could previously be invoked by a parent or other person in authority who physically disciplined a child. The change in the legislation now means that in prosecutions relating to assault or physical cruelty, a person who administers such punishment to a child cannot rely on the defence of reasonable chastisement in the legal proceedings. The result of this is that the protections in law relating to assault now apply to a child in the same way as they do to an adult.

Sexual Abuse

“*Sexual abuse*” occurs when a child is used by another person for his or her gratification or arousal, or for that of others. It includes the child being involved in sexual acts (masturbation, fondling, oral or penetrative sex) or exposing the child to sexual activity directly or through pornography.

Child sexual abuse may cover a wide spectrum of abusive activities. It rarely involves just a single incident and in some instances occurs over a number of years. Child sexual abuse most commonly happens within the family, including older siblings and extended family members.

Cases of sexual abuse mainly come to light through disclosure by the child or his or her siblings/friends, from the suspicions of an adult, and/or by physical symptoms.

Examples of child sexual abuse include the following:

- Any sexual act intentionally performed in the presence of a child;
- An invitation to sexual touching or intentional touching or molesting of a child’s body whether by a person or object for the purpose of sexual arousal or gratification;
- Masturbation in the presence of a child or the involvement of a child in an act of masturbation;
- Sexual intercourse with a child, whether oral, vaginal or anal;
- Sexual exploitation of a child, which includes:
- Inviting, inducing or coercing a child to engage in prostitution or the production of child pornography [for example, exhibition, modelling or posing for the purpose of sexual arousal, gratification or sexual act, including its recording (on film, videotape or other media) or the manipulation, for those purposes, of an image by computer or other means;
- Inviting, coercing or inducing a child to participate in, or to observe, any sexual, indecent or obscene act;
- Showing sexually explicit material to children, which is often a feature of the ‘grooming’ process by perpetrators of abuse;
- Exposing a child to inappropriate or abusive material through information and communication technology;
- Consensual sexual activity involving an adult and an underage person.

Please Note: The definition of child sexual abuse presented above is not a legal definition and is not intended to be a description of the criminal offences relating to sexual assault.

5. RECOGNISING ABUSE/NEGLECT & REASONABLE GROUND FOR CONCERN

The ability to recognise child abuse can depend as much on a person's willingness to accept the possibility of its existence as it does on their knowledge and information.

The possibility of child abuse should be considered if a child appears to have suffered a suspicious injury for which no reasonable explanation can be offered. It should also be considered if the child seems distressed without obvious reason or displays persistent or new behavioural problems. The possibility of child abuse should also be considered if the child displays unusual or fearful responses to parents/carers or older children. A pattern of ongoing neglect should also be considered even when there are short periods of improvement.

Signs of neglect or abuse can be physical, behavioural or developmental. They can exist in the relationships between children and parents/carers or between children and other family members/other persons. A cluster or pattern of signs is more likely to be indicative of neglect or abuse. Children who are being abused may hint that they are being harmed and sometimes make direct disclosures.

A person who has reasonable grounds for concern that a child may have been abused, or is being abused, or is at risk of abuse should report their concerns in accordance with Section 7 of this Policy.

The following examples would constitute reasonable grounds for concern:

- Evidence, for example an injury or behaviour, that is consistent with abuse and is unlikely to have been caused in any other way
- Any concern about possible sexual abuse
- Consistent signs that a child is suffering from emotional or physical neglect
- A child saying or indicating by other means that he or she has been abused
- Admission or indication by an adult or a child of an alleged abuse they committed
- An account from a person who saw the child being abused

Some children may be more vulnerable to abuse than others. Also, there may be particular times or circumstances when a child may be more vulnerable to abuse in their lives. In particular, children with disabilities, children with communication difficulties, children in care or living away from home, or children with a parent or parents with problems in their own lives may be more susceptible to harm.

While in most cases concerns for the welfare or safety of a child develop from your own observation or knowledge of the child or their family, sometimes concerns arise about whether an adult may pose a risk to children, even if there is no specific child named in relation to the concern. For example, based on known or suspected past behaviour, a concern could exist about the risk an individual may pose to children

with whom they may have contact. Any such reasonable concerns should be reported to Tusla, who will try to establish whether or not any child is currently at risk from the individual in question.

6. THE CHILD PROTECTION OFFICER & ‘MANDATED PERSONS’

Child Protection Officer

A Child Protection Officer (“CPO”) at the Institute is a designated liaison/relevant person for the purposes of *Children First* with responsibility for ensuring that this Policy is promoted and implemented within a given area of the Institute. Deputy Child Protection Officers will take over the responsibilities of a CPO if that person is unavailable for a significant amount of time.

CPOs are nominated by the President of the Institute.

