# Child Protection Policy

## Chapter 1

### 1.0 Introduction to the guidelines

There is a clear moral and legal responsibility on the part of all staff working in this Youthreach centre to ensure that every young person participating in the service of the organisation has a fundamental right to a safe environment in which he/she is protected, free from any form of harm, abuse or neglect.

### 1.1 Background

This Youthreach centre provides a range of education, training and personal development services for young early school leavers experiencing social disadvantage. Many of the young people and children who present to this Youthreach centre, or who are referred by statutory agencies, may have had damaging or harmful personal experiences in their lives.

The ethos promoted by this Youthreach centre is one in which young people can feel confident, that not only will they have the opportunity to realise their potential as individuals, but they will also feel protected and secure during the time in the centre.

### 1.2 Purpose of the guidelines

The Guidelines on Child Protection are designed as an aid to staff in identifying and reporting child abuse and keeping the best interests of the young person/ child a priority at all times and aim to ensure that no young person or a staff member to whom a disclosure of abuse has been made is left alone to address the problem.

They also recognise that an effective response to a suspected or alleged incident of abuse is dependent on a partnership approach involving:

* Young person who is the victim of the abuse
* His/her family or carers
* Relevant statutory authorities with legal responsibility for child protection, i.e., the Area Health Boards and An Garda Siochana.

It is important to remember that while the Guidelines provide necessary advice on important aspects of child protection, they do not, and cannot, aim to cover every eventuality and circumstance that may occur in any given incident of suspected abuse. Therefore, in some cases the best judgement and experience of staff will also be relied upon. **However, at no time should an individual staff member attempt to handle a disclosure of abuse on his/her own without consulting the designated responsible staff member and/or authorities.**

### 1.3 Summary of the guidelines

The guidelines are presented in chapter format as follows:

#### Chapter 2

A statement of the rights of the young and child as expressed in international charters and in the Irish national context. A set of First Principles for best practice in child protection.

#### Chapter 3

A definition of the four key forms of recognised child abuse, i.e., neglect, physical abuse, emotional abuse and sexual abuse.

#### Chapter 4

The problem of recognising child abuse and how to identify signs of abuse.

#### Chapter 5

Handling and reporting disclosures and suspected incidents of abuse. Specific procedures to be followed - i.e. what information to gather, who to report to, when to report, how to store and retain information, and how to deal with a retrospective disclosure by an adult.

#### Chapter 6

A description of the role of the Designated Liaison Person, (DLP).

#### Chapter 7

Protocols to be followed in dealing with confidentiality and sharing information.

#### Chapter 8

A Code of Behaviour for staff of this Youthreach centre to be followed in their work practices with young people and children.

#### Chapter 9

Young people and children who are especially vulnerable, e.g. those who are homeless, in the care of the State or who have disabilities.

#### Chapter 10

Policy and procedures governing allegations of child abuse against a staff member.

#### Chapter 11

Supervision, support issues for staff and DLP.

## Chapter 2

### 2.0 The rights of the young person

Guidelines for reporting suspected child abuse has been influenced by both national and international policy.

### 2.1 UN Convention on the Rights of the Child

The UN Convention on the Rights of the Child is, in essence, a “bill of rights” for all children. The Convention defines a child as anyone less than 18 years of age which includes the age group attending this Youthreach centre.

### 2.2 The Irish policy context of child protection

Key milestones in the development of Child Care Policy in Ireland during the 1990’s

1. **The Child Care Act, 1991**, provided the key legislative basis for dealing with children in need of care and protection.
2. In **1994**, and **1997**, the incoming governments appointed a **minister of state** with special, cross-departmental responsibility for child services in the areas of health, education and justice with the aim of improving coordination of child policy and service provision.
3. **Department of Health, Discussion Paper on Mandatory Reporting, 1996,** resulted in a majority view against the introduction of mandatory reporting.
4. **‘Putting Children First – Promoting and Protecting the Rights of Children’,**
5. **1997** - A number of initiatives to strengthen arrangements for reporting child abuse were announced in this document.
6. **Action Plan for the Millennium, 1997,** contained key commitments in the area of child care services including mandatory reporting of child abuse and a review of community care child protection services.
7. **The Protection for Persons Reporting Child Abuse Act, 1998**, provided a statutory immunity to persons reporting allegations of child abuse to the area health boards or An Garda Siochana once they did so reasonably and in good faith.
8. **‘Children First: National Guidelines for the Protection and Welfare of Children’, 1999**. These national guidelines are intended to assist people in identifying and reporting child abuse and to improve professional practice in organisations that provide services for young people. They provide a clear focus on the legal and moral responsibilities of organisations that provide services for young people.

