
Child Protection and Welfare Policy

(Under 18s Service)

Bray Community Addiction Team

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Reason for review: Updates regarding
Retrospective/ Historical Abuse.

Review:

Reference:

1. Responsibility for approval of policy	<i>All Staff and Board of Directors</i>
2. Responsibility for implementation	<i>All Staff with oversight from the Team Leader</i>
3. Responsibility for ensuring review	<i>Manager</i>

1. Policy Statement

- 1.1 Bray Community Addiction Team (BCAT) aims to be fully compliant with the standards of legislation outlined in *Children First: National Guidance for the Protection and Welfare of Children: (2017) and the Children First Act (2015)*. This policy sets out the roles, responsibilities and procedures assigned to ensure the effective safeguarding and management of child protection and welfare concerns in BCAT. BCAT understands and takes seriously its duties as a Relevant Service as set out in the *Children First Act (2015)*.
- 1.2 This policy is structured on a host of legislative acts, employed as reference documents to support skilled practice in relation to child protection. This policy is not a complete or authoritative statement on the law. Staff members should consult with *Children First* and relevant legislation as indicated in this document where required (see also Appendix 1).

2. Purpose and Reporting Structures

- 2.1 The Department of Children, Equality, Disability, Integration and Youth guidelines on protecting children place clear duties on service providers to protect children from abuse and neglect. It is therefore the responsibility of BCAT to report any suspicions or concerns about physical, emotional, sexual abuse or neglect to Tusla or An Garda Síochána (the Gardaí).
- 2.2 The Designated Liaison Person (DLP) with organisational responsibility for reporting within BCAT is the Manager and in their absence the Deputy Designated Liaison Person (DDLDP) is the Team/Project Leader. However, this should not preclude all members of staff from reporting concerns if the need arises.
- 2.3 BCAT understands that all staff members are Mandated Persons as designated such by the *Children First Act (2015)*. A mandated person is legally obligated to (i) report harm of children above a defined threshold to Tusla and (ii) help Tusla, if requested, in assessing a concern which has been the subject of a mandated report).
- 2.4 This policy should be read in conjunction with the following BCAT policies: Case Notes, Written Records and Correspondence, Code of Practice; Confidentiality; Data Protection; Garda Vetting, Induction; Equality, Recruitment and Selection, Record Keeping Practice and Guidance and Supervision Policy. This policy should also be read in conjunction with BCAT's Service Provision to Under 18's documentation, BCAT's Child Safeguarding Statement and BCAT's Service User Assessment and Under 18s Assessment Forms. Note, this list is not exhaustive.

3. Scope

- 3.1 This policy applies to all employees directly employed by BCAT, volunteers, students, Tus and Community Employment workers, it also applies to agencies providing in reach services for the time they are on the premises and those for whom BCAT has legal responsibility.
- 3.2 This policy sets out the guiding principles, procedures, protocols and legislation underpinning the protection of minors as described by the *Children First Act (2015)* and other pieces of legislation which support our responsibility to safeguard children (see Appendix 1).
- 3.3 BCAT recognises the legislative prescriptive definition of a child as anyone under the age of 18. Therefore, this policy is specifically enacted for the purpose of working with those under the age of 18.
- 3.4 This policy acknowledges that in health and social care practice it is usual to involve parent(s)/ legal guardian(s) and seek their consent when providing a service or treatment to a minor under 18.
 - 3.4.1 It is only in exceptional circumstances that, having regard to the need to take account of an objective assessment of both the rights and the best interests of the person aged over 16 and under 18, health and social care interventions would be provided for those between 16 – 18 without the knowledge or consent of parent(s) or legal guardian(s).
 - 3.4.2 It is always best practice to encourage and advise anyone under the age of 18 to communicate with and involve their parent(s) or legal guardian(s).

- 3.5 This policy also provides guidance on child protection concerns related to retrospective disclosures and working with service users with children.
- 3.6 Where any Board member or staff member, contract worker, volunteer or student becomes aware of an act of non-compliance with this policy, they have a responsibility to address the issue with the person concerned and if there is not a satisfactory outcome to bring it to the attention of the Manager and in their absence the Team/Project Leader as appropriate.
- 3.7 BCAT will endeavour to support positive working relationships with local Tusla child protection services through regular meetings / interagency training, and case management, as outlined in the National Drugs Rehabilitation Framework (2010).