The role of the CPO involves the following duties:

- To be familiar with this Policy, the principles of good practice for the protection of children and to have responsibility for the implementation and monitoring of this Policy;
- To receive reports of alleged/suspected or actual child abuse and act on these in accordance with this Policy;
- To build a working relationship with the Child and Family Agency, Tusla An Garda Síochána and other agencies, as appropriate;
- To ensure that systems are in place for recording and retaining all relevant documentation in relation to child protection issues.

Child Protection Officers

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The Institute will arrange for adequate notices to be erected to display the identity and contact details of its CPOs and Deputy CPOs.

Mandated Persons

The Children First Act 2015 introduced (with effect from 11 December 2017) new mandatory requirements on certain key professionals to report concerns to Tusla. These key professionals are defined under that Act as “*Mandated Persons*”. A full list of these persons is **attached** at Appendix 3. Mandated Persons must also assist Tusla, on request, in its assessment of child protection concerns.

The obligations on Mandated Persons arise where he/she “*knows, believes or has reasonable grounds to suspect, on the basis of information that he or she has received, acquired or becomes aware of in the course of his or her employment or profession as such a mandated person.*”

The Institute has considered the definition in the context of its ‘staff’ (which includes on site contractors as per earlier definition) and has identified the following positions as falling under the statutory definition of a ‘Mandated Person’:

- Doctors and nurses in the Institute’s Medical Centre;
- Student Counsellors;
- The Institute’s Chaplain;
- Paramedic members of the Institute’s Emergency Response Team.

The Institute will maintain a register of Mandated Persons on its staff through its HR Office. If a person believes that their role should also be included on this register, they should contact HR.

Mandated Persons are required under the legislation to report to Tusla any knowledge, belief or reasonable suspicion arising from the work as such a mandated person that a child has been harmed, is being harmed, or is at risk of being harmed. The Act defines harm as assault, ill-treatment, neglect or sexual abuse, and covers single and multiple instances.

The reporting requirements under the Children First Act 2015 apply only to information that a Mandated Person, received or became aware of since the Act came into force. However, if a Mandated Person has a reasonable concern about past abuse, where the information came to their attention before the Act and there is possible continuing risk to children, the Mandated Person should report it to Tusla.

If a Mandated Person is providing counselling, it is recommended by Tusla to let clients know, before the counselling starts, that if any child protection issues arise and the alleged perpetrator is identifiable, it must be passed on to Tusla.

Tusla has set out in the latest (2017) version of *Children First* the threshold of harm for each category of abuse at which mandated persons have a legal obligation to report concerns, as follows:

- Neglect: where reasonable grounds exists to suspect that a child’s needs have been neglected, are being neglected, or are at risk of being neglected to the point where **the child’s health, development or welfare have been or are being seriously affected, or are likely to be seriously affected.**
- Emotional Abuse: where reasonable ground exists to suspect that a child has been, is being, or is at risk of being ill-treated to the point where **the child’s health, development or welfare have been or are being seriously affected, or are likely to be seriously affected.**

- Physical Abuse: where reasonable ground exists to suspect that a child has been, is being, or is at risk of being assaulted and that as a result **the child's health, development or welfare have been or are being seriously affected, or are likely to be seriously affected.**
- Sexual Abuse: If a Mandated Person knows, believes or has reasonable grounds to suspect that a child has been, is being, or is at risk of being sexually abused, then this must be reported this to Tusla under the Children First Act 2015. Sexual abuse to be reported under the Children First Act 2015 is defined as an offence against the child, as listed in Schedule 3 of the Children First Act 2015. As all sexual abuse falls within the category of **seriously affecting a child's, health, welfare or development**, you must submit all concerns about sexual abuse as a mandated report to Tusla. There is one exception, which deals with certain consensual sexual activity between teenagers, under section 14(3) of the Children First Act 2015. All of the following criteria must be met for this exception to apply:
 - The young person(s) concerned are between 15 and 17 years old;
 - The age difference between them is not more than 24 months;
 - There is no material difference in their maturity or capacity to consent;
 - The relationship between the people engaged in the sexual activity does not involve intimidation or exploitation of either person;
 - The young persons concerned state clearly that they do not want any information about the activity to be disclosed to Tusla.

If a Mandated Person receives a disclosure of harm from a child, which is above the thresholds set out above, a mandated report of the concern must be made to Tusla. **The Mandated Person is not required to judge the truth of the claims or the credibility of the child.** If the concern does not meet the threshold to be reported as a mandated concern, it should still be reported to Tusla as a reasonable concern under *Children First*.

Mandated Persons and the Institute

It is important to note that the statutory obligation of Mandated Persons to report under the Children First Act 2015 must be discharged by the Mandated Person and cannot be discharged by the Institute's CPOs on their behalf. While Mandated Persons have statutory obligations to report mandated concerns, they may make a report jointly with another person, whether the other person is a mandated person or not. In effect, this means that a mandated person can make a joint report with a CPO.