### 2.3 Our duty of care

People involved in organisations working with young people, have a particular **duty of care** to these young people and need to be alert at all times to the possibility of them being harmed, or at risk of being harmed, in any way. They are also obliged to convey any reasonable concerns or suspicions to the relevant authorities and to be informed of the correct procedure for doing so. Those who accept responsibility for children may be legally responsible for their failure to provide adequate care. Therefore, our duty of care has both moral and legal dimensions. Developing guidelines of good practice in respect of the care and protection of young people involved with this Youthreach centre helps protect young people in our care & the organisation itself.

### 2.4 Principles for best practice in child protection

Adopting the principles for good practice outlined on the following page ensures:

* Young people are listened to, given a sense of belonging and are kept safe.
* Parents/guardians/carers are supported and encouraged.
* Staff who works with young people are supported and protected.

### 2.5 Principles of good practice

1. Promote the general welfare, health and full development of young people, and protect them from harm of all kinds. The protection and welfare of young people is paramount at all times.
2. Recognise that young people have rights as individuals and treat them with dignity and respect. This includes their right to be heard, listened to and to be taken seriously.
3. Taking account of their age and understanding, young people should be consulted and involved in all matters and decisions which may affect their lives.
4. Raise awareness among young people, parents and staff about what young people are entitled to be protected from.
5. Parents/guardians/carers have a right to respect and should be consulted in matters which concern their children. Young people should not be dealt with in isolation but rather in the context of their families.
6. Adopt and consistently apply a thorough and clearly defined method of recruiting and selecting staff. This includes the effective management of staff.
7. Plan the work of the organisation so as to minimise opportunities for young people to suffer harm.
8. Develop effective procedures in responding to accidents, complaints and to alleged or suspected incidents of abuse. Actions taken to protect a young person should not in themselves be abusive or cause the young person unnecessary distress.
9. Recognise the importance of compulsory training and clarity of responsibility for personnel working with young people.
10. Share information about concerns of alleged or suspected child abuse in an appropriate manner with agencies and parties who need to know, and involve parents and children in the most sensitive way possible.

## Chapter 3

### 3.0 Definitions of child abuse

As staff, it is important that we understand the different definitions of abuse since they are central to the statutory child protection system. Any action taken by statutory child agencies, such as the area health board, will be based on these definitions. In their child protection practice, educational establishments are also required to adopt these definitions since in the event of any reported incidents of child abuse; they will necessarily interact closely with the statutory agencies.

* Staff of this Youthreach centre should be clear aboutwhat abuse is and who potentially can abuse.
* This does **NOT** mean that they are responsible for deciding whether or not abuse has in fact occurred.
* Our main duty is to be alert to behaviour by adults or young people that suggest something may be wrong.

### 3.1 Four main types of abuse

The four main types of abuse are neglect, physical abuse, emotional abuse and sexual abuse.

#### 3.1.1 Neglect

This type of abuse is normally described in terms of an omission or a failure to protect, where a child suffers significant harm or impairment of development by being deprived of an essential human need, such as food, clothing, warmth, hygiene, medical care, safety, supervision, intellectual stimulation or affection. What is important here is not a once-off incident of neglect, but the persistence and severity of the neglect suffered by the child.

#### 3.1.2 Physical abuse

Physical abuse is any form of non-accidental injury (N. A. I.) that causes significant harm to a child.This includes deliberate physical injury to a child or wilful or neglectful failure to prevent physical injury or suffering to a child. Examples of physical injury may include beatings, shaking, suffocation, deliberate poisoning and Munchausen’s syndrome by proxy (where parents, often the mother, fabricate stories of illness about their child or by cause physical signs of illness).

#### 3.1.3 Emotional abuse

All abuse involves some emotional ill-treatment. However, emotional abuse in itself is normally to be found in the relationship between a caregiver and a child. This is the critical context in which most incidences of emotional abuse happen. It occurs when a child’s need for affection, approval, consistency and security are not met. It is rarely manifested in terms of physical symptoms. However, it is possible that any form of severe stress may have physical symptoms, such as pain, a rash or nausea.