4. Glossary of Terms and Definitions

- 4.1 **Child:** In Ireland a child is defined as anyone under the age of 18. They may also be referred to as minors¹.
- 4.2 **Child Abuse (Definition):** The 'Children First: National Guidelines for the Protection and Welfare of Children (2017)' provides guidelines on definitions and recognition of child abuse (p. 5-11):
 - Neglect: the persistent or severe neglect of a child whether wilful or unintentional which results in serious impairment of the child's health, development or welfare.
 - Emotional Abuse: the systematic emotional or psychological ill-treatment of a child as part of the overall relationship between a caregiver and a child caused by persistent or severe emotional ill treatment or rejection or exposure to on-going domestic violence.
 - Physical abuse: 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.
 - Sexual abuse: the use of children by others for sexual gratification. This can take many forms and includes rape and other sexual assaults, allowing children to view sexual acts or to be exposed to, or involved in, pornography, exhibitionism and other perverse activities.
- 4.3 **Child Abuse (Recognition):**
 - Vulnerability: *Children First: National Guidelines for the Protection and Welfare of Children (2017)* recognises that predisposing factors can and do leave children and young people more susceptible to risk (p.11-13). By the very nature of the service offered to young people and children in BCAT (substance use) service users are considered to exhibit a level of vulnerability not explicitly named as such within the *Children First: National Guidelines for the Protection and Welfare of Children (2017)*.
 - Other factors also need to be considered that can highlight potential vulnerabilities of young people. For example, parent(s)/legal guardians(s) exhibiting a lack of engagement and or motivation to attend appointments; poor overall engagement; inadequate insight into the young person's life; failing to follow through with care plans etc.
- 4.4 **Children First** is an overarching term that refers to responsibilities under the Children First: National Guidance for the Protection and Welfare of Children 2017 and/ or the Children First Act 2015.
- 4.5 **Child Safeguarding Statement:** the Children First Act 2015 requires BCAT, as a provider of a relevant service, to carry out a Risk Assessment in relation to the potential risks of harm (as defined in the Act) in relation to a child or young person while attending or receiving a service. BCAT is required to have a Safeguarding Statement which outlines the policies and procedures which are in place to manage the risks that have been identified.

¹ It was previously possible for a 16-year-old or 17-year-old to seek permission from a court to get married. If permission was granted and they married, they were then deemed to be an adult under many pieces of legislation, even though they were under 18. Since 1 January 2019, a court can no longer grant such permission.

- 4.6 **Deputy Designated Liaison Person (DDLDP):** the role specified staff member who will undertake the duties of the Designated Liaison Person in their absence. The Deputy Designated Person in BCAT is the Team/Project Leader.
- 4.7 **Designated Liaison Person (DLP):** The role specified staff member with organisational responsibility for reporting a child protection concern within BCAT. The designated liaison person is a resource for any staff member who has a child protection or welfare concern. They are responsible for ensuring that reporting procedures within BCAT are followed, so that child welfare and protection concerns are referred promptly to Tusla. The Designated Liaison Person in BCAT is the Manager.
- 4.8 **Domestic / Familial Abuse/ Violence:** Familial or domestic abuse/ violence is when an adult in the family uses violence to control (including coercive control) and/ or harm a family member. It can be physical, emotional/ psychological or sexual in nature and includes violence perpetrated by a spouse, partner, son, daughter or any other person who has a close relationship or lives with the victim. It can also involve the destruction of property; isolation from friends, family and other potential sources of support; threats to others including children; stalking; and control over access to money, personal items, food, transportation and the telephone. It can also involve coercive control which is a persistent pattern of controlling, coercive and threatening behaviour including all or some forms of domestic abuse by a partner or ex-partner. It traps victims in a relationship and makes it impossible or dangerous to leave. It is abuse if your partner or a family member:
- threatens you,
 - shoves or pushes you,
 - makes you fear for your physical safety,
 - puts you down, or attempts to undermine your self-esteem,
 - controls you, for example by stopping you seeing your friends and family,
 - is jealous and possessive, such as being suspicious of your friendships and conversations,
 - frightens you.
- 4.9 **Harm:** Harm “means, in relation to a child:
- (a) Assault, ill-treatment, or neglect of the child in a manner that seriously affects or is likely to seriously affect the child’s health, development or welfare,
 - and/ or
 - (b) sexual abuse of the child, whether caused by a single act, omission or circumstance or a series or combination of acts, omissions or circumstances or otherwise’ (Children First Act, 2015).
- 4.10 **Mandated Person:** all staff members are Mandated Persons as designated such by the *Children First Act* (2015). A mandated person is legally obligated to (i) report harm of children above a defined threshold to Tusla and (ii) help Tusla, if requested, in assessing a concern which has been the subject of a mandated report.
- 4.11 **Relevant Person:** means a person who is appointed by a provider of BCAT as a relevant service to be the first point of contact in respect of the Child Safeguarding Statement. The Relevant Person in BCAT is the Manager and in their absence the Team/ Project Leader.
- 4.12 **Relevant Service:** Organisations that have statutory responsibilities under the Children First Act 2015 are those that provide a relevant service to children and young people as specified in that act. BCAT is a relevant service.
- 4.13 **Safeguarding** means putting measures in place to reduce the risk of harm or abuse to promote and protect people’s human rights and their health and wellbeing and empowering people to protect themselves, live safely, free from abuse or neglect, where their choices are heard and respected.

- 4.14 **Service Users** are individuals who use the services of BCAT. They may also be referred to as clients.
- 4.15 **Staff Members** are individuals who work with BCAT. It should be construed broadly and includes employees, students, volunteers and locums.
- 4.16 **Tusla:** The Tusla Child and Family Agency is the dedicated State agency responsible for improving wellbeing and outcomes for children. Tusla comprises the HSE Children and Family Services, the Family Support Agency and the National Educational Welfare Board as well as incorporating some psychological services and a range of services responding to domestic, sexual and gender-based violence