Where a Mandated Person receives information relating to a child protection concern that is relevant to the Institute, they should consider reporting it to a CPO as well as Tusla.

7. REPORTING PROCEDURE IN RESPECT OF CONCERNS

Everyone must be alert to the possibility that children with whom they are in contact may be experiencing abuse or have been abused in the past.

The guiding principles in regard to reporting children abuse is that the safety and well-being of the child must take priority.

The reporting procedure for dealing with disclosures, concerns or allegations of child abuse is as follows:

- Any person who has received a disclosure of child abuse or who has concerns of abuse should bring it to the attention of a CPO immediately.
- A Mandated Person may also receive a disclosure or have a concern in the course of their work/profession.
- The CPO/Mandated Person should assess and review the information that has been provided. In the event of that the information has been received by a CPO, the CPO will inform the Vice President for Finance & Administration of the Institute of the matter.
- The CPO/Mandated Person should contact Tusla for informal advice relating to the allegation, concern or disclosure.
- A Mandated Person should also consider reporting the matter to a CPO as well as Tusla if the concern is relevant to the Institute.
- After consultation with Tusla officials, the CPO/Mandated Person must formally report the allegation, concern or disclosure to Tusla, unless it comes within one of the exceptions under the Children First Act 2015. Appropriate advice should be sought from on Tusla and/or the Institute's Legal Officer in relation to whether any such exception applies.
- The CPO and Mandated Person can consider making a joint report to Tusla. In situations where a joint report is to be made, the responsibility for contacting Tusla for informal advice (as above) falls to the party who first received the disclosure.
- In the event that the matter is not formally reported, the reasons for not doing so should be clearly recorded by the CPO/Mandated Person.
- Where a formal report is made to Tusla, Tusla should then liaise with An Garda Síochána. It is likely that t Tusla will want to speak to the person who first made the report to clarify facts and the circumstances of the report.
- Parents/guardians of the child should be informed of the allegation, concern or disclosure unless doing so is likely to endanger the child.

In cases of emergency where a child appears to be at immediate risk and Tusla is unavailable, An Garda Síochána should be contacted. Under no circumstances should a child be left in a dangerous situation pending intervention by Tusla.

Retrospective Allegations

The 2017 edition of Children First states the following in relation to the issue of dealing with retrospective allegations:

“Some adults may disclose abuse that took place during their childhood. Such disclosures may come to light when an adult attends counselling, or is being treated for a psychiatric or health problem. If you are, for example, a counsellor or health professional, and you receive a disclosure from a client that they were abused as a child, you should report this information to Tusla, as the alleged abuser may pose a current risk to children.

If, as a mandated person, you provide counselling, it is recommended that you let your clients know, before the counselling starts, that if any child protection issues arise and the alleged perpetrator is identifiable, you must pass the information on to Tusla. If your client does not feel able to participate in any investigation, Tusla may be seriously constrained in their ability to respond to the retrospective allegation.

The reporting requirements under the Children First Act 2015 apply only to information that you, as a mandated person, received or became aware of since the Act came into force, whether the harm occurred before or after that point. However, if you have a reasonable concern about past abuse, where information came to your attention before the Act and there is a possible continuing risk to children, you should report it to Tusla under this Guidance.”

The Institute sought and received clarification from Tusla as to the obligations (if any) individuals other than Mandated Persons have in relation to disclosures about retrospective/historical abuse, and if there are no such legal obligations, what advice Tusla has in relation to best practice in this regard. This is the response received from Tusla:

“it would be best practice that all non-mandated staff report any concerns to their [CPO] this would include any retrospective disclosures of abuse. There is no legally obligation on non mandated persons to report to Tusla but staff should be expected to follow their organisation's child protection policies and reporting procedure.”

Therefore, a Mandated Person who receives a disclosure in relation to retrospective/historical abuse where there is a possibility of a continuing risk to children should report it to Tusla either by themselves or by way of a joint report with a CPO as set out above.

A person other than a Mandated Person who receives a disclosure in relation to retrospective/historical abuse and there is a possibility of a continuing risk to children should report the matter to a CPO as set out in this section.

Students on Placement

The Institute sought and received clarification from Tusla as to the status of students on placement in professions that may be relevant to those of a Mandated Person, and the best practice for such students in terms of whether they should raise any child

protection concerns that come to their attention under the Institute's policy and procedures, or those of their placement organisation.

This is the advice provided to the Institute by Tusla in this regard:

“students are not mandated persons...best practice would be that any concerns students have on placement should be reported to the organisation's [CPO] where their placement is happening, however the college should have a policy that if student's concerns are not taken seriously and the student remains concerned they can report to their placement officer in their college. It would be important to communicate this policy to students and their placement organisation.”