Examples of emotional abuse include:

* Persistent criticism, sarcasm, putting down, hostility or blaming.
* The child not being taken seriously or being continuously rejected.
* Intimidation by threats or taunts.
* Inconsistent or inappropriate expectations of a child.
* Favouritism to others where the child is excluded.
* Under or over protection of a child.
* Use of unreasonable or overly-harsh disciplinary measures.
* Conditional parenting or care in which the level of care shown to a child is made conditional on his or her behaviour or actions**.**

#### 3.1.4 Sexual abuse

This form of abuse refers to actual or likely sexual exploitation of a young person for the purpose of personal gratification or sexual arousal. It includes young people being forced to either participate in, or to observe, any form of sexual activity. Children and adolescents forced to be involved in sexual activity they do not truly understand and, therefore, are unable to give informed consent. In relation to child sex abuse, it should be noted that:

* For the purposes of the criminal law, the age of consent to sexual intercourse is 17 years.
* Consensual sexual activity between an adult and a child under 17 years is illegal (a felony if the child is under 15 years and a misdemeanour if the child is between 16 and 17 years, unless it can be shown to be a serious crime).
* Consensual sexual intercourse between a 16-year-old girl and her 17 year old boyfriend, however, while illegal, might not necessarily be regarded as child sexual abuse, depending on the circumstances involved.
* Downloading child pornography on the internet is also categorised as a crime.

### 3.2 Other forms of common abuse

Other forms of abuse that can occur are bullying, peer abuse, organised abuse and fatal child abuse.

#### 3.2.1 Bullying

Bullying can be defined as a repeated verbal, psychological or physical aggression conducted by an individual or group against others. Dealing with bullying behaviour is normally the responsibility of the organisation or school in which it is taking place.

A *Student Bulling Policy* was developed and it is important that the policy be used as a benchmark for helping students to address issues of bullying, whether the student in question is the aggressor or victim of bullying. The code should be periodically reviewed in a participatory way with students and staff as to its relevance and effectiveness.

#### 3.2.2 Peer abuse

The perpetrator can be a young person acting alone or sometimes with others. In such incidences, the standard child protection procedures should be followed both for the young person abused and the alleged abuser. If there is any conflict of interest between the welfare of the alleged abuser and the victim, the victim’s welfare is of paramount importance. One form of peer abuse is bullying, but it could also include sexual exploration and sexually abusive behaviour.

#### 3.2.3 Organised abuse

Organised abuse occurs when either one person moves into an area or institution and systematically entraps young people for abusive purposes (mainly sexual) or when a group of adults conspire to similarly abuse young people, using inducements. Organised abuse can occur in different settings, such as the family, extended family, institution or the community. Features of organised abuse are:

* More than one young person, possibly a large number of children, are abused or are vulnerable to abuse.
* It can sometimes involve active or passive collusionof other adults involved in the care of young people.

#### 3.2.4 Fatal child abuse

**The** **National Guidelines, Children First** identify a category of abuse which is called fatal child abuse. This refers to circumstances where a child dies as a result of abuse or neglect. Three important aspects to be considered are: criminal, child protection and bereavement aspects.

## Chapter 4

### 4.0 Recognising child abuse

While the recognition of child abuse is not usually a straightforward matter, staff of this Youthreach centre has a responsibility to be aware and alert to signs that all is not well with a vulnerable young adult. If a member of staff suspects a young person in this Youthreach centre is being abused in any way, they should report it to the Designated Liaison Person (DLP) with lead responsibility in the organisation for handling child protection issues this is usually the coordinator of the centre. (For further information on the role of the Designated Liaison Person, see chapter 6).

### 4.1 Rights of the young person

Remember that young people have the following basic rights

* to be safe
* to protect their own bodies
* to say NO
* to get help against bullying
* to tell
* to be taken seriously and reassured
* not to be forced to keep secrets

**As staff, we need to be aware that** our role in recognising child abuse is a supportive, not an investigative role. **It is the job of the statutory authorities, i.e. the area health board and An Garda Siochana, to investigate any allegation or suspicion of abuse that may be brought to the notice of a staff member.**

### 4.2 Indicators of child abuse

The following are important factors to be considered when faced with symptoms or signs of child abuse. No one single indicator by itself is conclusive of abuse. Any one sign may indicate conditions other than child abuse. A pattern or cluster of signs is likely to be more indicative of abuse. Most indicators are non-specific and must be viewed, not in isolation, but rather in the total context of the child/young person’s situation and family circumstances. Signs of abuse exist mainly in the relationships between children and parents/carers, between children and other family members and less frequently between children and strangers. It is important to be always open to alternative explanations.