5. Children First Principles

- 5.1 Children First (Tusla) has a set of principles that guide BCAT's work with families.
- 5.1.1 Everyone who works with children has a responsibility for keeping them safe.
 - 5.1.2 The best interests of the child must always come first.
 - 5.1.3 Keep alert to possible child protection and welfare concerns.
 - 5.1.4 You don't need to work with children to have a child protection or welfare concerns. You may find yourself working with adults whose health and/ or behaviour has harmed or may harm a child.
 - 5.1.5 The overall aim in all dealings with children and their families is to intervene proportionately to support families, stop the silence and safeguard childhood by keeping children safe from harm.
 - 5.1.6 Intervention should not deal with the child in isolation; the child must be seen in a family setting in order to build on existing strengths and protective factors in the family.
 - 5.1.7 Early intervention and family support should be available to promote the welfare of the child.
 - 5.1.8 Children should only be separated from their parent(s)/legal guardians(s) when all other means have been exhausted. Re-union should always be considered.
 - 5.1.9 Every child has the right to be safe at all times, and to be treated with respect and understanding. Taking account of their age and level of understanding, children should be consulted and involved in relation to all matters that affect their lives. To that end children have a right to be heard, listened to and taken seriously.
 - 5.1.10 Parent(s)/legal guardians(s) have a right to respect and should be consulted and involved in matters which concern their family.
 - 5.1.11 A balance must be struck between protecting children and respecting the needs of parent(s)/legal guardians(s) and families. Where there is a conflict, the welfare of the child must come first to keep them safe from harm.
 - 5.1.12 All agencies and professionals concerned with the protection and welfare of children must work cooperatively in the best interest of children and families.

6. Roles and Responsibilities

- 6.1 Management:
- 6.1.1 The Manager/ Team Leader/ Project Leader is responsible for ensuring that all staff members receive appropriate training, supervision and support regarding the policy and their legal responsibilities. It is the responsibility of the Manager to ensure that all staff members sign to confirm they have read and understood this policy.
 - 6.1.2 The Manager/ Team Leader/ Project Leader is responsible for ensuring that a copy of this policy is available to all staff members and service users.

- 6.1.3 The Manager/ Team Leader/ Project Leader will ensure that all staff are kept up to date with the training as detailed and make sure all training is compliant with legal and policy requirements in which safeguarding occurs and ensure proper records are maintained.
- 6.1.4 The Manager is the Designated Liaison Person (the role specified staff member with organisational responsibility for reporting a child protection concern within BCAT).
- 6.1.5 The Manager is the Designated Liaison Person and also the Relevant Person (first point of contact in respect of the Child Safeguarding Statement). In the absence of the Manager, the Team/ Project Leader will undertake their duties in respect of child protection and welfare.

6.2 Individual's Responsibility:

- 6.2.1 All staff members are required to follow all procedures within this policy.
- 6.2.2 All staff members are aware that safeguarding children is an essential part of their duty.
- 6.2.3 All staff members are required to act in accordance with the policy and are legally required to ensure that they comply with this policy. Any failure of staff members to work in accordance with the policy may be considered as an act of gross misconduct which would result in disciplinary action.
- 6.2.4 All staff members are Mandated Persons (legally obligated to (i) report harm of children above a defined threshold to Tusla and (ii) help Tusla, if requested, in assessing a concern which has been the subject of a mandated report).

7. Staff Training

- 7.1 All BCAT staff are aware that safeguarding children is an essential part of their duty and that they must make themselves aware of the signs of abuse and the appropriate procedures to report such concerns or allegations of abuse.
- 7.2 A copy of Children First: National Guidelines for the Protection and Welfare of Children (2017) will be made available to all staff members at induction and is available at all times in the BCAT main office. It is the responsibility of all staff members to have read and understood these national guidelines (see Appendix 1. See also Induction Policy).
- 7.3 Effective child protection involves compulsory training and clarity of responsibility. All staff will be offered training in child protection and should complete this training prior to any client work beginning. As a minimum standard, employees must have completed the Child Protection E-Learning training offered by Tusla (see Appendix 1).
- 7.4 Management will ensure that all staff are kept up to date with the training as detailed above.
- 7.5 Staff are required to follow all procedures within this policy.
- 7.6 Adequate safeguards for vetting, hiring and inducting appropriately qualified staff will be employed as per the Recruitment and Selection Policy, the Induction Policy and the Garda Vetting Policy.
- 7.7 BCAT recognises that dealing with child protection can be distressing; staff members will be appropriately supervised and supported around child protection issues as per this policy. Opportunities for debriefing will also be implemented in line with best practice.

8. Parent(s)/ Legal Guardian(s) of Children in the Service

Where parent(s)/legal guardians(s) bring children under 16 into this service, they will be introduced to and required to sign a Consent Form at the commencement of their relationship with the service. The agreement details and the following information will be given on introduction to the service/ at initial intake and again at relevant intervals:-

- 8.1 BCAT recognises that young people will have the best possible outcomes when their parent(s)/ legal guardian(s) are involved with the treatment and rehabilitation processes. Therefore, BCAT expects the involvement of the parent(s)/legal guardians(s) for all people under the age of 16, and *encourages* the involvement of the parent(s)/legal guardians(s) for all young people aged over 16 and under 18.
- 8.2 Information will be provided to the parent(s)/ legal guardian(s) as per the BCAT Confidentiality Policies.

- 8.3 The Child Protection and Welfare Policy (Under 18s) and Child Safeguarding Statement requires the mandatory reporting to Tusla of child protection concerns. Where child protection concerns arise, the relevant staff member will inform parent(s)/legal guardians(s) of these concerns before reporting them to Tusla, unless this would place the child at further risk, would prejudice an investigation or put the staff member at risk of harm from the family. BCAT will continue to provide support to parent(s)/legal guardians(s) during any child protection investigation. Child safety and protection is paramount for BCAT and will be prioritised over other concerns should an issue arise.
- 8.4 The full range of parenting supports available in the service.