Therefore, a student on placement should first seek to process any child protection concerns under the policy and procedures of their placement organisation. However, if they are not satisfied that the matter is being addressed in that way, the concern may be reported to the Institute under this Policy.

Departments within the Institute whose students go out on placement should inform students of this best practice advice from Tusla, and also liaise with the placement organisations themselves to ensure they are also aware of this advice.

Standard Reporting Form & Information Required When Making a Report

The Institute has adopted a standard reporting form (see Appendix 2) for making reports concerning child abuse internally to a CPO. The more detail that is included in this form, the easier it will be to assess an allegation, concern or disclosure of abuse.

Reports which are made anonymously will be followed up but this may take longer and will make it more difficult for the professionals involved to assess the situation.

Tusla has two forms for reporting child protection and welfare concerns to it – the Child Protection and Welfare Report Form (CPWRF) and the Retrospective Abuse Report Form (RARF). The Child Protection and Welfare Report Form is to be completed and submitted to Tusla for concerns about children under the age of 18. A [web portal](#) has been developed for mandated persons to securely submit CPWRFs.

The Retrospective Abuse Report Form is to be completed and submitted to Tusla for cases of adults disclosing childhood abuse. It is not currently possible to submit RARFs using the web portal. Both the CPWRF and RARF can be downloaded from the Tusla website: <http://www.tusla.ie/children-first/publications-and-forms#SRP>

Mandated Persons cannot submit a mandated report to Tusla anonymously. The Children First Act 2015 requires Mandated Persons to report a mandated concern to Tusla “*as soon as practicable*”.

If a person is unsure about a particular case, it may be useful to talk over the issue with a CPO or with a Tusla worker before making an official report.

Confidentiality

In matters of child abuse, a member of staff should never promise to keep secret any information which is divulged. It should be explained that this information cannot be kept secret but only those who need to know will be told.

It is essential in reporting any case of alleged/suspected abuse that the principle of confidentiality applies. The information should only be shared on a ‘need to know’ basis and the number of people that need to be informed should be kept to a minimum.

The Protections for Persons Reporting Child Abuse Act, 1998

This Act provides immunity from civil liability to persons who report child abuse ‘reasonably and in good faith’ to a CPO, Tusla or An Garda Síochána. It is a significant piece of legislation in the context of this Policy.

It provides:

- Immunity from civil liability to persons who report child abuse “*reasonably and in good faith*” to Tusla or An Garda Síochána. This means that if a reported suspicion of child abuse proves unfounded a person who takes an action against a person who made the report would have to prove that the reporter had not acted reasonably and in good faith in making the report.
- Protection for employees from penalisation (including dismissal) by their employers for making a report.

The Act also created an 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 offence was designed to protect innocent persons from malicious reports.

Cases Not Reported to Tusla or An Garda Síochána

In those cases where the Institute decides not to report concerns to Tusla or An Garda Síochána, the individual who raised the concern should be given a clear written statement of the reasons why the organisation is not taking such action. The individual should be advised that if they remain concerned about the situation, they are free as individuals to consult with, or report to, Tusla or An Garda Síochána. The provisions of the Protections for Persons Reporting Child Abuse Act 1998 apply once they communicate ‘reasonably and in good faith’

8. ACTIVITIES INVOLVING TRAVEL & OVERNIGHT STAYS AWAY FROM HOME

Travel

Where a child travels with staff to a class, meeting or other the Institute event, the Institute is responsible for the welfare of the child while travelling and while at the class, meeting or other event. In these instances, parental consent forms must be completed by parents/guardians and a record must be kept of the emergency contact numbers supplied. Parents/guardians should also be asked to provide information in relation to any special needs which the child may have, including diet, medical needs, support needs, etc. A record should also be kept of this information.

It is not recommended that staff give lifts in their cars to individual children, especially for long journeys. Where this is unavoidable, it should be with the consent of the parents/guardians and a senior member of staff at the Institute.

Overnight Stays

The following guidelines shall be observed where the Institute activities involve children staying away from home overnight:

- Adequate and safe transport arrangements must be made;
- Parent/guardian consent must be obtained for each participant, prior to the trip, including information on each participant about the following:
 - Contact details of parent/guardian and another person named by the parent/guardian in the event of the parent/guardian not being available in an emergency
 - All relevant medical information for the participant and consent for medical intervention, if necessary
 - Any special needs which the participant may have, including diet, medical needs, support needs, etc;
- All relevant information including contact details, allergies, medicines, dietary needs etc. for the child must be kept by a member of staff on the trip.
- Parents/guardians will be fully informed of the programme or timetable for the event and should be given a copy of the programme;
- Parents will be given full contact details of the centre/hotel/accommodation and also of the member of staff in charge of the event.
- At least two adults, one male and one female, will accompany children staying away from home overnight. Where only one child is going on the trip, one of the two adults should be a parent or guardian of that child. the Institute will seek to ensure, where reasonably practicable, that there will be a ratio of two adults for every [10] children under the age of [12] on a trip and two adults for every [20] children over the age of [12].