Some indicative signs of abuse:

* Direct disclosure by a young person of abuse or neglect.
* Age-inappropriate or abnormal sexual knowledge or play.
* Specific injuries or patterns of injuries.
* Attempted suicide or repeated incidents of self-harming.
* Absconding from home or a care situation.
* Under-age pregnancy or sexually transmitted disease.
* Signs in one or more grouping at the same time; for example, signs of physical injury, developmental delay and behavioural signs may together indicate a pattern of abuse.

You may become aware of abuse if a young person discloses it or communicates it in some way. However, in the case of sexual abuse in particular, secrecy imposed by the offending adult may often be part of the abuse pattern, so the child/young person will not readily disclose what is happening. All forms of abuse are important. However, emotional or psychological abuse is often more likely to be prevalent in an organisational setting. Although abuse can be difficult at times to detect, its importance should not be under-estimated.

## Chapter 5

### 5.0 Handling and reporting disclosures and suspected abuse

**It is the policy of this Youthreach centre that its staff will take every care to ensure that all service users are protected from abuse of any kind while in its care.**

### 5.1 Responsibility to report child abuse

Remember that the consequences of failing to report an allegation or suspicion could far outweigh the risk of being wrong and may result in the continued harm, or even fatality, of the young person. We, as staff members and as an organisation, have a moral and legal responsibility to report any suspected incident of child abuse.

The *Protection for Persons Reporting Child Abuse Act, 1998* provides immunity from civil liability to persons who report child abuse “reasonably and in good faith” to designated officers of health boards or to any member of An Garda Siochana.

### 5.2 Ways of becoming aware of abuse

These could include:

* Young person may tell you i.e. a direct disclosure.
* Someone else may tell you that a child has told them or that they strongly believe a child has been or is being abused i.e. a third party disclosure.
* Young person may show some signs of physical injury for which there appears to be no satisfactory explanation.
* Young person’s behaviour may indicate to you that it is likely that he or she is being abused.
* Consistent indication over a period of time that a young person is suffering from emotional or physical neglect.
* Something in the behaviour of one of the staff or in the way he/she relates to a child or young person alerts you or makes you feel uncomfortable in some way.

(See also ‘Indicators of Abuse’, Chapter 4.)

***The rule-of-thumb as to whether or not to report a suspected case of abuse is having reasonable grounds, supported by indicators for the suspicion. The one thing you must not do is NOTHING.***

### 5.3 Procedures for handling and reporting a disclosure or suspected abuse

#### 5.3.1 Handling the disclosure

***In the case of a young person disclosing abuse, it is important to……..***

* Be as calm and natural as possible. Remember that you have been approached because you are trusted and/or liked – not because you are an expert counsellor.
* Be aware that disclosure is very difficult for the young person involved.
* Listen to the young person and take what he/she says seriously. Give the young person time to speak about the disclosure at his/her pace.
* Remember that initially a young person may be testing your reactions and may only fully open up over a period of time.
* Never stop a young person who is freely recalling significant events.
* Do not question the young person directly about intimate details of the abuse or seek to interpret for the young person – this could later complicate the official investigation; avoid leading questions; do not make the young person repeat the story unnecessarily, and avoid making judgements.
* Differentiate between the person who carried out the abuse and the act of abuse itself. The young person may love, or strongly like, the abuser while also disliking what was done to him/her by the abuser.
* Do not promise the young person that you will keep secret what has been revealed. You may tell the young person that there are secrets which are not helpful and which should not be kept because they make matters worse. By refusing to make a commitment to secrecy to the young person, you run the risk that they may not tell you everything or, indeed, anything, there and then, but this is preferable to promising to keep secrets.
* Offer him/her reassurance that they have done the right thing in talking to you and tell him/her that you are willing to give help and support. Reassure the young person that your feelings towards him/her have not been affected in a negative way as a result of what s/he has disclosed.
* Explain **to the young person what will happen next and seek their consent, if possible. Tell the young person that you will** keep him/her informed **of anything that you intend to do based on what you have been told.**
* **Try not to become** over-involved **with the young person, lest you become part of the problem rather than the solution.**