9. Confidentiality

- 9.1 No undertaking regarding secrecy can be given in any situation. When a disclosure is made, the child/ adult will be advised that the staff member will only speak to the people who know how to respond to the situation. BCAT's Confidentiality Policy contains clear guidance in regard to extensions of confidentiality regarding issues relating to Child Protection. The confidentiality policy takes accordance of Children First Child Safeguarding: A Guide for Policy, Procedure and Practice (2nd Ed.), which states; "*the proportionate provision of information to the statutory agencies necessary for the protection of a child is not a breach of confidentiality or data protection*" (p11). BCAT's policy states that confidentiality may be extended when a service user discloses that:
- They have perpetrated sexual / physical abuse on another person.
 - They intend to perpetrate sexual / physical abuse on another person.
 - Any other issues in relation to Child Protection, as described in Children First.
- 9.2 During the course of their work, BCAT employees who come by information pertaining to a child protection concern perpetrated by a minor must follow this policy and relevant legislation. However, all parties who this policy applies to must also understand that both perpetrator and victim are both considered to fall under child protection guidelines. Hence, both cases should equally be managed in such a way as to not compromise integrity of any party involved.

10. Reporting A Concern (Structure, Process and Mandated Persons)

- 10.1 The *Children First Act (2015)* and guidelines set out the reporting structures for recording Child Protection concerns.
- 10.2 BCAT has a role specified staff member(s) in the role of Designated Liaison Person (DLP). The DLP in BCAT is the Manager or, in their absence, the Team/Project Leader (the Deputy Designated Liaison Person (DDL)). Their duties are:
- 10.2.1 To ensure that procedures and arrangements are in place within BCAT to protect children in line with national guidelines.
 - 10.2.2 To act as a liaison with statutory services in matters relating to child protection.
 - 10.2.3 To act as a resource person to staff members, providing guidance in matters relating to child protection.
 - 10.2.4 To take the lead role in ensuring the reporting and follow-up of referrals to Tusla/ the Gardaí, and ensuring that BCAT's procedures are followed systematically and thoroughly.
 - 10.2.5 To ensure staff members making a referral receive appropriate support from line management.
 - 10.2.6 To promote opportunities for mandatory child protection training and practice updates.
 - 10.2.7 To ensure proper records are kept on any interventions / decisions made during the process.
 - 10.2.8 To seek appropriate line management support and supervision throughout the process.
 - 10.2.9 To ensure all reports regarding child protection and welfare from staff, contract workers, volunteers or students are firstly discussed with and counter-signed by them.
- 10.3 Where the DLP is going to be absent from work, they will agree with the DDL to undertake their responsibilities in this regard in their absence.
- 10.4 **Responsibility to Report**
- 10.4.1 Every staff member has a statutory responsibility to report any child protection concerns.

- 10.4.2 Within BCAT the procedure is for all staff member concerns to be reported to the DLP. It is their responsibility to then determine whether there are reasonable grounds for concern, and where there are reasonable grounds for concern, to report this to the appropriate agency; either Tusla or the Gardaí.
- 10.4.3 Where a concern becomes apparent relating to the parent(s)/legal guardians(s) of a service user the team member should immediately contact the Manager or in their absence the Team/Project Leader.
- 10.4.4 The Protections for Persons Reporting Child Abuse Act, 1998 provides immunity from civil liability to persons who report child abuse in "reasonable and in good faith" to Designated Officers, Tusla or any member of the Gardaí. Where a mandated person is required to share information with Tusla following a formal Mandated Assistance request, they are protected from civil liability under Section 16(3) of the Children First Act 2015.

10.5 The Signs of Safety & Reasonable Grounds for Concern

10.5.1 Staff members may find themselves working with people whose behaviour has harmed or may harm a child (for example due to addiction, domestic violence, mental health issues, offending behaviour). Staff members must consider the welfare and safety of any child in that person's family and/or children who are in regular contact with that person. All staff members should follow the Child Protection and Welfare Reporting procedure in this policy, consult with their line managers/ Tusla and document their considerations where they have grounds for concern in this regard.

10.5.2 **The Signs of Safety:** BCAT refers to Tusla's Signs of Safety Approach as a way of assessing risk when working with children and their families. This approach is helpful as it gives a clear and effective way to assess risk and find solutions. The approach uses four simple questions to ask when thinking about and working with a family: (1) what are we worried about? (2) What's working well? (3) What needs to happen? (4) How worried are we on a scale of 1 to 10. The questions provide a focus for consideration before contacting Tusla (See Appendix 2).

10.5.3 **Reasonable grounds for concern:** In accordance with the *Children First: National Guidelines for the Protection and Welfare of Children* (2017), reasonable grounds for concerns are defined as:

- (a) An injury or behaviour that is consistent both with abuse and an innocent explanation, but where there are corroborative indicators supporting the concern that it may be a case of abuse.
- (b) Evidence (e.g. injury or behaviour) that is consistent with abuse and unlikely to have been caused in any other way.
- (c) Any concern about possible sexual abuse.
- (d) Consistent indication over a period of time that a child is suffering from emotional or physical neglect.
- (e) Admission or indication by someone of an alleged abuse.
- (f) A specific indication from a child that they were abused.
- (g) An account from a person who saw the child being abused.
- (h) Admission or indication by an adult or a child of an alleged abuse they committed.
- (i) Admission or indication by an adult that they are having thoughts in relation to abusing a child (Identifiable or not).
- (j) A concern arises from other sources about an adult who may pose a risk to children, even where 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.