9. DEALING WITH DISCLOSURES OF ABUSE

In the event of a child/ disclosing an incident of abuse it is essential that this is dealt with sensitively and professionally. The following are guidelines to support staff in this regard:

- React calmly;
- Listen carefully and attentively; take the child seriously;
- Reassure the child that they have taken the right action in talking to you;
- Do not promise to keep anything secret;
- Advise that support will be offered but that the information must be passed on;

- Ask questions for clarification only. Do not ask leading questions (i.e. questions which prompt a “yes” or “no” answer);
- Confirm with the child that what you have heard is correct and understood;
- Do not express any opinions about the alleged abuser;
- Do not confront the alleged abuser;
- Record the conversation as soon as possible, in as much detail as possible. Sign and date the record;
- Ensure that the child understands the procedures which will follow in accordance with this Policy;
- Pass the information to a CPO, do not attempt to deal with the problem alone;
- Treat the information confidentially (i.e. ensure that the information is only passed on to those who need to know it).

10. CODE OF BEHAVIOUR BETWEEN STAFF AND CHILDREN

The following safe practice principles should be observed by staff at the Institute:

- Staff should be sensitive to the risks involved in participating in activities that require physical contact with children.
- While the Institute recognises that physical contact with children is sometimes necessary as part of the teaching and learning of certain activities, such as music for example, staff should ensure that such contact is no more than is absolutely necessary in the circumstances.
- While physical contact is a valid way of comforting, reassuring and showing concern for children, it should only take place when it is acceptable to all persons concerned.
- Staff should never physically punish or be in any way verbally abusive to a child, nor should they even tell jokes of an inappropriate or sexual nature in the presence of children.
- Staff should be sensitive to the possibility of developing favouritism.
- While it may be necessary for staff at the Institute to work on a one to one basis with children, staff should not spend excessive amounts of time alone with an individual child.
- Where Staff are providing tuition to a child in one of the studios in the the Institute CSM building, care should be taken to ensure that any window panel allowing others to see into the studio is not obscured in any way.
- Children should be encouraged to report cases of abuse or bullying. Complaints must be brought to the attention of a CPO.
- Everyone at the Institute should respect the personal space, safety and privacy of individuals.
- It is not recommended that staff give lifts in their cars to individual children, especially for long journeys. Where this is unavoidable, it should be with the full consent of the parents/guardians and a senior member of staff at the Institute (See Section 8 of this Policy for more guidance in relation to travelling with children)

11. ALLEGATIONS AGAINST A MEMBER OF STAFF

Where an allegation of abuse is made against a member of staff at the Institute, two distinct procedures will be followed:

- The reporting procedure in respect of the child;
- The procedure for dealing with staff.

The same person will not have responsibility for dealing with the both procedures. The CPO will follow the normal reporting procedure in respect of the child. It will be the responsibility of the Vice President for Finance & Administration at the Institute to deal with the member of staff against whom an allegation has been made in accordance with agreed procedures (such as the Institute's Disciplinary Procedure), the applicable contract of employment and the rules of fair procedure and natural justice.

If there is an allegation or suspicion in relation to a CPO, the Vice President for Finance & Administration will deal with all aspects of the case, including the reporting procedure.

If an allegation is made against a member of staff the following steps will be taken:

- The Vice President for Finance & Administration will deal with all aspects of the case relating to the employment of the member of staff.
- The allegation will be assessed by a CPO to establish if there are reasonable grounds for concern and whether a formal report will be made to the statutory authorities in accordance with Section 7 of this Policy.
- The safety of the child is the first priority and all necessary measures will be taken to ensure that the child is safe. The measures taken will be proportionate to the level of risk.
- The Institute will ensure that no other children are at risk during this period and will inform other relevant agencies or parents/carers as appropriate.
- The measures which can be taken to ensure the safety of children can include the following: immediate suspension of duties on full pay of the person accused, re-assignment of duties where the accused will not have contact with children, working under increased supervision during the period of the investigation or other measures as deemed appropriate.
- If a formal report is being made the Institute will notify the member of staff that an allegation has been made and what the nature of the allegation is. The member of staff has a right to respond to this and this response should be documented and retained.
- The Institute will ensure that the principle of 'natural justice' will apply whereby a person is considered innocent until proven otherwise.
- The Institute will work in co-operation with An Garda Síochána and Tusla and any decisions on action to be taken in regard to the member of staff will be taken in consultation with these agencies. The Institute will seek to ensure that

actions taken do not undermine or frustrate any investigations being conducted by Tusla or An Garda Síochána.