#### 5.3.2 Reporting the disclosure

* As soon as possible after the disclosure (no later than 24 hours afterwards), record the discussion accurately using the *Reporting Form for Allegations or Suspicions of Abuse,* (see section 5.4. below and Appendix C). **The Reporting form should be filled out by the staff member to whom the disclosure was made.**
* **Your record should be** clear, factual and concise **– this may be valuable information to professionals investigating the incident and may at some time in the future be used as evidence in court.**
* Avoid giving personal opinions or interpretations **of the facts presented.**
* Remember to sign and date your report.
* **Once this is done**, you should not subsequently change the contents of the report in any way.
* **In the event of a disclosure or suspected case of abuse**, immediately contact the Designated Liaison Person **within this Youthreach centre. For effective communication, it is important that all staff know who the Designated Liaison Person is in the organisation and how to contact him/her.**
* **Ensure that the Designated Liaison Person receives your written report as soon as possible.**
* **The Designated Liaison Person is responsible for making contact with the relevant statutory authority in the event of a reported disclosure of alleged abuse against a young person.**
* **The** parents or primary carers **of a young person affected by suspected abuse must be notified as early as possible. It is recommended that this task be left to, or done in conjunction with, the community care social worker, or if this is not possible by an experienced staff member.**
* Under no circumstances should any individual member of staff attempt to deal with a disclosure alone.
* The primary responsibility of the staff member involved is to report the disclosureor suspected incident of abuse **and to ensure that their report is taken seriously.** Under no circumstances should he/she attempt to investigate the incident.
* **In some situations, staff may receive information that adults who are not involved with this Youthreach centre, but whom they believe may present a risk, are in contact through other organisations. The matter should be reported by the staff member to the Designated Liaison Person who should seek advice from the area health board as to how this information should best be communicated.**
* It is very important that everyone in the organisation knows that if they raise a concern which, through the process of investigation, is not validated, they have not in any way been wrong in their initial action. This Youthreach centre encourages responsible action and is committed to supporting a staff member faced with a disclosure by a young person.

### 5.4 Information required when a report is being made

The information requested in the *Reporting Form for Allegations or Suspicions of Abuse* that is stipulated in *Children First* child protection guidelines.

Storage and retention of information

* Information about an incident or allegation of child abuse should only be shared with those who need to know, or who have a legal right of access to this information.
* **Being clear about the agreed arrangements for storing and retaining information will help to protect this Youthreach centre and its young people.**
* **Basis for Reporting to a Health Board.**
* **When this Youthreach centre has reasonable grounds for concern that a young person may have been abused, or is being abused, or is at risk of abuse, it has a responsibility to inform the area health board.** The Designated Liaison Person should communicate with the area health board on any case of alleged or suspected child abuse.
* The organisation should not question the young person parents/carers about the alleged abuse, as this is a role more appropriately carried out by the area health board social worker or An Garda Siochana.
* **In cases of emergency, where a young person appears to be at immediate and serious risk, and a duty social worker is unavailable, An Garda Siochana should be contacted.**
* Under no circumstances should a young person be left in a dangerous situation pending area health board intervention.

## Chapter 6

### 6.0 The Designated Liaison Person

The first line of internal reporting of any incident of suspected or actual abuse against a young person or child within the organisation is to the Designated Liaison Person (DLP). The Designated Liaison Person is the staff member appointed by the organisation who carries the lead responsibility for the handling of child protection issues in the organisation.

### 6.1 Who the Designated Liaison Person is

The Designated Liaison Person should be someone who

* Occupies a senior position within the organisation.
* Has a good knowledge of the organisation and in particular the welfare needs of the young people and children who participate in the services of the organisation.
* Is familiar with the topic of child abuse and associated issues.
* Have good listening and feedback skills.
* Easily accessible.
* Is at ease with the subject matter.

### 6.2 The role of the Designated Liaison Person

In his/her role, the DLP is required to operate within the guidelines for the handling and reporting of suspected or actual child abuse as set out by the appropriate statutory authorities and as approved by this Youthreach centre. Principally, this involves:

* + Receiving and considering child protection concerns as initially reported by a staff member of the organisation in accordance with the agreed procedures (ref. chapter 5).
	+ Consulting with, and making formal referrals to, the area health board or An Garda Siochana on suspicions and allegations of child abuse in accordance with the procedures set out in *Children First: National Guidelines for the Protection and Welfare of Children (*ref. chapters 4 and 5).
	+ Reporting as soon as possible to the Regional coordinator of Dublin & Dun Laoghaire ETB.
	+ Liaising / mediating between the staff, the organisation and the authorities, where necessary.
	+ Advising staff and the organisation on individual cases.
	+ Advising the organisation on good practice in child protection.
	+ Maintaining proper records on all cases reported to him/her in a secure and confidential manner (see chapter 7).
	+ Facilitating the provision of support to the victim of abuse, the staff member making a report or, if appropriate, the staff member against whom an allegation has been made.
	+ As required, organising / facilitating training on child protection issues for staff.
	+ Keeping up to date with current policy and practice issues in the field of child protection.
	+ Building up networks with authorities and other relevant agencies/resource groups.