If any staff member is unsure if a report should be made to Tusla, the Duty Social worker can be contacted for an informal conversation.

It is not necessary to prove that abuse has occurred in order to report a concern to Tusla. If reasonable grounds for concern have been established, even if all the information about the family has not yet been established, the matter should be reported to Tusla regardless.

10.6 Staff Responsibility when a Child Protection Concern Arises

- 10.6.1 When a staff member becomes concerned that they may be handling an abuse or child welfare situation they should:
- 10.6.1.1 *Provide Immediate Protection & Report:* Make arrangements to provide immediate Protection if necessary: Take any immediate actions to safeguard anyone at immediate risk of harm including seeking, for example, medical assistance or the assistance of Tusla/ the Gardaí, as appropriate. Staff are to inform the DLP as a matter of urgency. If they are not available the issue should be raised with the DDLP. In no case should serious concerns be left unaddressed or unreported. Under no circumstances should any individual member of staff or the team itself attempt to deal with the problem of abuse alone.
 - 10.6.1.2 *Receive the information:* Listen carefully to what is being said or observed. Questions should be supportive and for the purposes of clarification. Do not appear shocked, display negative emotions or make judgments.
 - 10.6.1.3 *Reassure:* Reassure the person that they are right to share the information and that you will ensure that appropriate support is provided to the child. Do not promise to keep secrets or give sweeping reassurances.
 - 10.6.1.4 *Refer:* Refer to the DLP at all times throughout the process for guidance.
 - 10.6.1.5 *Respond:* Staff members will take early and appropriate action to raise the concerns, in line with this policy. Undertaking a comprehensive assessment or investigative interview is the responsibility of specialist staff in Tusla or the Gardaí.
 - 10.6.1.6 *Record:* An essential part of the child protection process is to ensure that staff members take notes of what has been said to them in the words in which it was said or what they have observed immediately after the conversation / observation. All records should be kept in accordance with BCAT's Case Notes, Written Records and Correspondence Policy where it applies.
 - 10.6.1.7 *Seek support:* It is important to remember that dealing with child abuse concerns is stressful, and can have an impact on one's emotional wellbeing. Therefore, staff members should actively seek out support from line management and peers within the bounds of confidentiality.
- 10.6.2 Where staff members have concerns regarding other children in the community who do not attend BCATs' services, they have a responsibility to report these concerns to Tusla/ the Gardaí.
- 10.6.3 Where a member of the public or a person from another agency advises a staff member of child protection concerns regarding any child;
- 10.6.3.1 They should be advised to report their concerns directly to Tusla/ the Gardaí and be given the appropriate contact details. The person who has expressed the concern will be informed that the DLP is obligated to report the information to Tusla as per this policy and the Confidentiality Policy.
 - 10.6.3.2 The BCAT staff member should record details of the information and discuss these with the DLP.
 - 10.6.3.3 The DLP should pass the concerns on to Tusla/ the Gardaí referring them to the source of the information.

10.7 Responding to Disclosure from a Child

- 10.7.1 The *Children First: National Guidelines for the Protection and Welfare of Children* provide guidelines on responding to disclosure by a child of abuse.
- 10.7.2 This includes:
- 10.7.2.1 *Supportively responding to disclosure:*
 - (a) Give the child time to explain.
 - (b) Do not pressurise or ask too many questions.
 - (c) Accept and believe the child.
 - (d) Do not express anger or judgement about the alleged perpetrator.

- (e) It may also be necessary to reassure the child that your feelings towards them have not changed.

10.7.2.2 *Asking questions:*

- (a) Questions should be supportive and for the purpose of clarification only.
- (b) Avoid leading questions, asking about intimate details or suggesting that something else happened other than what has been told.

10.7.2.3 *Managing confidentiality:*

- (a) Do not promise to keep secrets.
- (b) Acknowledge trust shown in disclosure.
- (c) Explain exactly who to and why you are sharing the information i.e. some secrets should not be kept because they make matters worse and hide things that need to be known if people are to be helped and protected from further hurt.
- (d) Exercising caution regarding making promises: do not make promises you cannot keep to the child in relation to what will happen next.

10.7.2.4 *Providing on-going support:*

- (a) Maintain a positive relationship with the child after disclosure.
- (b) Keep lines of communication open and listening carefully.
- (c) Continue to include the child in usual activities as far as is practicable but where necessary, immediate action should be taken to ensure child's safety.

10.8 Responding to a Disclosure about Retrospective or Historical Abuse

10.8.1 The term retrospective abuse refers to abuse that an adult discloses that took place during their past, often as a child.

10.8.2 In the event a case of retrospective abuse is disclosed, the BCAT staff member should refer to the DLP for advice on discussing their legal obligations with their client. It is a very complex area; it involves the accused's rights to their good name, privacy, and right to earn a living together with the requirements of natural justice.

10.8.3 Where a retrospective abuse disclosure gives rise to a current concern for the protection or welfare of a child, a Child Protection and Welfare Report Form should be submitted to Tusla (see Appendix 3). It may also be deemed necessary to contact the Gardaí. Staff members should refer to the DLP in this regard.

10.8.4 Staff members should also refer to the Vulnerable Persons at Risk of Abuse Safeguarding Policy for more information and details on responding to a disclosure about retrospective or historical abuse.