- The person against whom the allegation is made will need support during this period and the Institute will provide advice on how to access the relevant support services.
- Where an allegation is not upheld the Institute will ensure, as far as possible, that the good name and office of the person subject to the allegation is preserved.

12. BULLYING

All children and staff at the Institute should treat each other with dignity and respect. Nobody should engage in or tolerate bullying behaviour.

“*Bullying*” can be defined as repeated aggression be it verbal, psychological or physical which is conducted by an individual or group against others. It is behaviour which is intentionally aggravating and intimidating and occurs mainly among children in social environments such as schools.

Examples of bullying include:

- Teasing;
- Taunting;
- Threatening;
- Hitting;
- Extortion;
- Exclusion;
- Cyber-bullying.

Bullying can also take the form of abuse based on gender identity, sexual preference, race, ethnicity and religious factors. With developments in modern technology, children can also be the victims of non-contact bullying, via mobile phones, the internet and other personal devices.

While bullying can happen to any child, some may be more vulnerable. These include: children with disabilities or special educational needs; those from ethnic minority and migrant groups; from the Traveller community; lesbian, gay, bisexual or transgender (LGBT) children and those perceived to be LGBT; and children of minority religious faiths.

There can be an increased vulnerability to bullying among children with special educational needs. This is particularly so among those who do not understand social cues and/or have difficulty communicating. Some children with complex needs may lack understanding of social situations and therefore trust everyone implicitly. Such children may be more vulnerable because they do not have the same social skills or capacity as others to recognise and defend themselves against bullying behaviour.

The Institute will not tolerate any bullying behaviour and will deal with any incidents immediately.

If a person is the victim of bullying or witnesses or suspects that bullying is taking place he/she should report it to a member of staff.

Instances of suspected bullying where both the alleged victim(s) and alleged(s) perpetrator are children will be dealt with in accordance with the Institute's student regulations.

Instances of suspected bullying where the alleged victim(s) is a member of staff and the alleged perpetrator(s) are children will be dealt with in accordance with the Institute's student regulations.

Instances of suspected bullying where the alleged victim(s) is a child and the alleged perpetrator(s) is a member of staff will be dealt with in accordance with the Institute's Policy on Bullying, Harassment and Victimisation.

The more extreme forms of bullying, when perpetrated by adults rather than children, may be regarded as physical or emotional abuse. Other major forms of child abuse such as neglect and sexual abuse are not normally comprehended by the term bullying. Instances of bullying that may be regarded as physical or emotional abuse may also fall to be dealt in accordance with the procedures outlined elsewhere in this Policy for dealing with child abuse.

In cases of serious instances of bullying where the behaviour is regarded as possibly abusive, you may be referred to Tusla and/or An Garda Síochána.

13. KEEPING PARENTS/GUARDIANS INFORMED

The Institute will keep parents/guardians informed of all aspects of the programme that their child is involved in. The Institute will share information relating to the programme of activities, trips away, transport to and from events, etc. with the parents/guardians. The Institute will inform the child's parents/guardians in the event of a child disclosing an incident of abuse, unless this could put the child in danger.

14. FEEDBACK IN RELATION TO CHILD PROTECTION

The Institute is committed to ensuring the safety and welfare of all children. The Institute welcomes comments from staff, children and their parents/guardians in relation to this Policy.

15. VETTING & TRAINING

Vetting

The Institute carries out Garda vetting in relation to its employees, which can help identify potential child protection risks and allow the Institute to assess a person's suitability to work with children,. The Institute will also seek to introduce additional

checks and procedures in relation to the engagement of on-site contractors to ensure appropriate vetting of such individuals has been carried out.

Training

All staff at the Institute working with children will be expected to participate in relevant training in relation to this Policy as required from time to time.

Where young people, under 18 years, are assisting in the work of the Institute, they will receive appropriate information on this Policy at a level suitable to their age and experience. These young people will always work in partnership with or under the supervision of a member of staff who is an adult

Tusla provides information resources on Children First guidance and legislation, including an e-learning training module. This e-learning module, which is called *Introduction to Children First*, covers recognising and reporting child abuse, the role of Mandated Persons, including mandated assisting, and the responsibilities of organisations working with children to safeguard children using their services. Information on how you can access the e-learning module can be found on the Tusla website (www.tusla.ie).

The Institute will take steps to bring this online training to the attention of staff, and engaged with other awareness raising programmes in the area of child protection and this Policy.