In the event of the Designated Liaison Person receiving reported information on an alleged incident of abuse which concerns another organisation that this Youthreach centre has a protocol or working relationship with, the report to this organisation should be made by the coordinator.

The contact number/s of the Designated Liaison Person should be made available to all staff of the organisation so as to facilitate effective communication in incidents of suspected or actual abuse. The Designated Liaison Person should have the contact numbers of the relevant area health board authority and the local Gardaí to facilitate external reporting on abuse cases. This latter information should also be given to responsible persons in the organisation in the event that the Designated Liaison Person is not contactable or is unavailable.

## Chapter 7

### 7.0 Confidentiality and exchange of information

The effective protection of a young person participating in the services of this Youthreach centre depends on the willingness of the staff, and the organisation itself, to share and exchange relevant information in an appropriate way. Therefore, it is critical that there is a clear understanding of the professional and legal responsibilities in regard to confidentiality and exchange of information relating to child protection issues.

### 7.1 Confidentiality

Key principles which guide our practice on confidentiality in regard to child protection and abuse issues:

* The legal principle that ‘the welfare of the vulnerable adolescent is paramount’ means thatconsiderations of confidentiality should not be allowed to override the right of young people to be protected from harm**.**
	+ **It is important to understand that information regarding a concern of child abuse** should only beshared on ‘a need to know’ basis **in the interests of the young person.**
* No undertakings regarding secrecy can be given. **Staff working with young people and their families should make this clear, while endeavouring to be as supportive as possible.**
* Personal information concerning the family of a young person who is the subject of an alleged or suspected incident should be kept confidential **and should only be communicated to appropriate people if this information has a bearing directly or indirectly on the incident.**

### 7.2 Exchanging information

Exchanging information should be based on a partnership approach in which the above principles relating to confidentiality are adhered to by all parties concerned. The following are general guidelines for the exchanging of information on child abuse concerns.

* In sharing significant information and in any investigation, this Youthreach centre will at all times strive to act in good faith, without malice and on the basis that the interests of the young person are paramount.
* ‘Significant information’ refers to a cause for concern that is based on the balance of probabilities rather than conclusive proof.
* In cases where this Youthreach centre is the initiating agency in passing on information, it should inform all relevant agencies with which the alleged individual has had known contact. This should be decided in consultation with the statutory child protection agencies.
* Information which is gathered for one purpose must not be used for an altogether different purpose.
* While initial contact with the agencies to be notified might be by telephone, any subsequent written notification should be addressed by the coordinator of this Youthreach centre to the appropriate person in that agency and marked ‘Strictly Confidential’.
* Informing the parents/carers of the young person about whom there are concerns should be handled carefully and sensitively.
* It should be remembered that a number of the young people participating in programmes in this Youthreach centre may be residing in hostels, or in probation, high support or special care units. In such cases the manager of the hostel/unit, or the young person’s key worker in the hostel/unit must be informed immediately along with the assigned statutory social worker, care worker or probation officer.
* Any individual under suspicion, whether s/he is a staff member or not, has a right to be notified of the cause of concern.
* Statutory child protection procedures are child-centred; this means that only relevant people within those agencies who have the task of deciding what action/s to take are informed.
* In cases where this Youthreach centre is the initiating agency in passing on information, it should notify the eventual outcome to all other agencies/parties it has informed of the case.

## Chapter 8

### 8.0 Code of Behaviour for protection & safety of young people/staff

Arising from research undertaken, this Youthreach centre identified critical practice issues for the protection and safety of everyone involved in its services which are herein enshrined in a ***Code of Professional Conduct for the Protection of Young People****.*

The code seeks to minimise the occurrences of accidents and to contribute to the protection of young people from intentional harm. The code is not only in the best interests of the young people, but it also helps staff, and ultimately this Youthreach centre, to be protected. It is set out in terms of a number of *“do’s”* and *“don’ts”* designed to guide how staff should interact with young people.