10.8.5 Adults disclosing that they have abused or are abusing children

10.8.5.1 BCAT staff members may find themselves working with people whose behaviour has harmed or may harm a child (e.g. due to addiction, domestic violence, mental health issues, offending behaviour). Staff members must consider the welfare and safety of any child in that person's family and/ or children who are in regular contact with the person.

10.8.5.2 All staff members should follow the BCAT child protection and reporting procedures, consult with their line managers/ Tusla and document their considerations where they have any of the following concerns relating to a child:

- (a) A situation may arise when a client of BCAT, may have themselves been abusers of children past or current. By disclosing this to a staff member, they are in fact disclosing a criminal act, and this must in all cases be reported to the Gardaí & Tusla following the guidelines as defined above.
- (b) Where an adult discloses that they are having thoughts in relation to abusing a child (identifiable or not).
- (c) Where a concern arises from other sources about an adult who may pose a risk to children, even where 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).

- (d) A concern arises in relation to an unidentified adult who may pose a risk to children, whether or not there is a specific child named in relation to the concern. Tusla may have corroborating information that can help identify the person concerned.
 - (e) Where children may still be at risk, this must immediately be reported to Gardaí as well as Tusla.
- 10.8.5.3. The principle governing all actions in the disclosure of child abuse is that the safety and welfare of the child is paramount.
- 10.8.5.4. Refer also to the Confidentiality Policy.
- 10.8.5.5. Refer also to the Vulnerable Adults at Risk of Abuse Safeguarding Policy.

11. Dealing with Other Considerations

11.1 Abuse by visitors to the service

The possibility of abuse by a visitor must be recognised. If such abuse occurs, it should be dealt with in the same way as other incidents of suspected abuse. All visitors to BCAT must be met at the doors and must not in any circumstances be left unattended on the premises.

11.2 Peer abuse

In child abuse cases the alleged perpetrator may also be a child. In such cases the management of the case should be as follows:

- 11.2.1 In a situation where child abuse is alleged to have been carried out by another child, the child protection procedures should be adhered to for both the victim and the alleged perpetrator (meaning it should be considered a childcare and protection issue for both children).
- 11.2.2 During the course of their work, BCAT employees who come by information pertaining to a child protection concern perpetrated by a minor must follow this policy and relevant legislation. However, all parties who this policy applies to must also understand that both perpetrator and victim are both considered to fall under child protection guidelines. Hence, both cases should equally be managed in such a way as to not compromise the integrity of any party involved.

12. Reporting Procedures

12.1 Reporting Procedures (General)

The following procedures are set out according to the **standard** reporting procedure in respect of suspected child protection concerns outlined in the Children First Guidelines and the Tusla Guide to Reporting of Child Protection and Welfare Concerns (see also Appendix 1):-

- 12.1.1 Staff members and the DLP will ensure that notes are taken throughout the process of any issues that cause concern. These may be vital if the concerns become reportable. BCAT will keep written records of all child protection and welfare concerns, including concerns that may not reach the threshold for reporting to Tusla. Concerns must be recorded in order to identify any potential patterns that may cause concern in relation to safeguarding children. In order to ensure that all relevant information is recorded and appropriate steps are taken, concerns should be recorded on the 'Recording Child Protection and Welfare Concerns' Form (see Appendix 3). It is essential to record accurate notes in line with the 'Case Notes, Written Records and Correspondence' Policy.
- 12.1.2 All observations, discussions and records relating to concerns must include dates, times, names, location, context and any other factual, objective information which may be relevant and should be signed and dated.
- 12.1.3 Where serious abuse is suspected immediate action will be required. Staff members are to inform the DLP as a matter of urgency. If the DLP is not available the issue should be raised with the DDLP. In no case should serious concerns be left unaddressed or unreported.
- 12.1.4 A concern about a potential risk to children posed by a specific person, even if the children are unidentifiable, should also be communicated to Tusla/ the Gardaí.

- (a) It is important to be aware that the person who first encounters a case of alleged or suspected abuse is not responsible for deciding whether abuse has occurred. That is a task for Tusla/ the Gardaí. Under no circumstances should any individual member of staff or the team itself attempt to deal with the problem of abuse alone.
- (b) If at any point throughout the reporting process there is a continued failure to respond to significant concerns either within the organisation or on the part of Tusla, this should be brought to the attention of the Chairperson of the BCAT Board of Directors (the Chairperson), who should raise the concerns at a higher level in Tusla.

12.2 Standard Reporting Procedures (Staff)

- 12.2.1 If a child has disclosed any information which would could indicate abuse/ a child protection issue, the BCAT staff member should immediately contact the DLP to address their concerns.
- 12.2.2 Where it is decided by the DLP and the staff member that the information does not constitute sufficient grounds for concern, the information and the basis of this decision should be recorded in the service user's file. Any action taken as a result of the concern should also be recorded. If any staff member is unsure if a report should be made to Tusla, the duty social worker can be contacted for an informal conversation.
- 12.2.3 Where there is disagreement between the DLP and the staff member about whether to report concerns to Tusla/ the Gardaí, either party can seek the advice anonymously from the local duty social worker. The staff member should be given a clear written statement of the reason why the organisation is not reporting the concern and advised that, if they remain concerned about the situation, they are free to consult with or report to Tusla/ the Gardaí. The Protection for Persons Reporting Child Abuse Act, 1998 will apply to any staff member who wishes to report to Tusla.
- 12.2.4 In the event of an emergency where a child is perceived to be in immediate danger and Tusla cannot be contacted, the Gardaí should be contacted.