16. RELEVANT LEGISLATION

This Policy has been drafted to account for issues addressed in a number of pieces of legislation including:

- The Child Care Act 1991;
- The UN Convention on the Rights of the Child 1992;
- The Non-Fatal Offences Against the Person Act 1997;
- The Protection for Persons Reporting Child Abuse Act 1998.
- Criminal Justice (Withholding Of Information On Offences Against Children And Vulnerable Persons) Act 2012;
- The Children First Act 2015.

Appendix 1

In accordance with section 11 of the Children First Act 2015, the following is the written risk assessment of the Institute.

Category	Relevant Activates	Risk	Risk Level	Control/Procedures to Manage Risk	Actions
CIT Registered Students	Student 'On-Boarding'	Student understanding/awareness of policies, key contacts and supports available	Low	Good Programme - Start Induction	Increase student awareness
				Student Leaders - Garda Vetting	Check /increase Garda Vetting
		One-to-One Contact	Low	Student Leaders to be instructed on policy re one-to-one	Student Leader Training
	Counselling	One-to-One	Low	Professional body accredited Counsellors	Review policy and procedure
	Teaching activity	One-to-One	Low	Addressed by policy	Staff awareness
	Sporting Activities	Coaching	Med	Recruitment and supervision of Coaches	Review procedures
	Trips involving overnight or foreign travel	One-to-One	Med	Addressed by policy	Staff Awareness
	Placement	Supervision by other than Institute	Low	Address through Placement Contract - minors should be identified	Review & further assess
			Very unlikely since placement happens after year 1		
	Social Studies / Early Childhood	Students in authority of minors / vulnerable	Med	Students Garda Vetted	Student Training

		adult			
	Toilets	Isolated unsupervised areas	Med	Toilets are located in populated areas. Cubicles may be locked.	Review CCTV coverage
	Gym - Changing Rooms & Toilets	Open Access	Low	Signage re underage children	Review CCTV Coverage
	Administration of First Aid	Untreated injuries	Low	Medical Centre / ERT - more than one attending any incident	ERT Awareness
	Staff Recruitment	Recruiting staff who may pose a risk	Low	All staff Garda Vetted	
	External Contractors	Engaging contractors who may pose a risk	Low	Ensure awareness through tendering/purchasing process	Review Purchasing Procedure
Junior Music at CIT-CSM					
	Attendance at School	Lack of parental supervision	Med	Signage in place	Organise Workshop with CSM CPOs
		Attendance other than in class		Staff Training	
	One-to-One Teaching	Nature of music teaching involves one-to-one	Med	Building is specifically designed with viewing panels	Organise Workshop with CSM CPOs
		Rooms have high level of sound proofing			
	Open Campus Access	Unauthorised entry to campus	Med	CCTV	Organise Workshop with CSM CPOs
				Reception Desk has full visibility	
				No separate access to Café	
External Student Attendance					
	Open Days	large number		Teacher supervised	

		of Secondary school children			
				Organised activity with event management plan	
	Sports Camps & Sports Days	One-to-One, changing rooms	Med	Event management plan	
				Coaches Garda Vetted	
	Work Experience incoming	One-to-One	Low	Assigned supervisor	
	Use of facilities by sports clubs	Gym - Changing Rooms & Toilets	Med	Signage re underage children	Review CCTV Coverage
					Erect signage that <16 must be supervised
	Summer Language Colleges	Not under Institute direct supervision	Med	Recognised contracting authority	Review agreement/contract
		Communication difficulties			
		Supervision outside hours on campus			
	Blackrock Castle Observatory (BCO)	Large number of school groups	Med	Teacher supervised	Organise Workshop with BCO CPOs
				Organised activity with event management plan	
	Coder Dojo	One-to-One and travel	Low	Parents in full attendance	

Parties to be engaged with further:

Students Union
Research Ethics
Child Protection Officers & Deputies
Student Services Officer
Early Start
Early Childhood Studies

	Social Studies
	Student Affairs & Administration Manager
	Chaplaincy
	CSM, CCAD, NMCI
	Caretakers
	BCO, Coder Dojo
	Enterprise Camps
	Access / Disabilities
	Safety Officer
	Summer Schools
	Sports Office
	Schools Liaison & Marketing
	Purchasing Office / Tenders
	Facilities
	IT Tralee

Address: _____

Relationship _____ to

Child: _____

Occupation: _____

4. Additional information that may be relevant:

5. Details of person reporting concerns:

Name: _____

Occupation: _____

Address: _____

Telephone Number: _____

Nature and extent of contact with

Child/Family: _____

6. Details of person completing form:

Name: _____

Occupation: _____

Date: _____

Signed: _____

Appendix 3

“Mandated Persons”

The following classes of persons are specified as mandated persons for the purposes of the Children First Act 2015:

1. Registered medical practitioner within the meaning of section 2 of the Medical Practitioners Act 2007 .
2. Registered nurse or registered midwife within the meaning of section 2 (1) of the Nurses and Midwives Act 2011 .
3. Physiotherapist registered in the register of members of that profession.
4. Speech and language therapist registered in the register of members of that profession.
5. Occupational therapist registered in the register of members of that profession.
6. Registered dentist within the meaning of section 2 of the Dentists Act 1985 .
7. Psychologist who practises as such and who is eligible for registration in the register (if any) of members of that profession.
8. Social care worker who practises as such and who is eligible for registration in accordance with Part 4 of the Health and Social Care Professionals Act 2005 in the register of that profession.
9. Social worker who practises as such and who is eligible for registration in accordance with Part 4 of the Health and Social Care Professionals Act 2005 in the register (if any) of that profession.
10. Emergency medical technician, paramedic and advanced paramedic registered with the Pre-Hospital Emergency Care Council under the Pre-Hospital Emergency Care Council (Establishment) Order 2000 (S.I. No. 109 of 2000).
11. Probation officer within the meaning of section 1 of the Criminal Justice (Community Service) Act 1983 .
12. Teacher registered with the Teaching Council.
13. Member of An Garda Síochána.
14. Guardian ad litem appointed in accordance with section 26 of the Child Care Act 1991 .
15. Person employed in any of the following capacities:
 - (a) manager of domestic violence shelter;

- (b) manager of homeless provision or emergency accommodation facility;
- (c) manager of asylum seeker accommodation (direct provision) centre;
- (d) addiction counsellor employed by a body funded, wholly or partly, out of moneys provided by the Oireachtas;
- (e) psychotherapist or a person providing counselling who is registered with one of the voluntary professional bodies;
- (f) manager of a language school or other recreational school where children reside away from home;
- (g) member of the clergy (howsoever described) or pastoral care worker (howsoever described) of a church or other religious community;
- (h) director of any institution where a child is detained by an order of a court;
- (i) safeguarding officer, child protection officer or other person (howsoever described) who is employed for the purpose of performing the child welfare and protection function of religious, sporting, recreational, cultural, educational and other bodies and organisations offering services to children;
- (j) child care staff member employed in a pre-school service within the meaning of Part VIIA of the Child Care Act 1991 ;
- (k) person responsible for the care or management of a youth work service within the meaning of section 2 of the Youth Work Act 2001 .

16. Youth worker who—

- (a) holds a professional qualification that is recognised by the National Qualifications Authority in youth work within the meaning of section 3 of the Youth Work Act 2001 or a related discipline, and
- (b) is employed in a youth work service within the meaning of section 2 of the Youth Work Act 2001 .

17. Foster carer registered with Tusla.

18. A person carrying on a pre-school service within the meaning of Part VIIA of the Child Care Act 1991 .

Document Information

1. Document Details

Title:	Child Protection Policy and Code of Behaviour for Working with Children
This Version Number:	2.7
Status:	Final Approved - Clean

Important Note: If the 'Status' of this document reads 'Draft', it has not been finalised and should not be relied upon.

2. Revision History

Version Number	Revision Date	Summary of Changes	Changes tracked?
2.0	22/07/14	First draft of amended version of policy to take account of small number of changes on foot of 2011 edition of Children First including (1) revised definitions for 'physical abuse', 'consensual sexual activity' (2) revised guidelines for recognising abuse. Also amended policy to express it as an Institute wide policy, as opposed to the Institute CSM only.	Yes
2.1	01/08/14	Further changes suggested by Orla Flynn and incorporated by Barry Coughlan	Clean
2.2	18/11/14	Further changes as suggested at Audit Committee, namely inclusion of reference to 'cyber bullying' in section 12 and 'designated person' and notices in section 6	Clean
2.3	7/10/16	Updates CPOs	Clean
2.4	1/03/18	Updates to reflect Children First 2017 and new requirements on foot of Children First Act 2015 (which commenced on 11 December 2017)	Yes
2.5	18/04/18	Further amendments on foot of meeting between relevant CIT management and CPOs and ITT HR Manager to discuss version 2.4.	Yes
2.6	13/08/18	Incorporating feedback from Academic Counsel, GB A&R, and Tusla re retrospective abuse; student placements; risk assessment; typos.	Yes
2.7	04/04/19	Incorporating feedback from GB	Yes

3. Relevant Existing/Related Documents

Title	Status	Relevance to this Document
2.3	Approved by Governing Body	Previous version of same policy

4. Consultation History

This document has been prepared in consultation with the following bodies:

Name	Date	Details of consultation
Academic Council	June 2018	For information
Audit and Risk Sub-Committee of Governing Body	14 June 2018	For review/approval

5. Approvals

This document requires following approvals (in order where applicable):

Name	Date	Details of Approval Required
Governing Body	05 July 2018	Approval of version 2.5
Governing Body	04 April 2019	Approval of version 2.7