**DO’s**

* Work with young people in order to build on and develop their self-esteem and self-confidence.
* Provide opportunities for young people to develop and display their own skills and talents.
* When necessary provide criticism in a positive manner.
* Foster positive relationships with young people in accordance with proper boundaries.
* When dealing with young people who are in care and who have been referred to the centre by a statutory agency, be aware of the wider care plan in place for their welfare.
* Treat everyone with respect, regardless of age, sex, race or creed.
* Treat everyone equally and in a non-judgmental manner.
* Behave in a professional manner at all times toward the young people.
* Be clear at all times about your role and responsibilities as a staff member.
* Provide support to new staff members, particularly in child protection policy and practice.
* Respect the boundaries of the relationship between staff members and young people.
* Work together in order to provide a safe and trusting environment for all in the centre.
* Help to develop networks with the families and local communities of the young people we are involved with.

In addition to this general practice guidance, there are a number of specific practice issues which need to be followed in the practical management of all outdoor recreation and educational activities involving young people and children. Outdoor trips present particular challenges and dangers for child protection, and staff need to carefully plan outdoor activities in advance, to be fully alert at all times during a trip and to be able to deal effectively with situations which may arise that threaten the protection and safety of a young person

**DO’s (Outdoor Trips)**

* Ensure that management and parents are fully aware of the details of any proposed trip.
* Ensure that parental consent forms have been completed for all young people going on the trip, including information on any relevant medical conditions.
* Ensure that young people and their parents are aware of the contract for behaviour to be followed for the duration of the trip.
* Ensure there is adequate insurance cover.
* Ensure that there is a sufficient ratio of staff to young people.
* Ensure that a checklist of equipment has been circulated and adhered to.
* Provide a telephone contact list of local doctors.
* Ensure adequate supervision at night, including sleeping arrangements, to ensure the young people do not come to any harm.
* Check the condition of premises on arrival and departure and note any breakages, faulty equipment, etc.
* Ensure that adequate transport is available to deal with any emergencies that may arise.
* Ensure that first aid kits and staff with first aid training are available.
* Ensure immediate and good quality communication with all relevant parties in the event of an incident.
* Write up a report as soon as possible on an incident which occurs during the trip (ref. chapter 5).
* The code identifies a number of examples of poor practices which are potentially harmful to a young person/child and which, therefore, should be avoided.

**DON’Ts**

* Do not use threatening behaviour (verbal or physical) towards a young person.
* Do not criticise or bully a young person unfairly.
* Do not talk down to young people.
* Do not allow inappropriate behaviour/language to go unchallenged.
* Do not promise to keep secrets.
* Do not be deliberately out of view of others with a young person. If, for any reason, you have to be alone in a room with a young person, inform another staff member before you do so and keep the door of the room open.
* Do not send a young person out of the centre before the official closing time without first notifying the parent/guardian/primary carer.
* Do not take a youth alone on a car journey without accompaniment.
* Do not become overly involved with a young person at the expense of others. Nor should you get so personally involved in a protection issue involving a young person that your judgement of the situation ceases to be objective.
* Do not allow camera-mobile telephones to be brought or used on the organisation’s premises, as this could possibly expose young people.

This Youthreach centre is fully committed to communicating and reviewing the Code of Behaviour with its staff and young people.

## Chapter 9

### 9.0 Vulnerable young people and children

This Youthreach centre has developed a recognised reputation for its work with young people who may be especially vulnerable. While all of the young people participating in the service are early school leavers, a significant number are additionally disadvantaged. These may include young people who are separated from parents or families and are in the care of the area health boards, those who are homeless or those who have disabilities, including learning disabilities.

### 9.1 Protection measures

The recommended practices and procedures as described in these Guidelines for the protection of all young people participating in the centre should apply to young people who are deemed to be especially vulnerable for one reason or another.