12.3 Standard Reporting Procedures (DLP)

- 12.3.1 If the information constitutes reasonable grounds for concern, the DLP should ensure that a telephone referral followed by a formal report in writing is made to the local duty social worker in Tusla, on their Child Protection and Welfare Report Form (see Appendix 3).
- 12.3.2 In advance of submitting a form it may be necessary clarify or get more information about the matter.
- 12.3.3 The details for reporting a concern in BCAT is: Duty Social Worker, Tusla, Wicklow Primary Healthcare Centre, Port Road, Wicklow, (ph: 076 6958400) or Tusla Duty Social Work Office, Child and Family Agency, Unit 9, Nutgrove Retail Park, Churchtown, Dublin 14 (ph: 01 9213400). (Note: in an emergency situation, where it is believed that the child is at risk of immediate harm, Tusla/ the Gardaí should be contacted without delay before a written report is submitted and all actions recorded according to BCAT policy and practice).
- 12.3.4 The DLP should wait for receipt of complaint.
- 12.3.5 It is the responsibility of the staff member who has the concerns to complete the form, which should then be counter-signed by the DLP before it is forwarded to Tusla. Where the DLP is not available on site to sign the form, they should be aware of its contents.
- 12.3.6 It is good practice that parent(s)/legal guardians(s) be informed that a report is to be made to Tusla, unless doing so would put the child at further risk.
- 12.3.7 In the event of an emergency, or the non-availability of Tusla, the report should be made to the Gardaí. This may be done at any Garda Station
- 12.3.8 A social worker may wish to speak to the person who first witnessed the incident, received the disclosure, or experienced the concern; the DLP and staff member(s) should be informed of this possibility.
- 12.3.9 If no appropriate response is received from Tusla, the social worker and / or DLP should follow up on the referral by phone and in writing at the appropriate level.

12.4 After a Report is Made / Follow up on Child Protection Report with Statutory Services

12.4.1 For Children who are Clients:

- 12.4.1.1 Where BCAT has an ongoing relationship with the case, follow up with the relevant social worker can be organised as part of the care plan; where there is consent provided by the parent(s)/legal guardians(s) involved in the case. Ideally a case meeting will be held to facilitate agreement on what supports need to be provided and which agency is most suitable to provide these.
- 12.4.1.2 Follow up contact should also be made where there is repetition of the concerns relating to child protection, or where new concerns arise. In this case consent from the adult involved in the case is not required.
- 12.4.1.3 If consent for sharing of information is not provided by the adult then statutory services will be unable to provide any information following receipt of the initial report.
- 12.4.1.4 Under section 17 of the Children First Act, 2015, where a relevant person received information from Tusla during the assessment of a mandated report, it is a criminal offence to share that information with a third party, without written authorisation from Tusla, unless in accordance with the law. Other employees of BCAT would not be considered 'third party' under GDPR. Information sharing should be still limited on a need-to-know basis.

12.4.2 For Children who are not clients:

- 12.4.2.1 No further action is required by staff members once the matter has been referred to Tusla/ Gardaí.

12.5 Failure to Report & Protected Disclosures

- 12.5.1 BCAT may consider the need in some circumstances to report their concern directly to the Gardaí. All staff members must be aware that failure to record, disclose, share and report information/ a concern in accordance with this policy is a failure to discharge a duty of care and that it may be an offence under Section 176 of the Criminal Justice Act 2006 (reckless endangerment of children, and/ or the Criminal Justice (Withholding of Information on Offences against Children and Vulnerable Persons Act 2012). Under this Act, 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 they have 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 is practicable to do so to a member of the Gardaí.
- 12.5.2 Staff members should be aware they are protected from being penalised for whistleblowing about wrongdoing or potential wrongdoing that has come to their attention in a work related context (see the Protected Disclosures Act 2014 as amended by the Protected Disclosures (Amendment) Act 2022).
- 12.5.3 See also Appendix 1.

13. Children Moving

- 13.1 When a service user connected with a child protection complaint moves address and there are continuing child welfare and protection concerns, the DLP should formally notify Tusla of (a) the original address, (b) the new address, (c) of the fact that the family have moved and (d) of details of where they have moved to (where this is known), so that they can make any necessary arrangements to liaise with one another and to continue to provide support to the service user / child.
- 13.2 When a service user who is being key worked or case managed leaves BCAT to attend another service for key working or case management, and will no longer have a formal connection with BCAT, and there have been concerns about child protection, BCAT will:

- 13.2.1 Inform the Tusla Social Work Service of the closure of the case and the move to another service.
- 13.2.2 In the context of the role of the other agency, pass on current concerns held by BCAT in relation to child protection, having advised the parent(s)/legal guardians(s) of our intention to do this unless doing so would place the child at risk.