However, the following additional measures should be adhered to:

* The majority of very vulnerable young people will be referred to the centre by a statutory agency, such as the area health board. It is important that, before a decision is taken to admit such a young person to this Youthreach centre, all relevant information relating to his/her case history should be obtained from the designated social worker, care worker or probation officer. Staffs need to be informed of any relevant risk factors concerning the young person. Where a statutory agency is not involved, as much relevant information as possible should be gathered from parents or guardians at the interview stage.
* In the case of a suspected or alleged incident of abuse concerning a very vulnerable young person, staff should immediately refer the matter, through the Designated Liaison Person, to the area health board and to the particular case worker with responsibility for the young person. The general procedures regarding reporting to the area health board or the Gardaí should be followed.
* In the case of a young person who is homeless and who is suspected of having been abused, specific procedures are to be followed under the direction of area health board staff. These procedures are described in *Children First*, pages 100-101. All relevant staff should make themselves familiar with these procedures.
* In the case of young people in residential settings, close liaison and communication between carers and this Youthreach centre staff should be maintained at all times.
* In the case of a young person placed in foster care, the area health board has responsibility for arranging, providing and supervising such placements. In the event of a suspected or alleged incident of abuse involving a young person in foster care, the first point of contact should be with the area health board which will then carry out a thorough investigation of the incident.
* Research shows that abuse of young people with disabilities is a significant problem. Where a young person with a disability has special needs, staff should avail of any available expertise and knowledge in addressing such needs. Staffs also need to be aware of the indicators of abuse and be alert for signs of abuse.

In summary, this Youthreach centre staff have a duty of care towards its entire young people, particularly those who are especially vulnerable.

## Chapter 10

### 10.0 Allegations against staff concerning abuse of young people

It is natural to assume that people who work in youth organisations are caring individuals. However, it is also very important to have a clear policy and set of procedures for dealing with allegations of abuse by a staff member.

### 10.1 Policy on allegations against staff

*What is the policy of the centre in this area?*

The right of that staff member to natural justice and due process will be respected at all times.

A staff member who observes, or who has a high level of suspicion, that a young person is being abused by another staff member should report this to the coordinator immediately.

### 10.2 Abuse by visitors

* The possibility of abuse by visitors must at all times be recognised.
* A suspected or alleged incident of abuse by a visitor should be dealt with in the same way as other incidents where abuse has been thought to have occurred.

### 10.3 Protection of young people

* Where an allegation of abuse by a staff member is made it will usually be necessary to make special arrangements for the protection of the young person.
* The responsibility for making these arrangements rests with the coordinator in consultation with the regional coordinator.
* The nature of the special arrangements, and when to implement them, will depend on a number of factors such as the nature of the allegation, the staffing and the likely duration of the assessment.

### 10.4 Referring/reporting to external authorities

* The coordinator, in consultation with the regional coordinator, shall decide when any allegation will be referred to the relevant external authorities, i.e. parents/carers, area health board, the Gardaí.

## Chapter 11

### 11.1 Supervision, staff support & designated liaison person

#### 11.1.1 Sources of stress in child protection work

Sources of stressin child protection work are common and may include the following:

* The distressing nature of specific incidents or circumstances of alleged or suspected abuse.
* The need to make complex judgements and to take difficult decisions regarding levels of risk for a young person.
* The lack of agreed procedures, or commitment to agreed procedures, for the proper supervision of staff and young people and for dealing with abuse concerns.
* Insufficient support to a staff member to whom a disclosure concerning abuse has been made.
* **Poor levels of communication and co-operation between agencies or professionals.**

### 11.2 Supervision of staff and vulnerable young people

* Agreeing and following arrangements for the proper supervision of staff and young people, is the most effective way of minimising opportunities for young people in this Youthreach centre from suffering from harm of any kind.
* Adhere to the Code of Professional Conduct (see chapter 8).
* Proper supervision is also demonstrated by the commitment of staff to maintain proper records in relation to any significant care or protection issues about a young person.

### 11.3 Training in child protection

* It is the responsibility of the Designated Liaison Person for child protection within this Youthreach centre to play a central role in developing and monitoring basic level training in protection for all staff.
* Whenever possible, training should include a multi-disciplinary and inter-agency approach.
* Ways of training include: staff induction, specific training workshops.

### 11.4 Support to staff

* Child protection work can bring a staff member into situations which may present risks to their emotional, psychological or physical well-being.
* Necessary support and assistance to a staff member dealing with an abuse disclosure will be provided by the Designated Liaison Person.

Stress and anxiety in such circumstances is a legitimate reaction and not a sign of personal weakness or a lack of professionalism.

### 11.5 Designated Liaison Persons (DLP)

This Youthreach centre’s Designated Liaison Person is: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This Youthreach centre’s Deputy Designated Liaison Person is: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_