14. Responding to and Reporting Accusations against a Member of the Team

- 14.1 Where allegations of abuse of children are made against a staff member the welfare of the child is of paramount importance. And all protective measures proportionate to the assessed risk must be taken to safeguard their welfare.
- 14.2 It is acknowledged that staff members may be subjected to erroneous or vexatious allegations which can have a devastating effect on the person's health, career and reputation. BCAT is also committed to safeguarding the rights of the staff member against whom allegations of abuse are made to a fair and impartial investigation of the complaint.
- 14.3 If a member of staff, volunteers, students, Tus and Community Employment workers, agencies providing in reach services and locums under the banner of BCAT is accused of abuse, the matter will be investigated immediately in collaboration with external authorities.
- 14.4 Nothing should be done to compromise the statutory responsibilities of the Gardaí. If it is considered that a criminal act may have occurred, agreement on engagement with the person who is the subject of the complaint should be discussed in the first instance with the Gardaí.
- 14.5 Where such concerns arise, the matter will be addressed in a timely and fair manner, and appropriate confidentiality in respect of all parties will be maintained.
- 14.6 BCAT is committed to ensuring that staff who are concerned about potentially inappropriate behaviour by a colleague can report their concerns to senior staff without fear of recrimination.
- 14.7 BCAT is guided by the HSE Policies for Managing Allegations of Abuse against Staff Members (see Appendix 1). If an allegation is made against a staff member, two separate procedures must be followed:
- 14.8 The standard reporting procedure in respect of suspected child protection concerns (outlined in sections 3.4 and 3.5 of Children First) and the Tusla Guide to Reporting of Child Protection and Welfare Concerns (see Appendix 1) and, and, the procedures outlined below:
- 14.9 Procedures to follow for dealing with the worker involved in the complaint:
 - (a) Ensure no child is exposed to unnecessary risk.
 - (b) Inform the Chairperson of the Board of Directors.
 - (c) Confidentiality is of the utmost importance and only those who need to be informed should be notified or made aware of the situation.
 - (d) A staff member may be suspended with pay to protect the child / other children attending the organisation, at all times considering the employee's contract and natural justice.
 - (e) An action following an allegation of abuse against a staff member should be managed in consultation with Tusla and the Gardaí. An immediate meeting should be arranged with these bodies for this purpose.
 - (f) After consultation with statutory services, the Chairperson should advise the person accused of the allegation and the procedure to be followed.
 - (g) The Chairperson and Board of Directors should take care that the actions taken by them do not undermine or frustrate any investigations being conducted by Tusla or Gardaí.
 - (h) Staff, volunteers, students, Tus and Community Employment workers, agencies providing in reach services and locums under the banner of BCAT may be subject to erroneous or malicious allegations. All allegations should be dealt with sensitivity and support, for example counselling may be offered.
 - (i) It is recommended that the same person should not have responsibility for the **reporting issues** and the **employment issues**. They should be separated and managed independently. There may be situations where the allegations turn out to be unfounded. But it is important that suspicions are treated seriously and in the manner outlined above.

15. Special Considerations

15.1 Young People Self-Harming/ Evidence of Self Harm

- 15.1.1 BCAT acknowledges that suicidal ideation, the action of suicide and the desire to self-harm are issues which affect many people, including children. BCAT is committed to responding to these issues in a way which is direct, supportive and informed by good practice. Refer to the BCAT Policy on 'Suicide, Self Harm and Self Injury Intervention; Policy for information on practice and procedure in this regard.
- 15.1.2 Should a staff member have a concern that a child is at risk of imminent harm, they should take appropriate immediate actions to safeguard them including seeking, for example, medical assistance, Tusla or the Gardaí as appropriate.

15.2 Underage Sexual Activity

15.2.1 *General*

- 15.2.1.1 Underage sexual activity is any sexual activity where one or both persons in under the age of 17.
- 15.2.1.2 For the purposes of the criminal law, the legal age of consent for sexual intercourse is 17 years (Criminal Law (Sexual Offences) Act 2006 -2017 as amended by the Criminal Law (Sexual Offences) Amendment Act 2019 – see Appendix 1).
- 15.2.1.3 It is a crime to participate in sexual intercourse with any child under the age of 17. However, this may not constitute sexual abuse. Non-consensual sexual activity with a 17 year old would obviously constitute abuse.
- 15.2.1.4 It is not the function of BCAT to police consensual teenage sexual activity. We encourage and support young people to behave in an informed and responsible manner in all areas of their lives.

15.2.2 *Procedures*

- 15.2.2.1 If a staff member becomes aware of underage sexual activity, they should give careful consideration as to whether or not the behaviour could be considered abusive. If the behaviour could be considered abusive, guidelines in the previous sections of this policy should be followed.

15.2.3 *Advice, Support and Guidance*

- 15.2.3.1 If the staff member considers that the behaviour is not abusive, they should offer the child/ young person advice, support and guidance. BCAT ensures that it has appropriate materials and service information available to assist staff members in addressing issues of relationship and sexual health (e.g. from Barnardos/ Tusla).

15.2.4 *Exemptions from Reporting Consensual Sexual Activity*

- 15.2.4.1 While a sexual relationship where one or both parties are under 17 years of age is illegal, when making a mandated report to Tusla, it might not be regarded as child sexual abuse.
- 15.2.4.2 There are certain exemptions from reporting underage consensual sexual activity under section 14(3) of the Children First Act 2015. If you are satisfied that all of the following criteria are met, you are not required to make a report to Tusla:
 - (a) The young person(s) concerned are between 15 and 17 years old, and
 - (b) The age difference between them is not more than 24 months, and
 - (c) There is no material difference in their maturity or capacity to consent, and
 - (d) The relationship between the people engaged in the sexual activity does not involve intimidation or exploitation of either person, and
 - (e) The young person has not disclosed or indicated that they have been (i) harmed, (ii) are being harmed, or (iii) are at risk of being harmed, and
 - (f) The young person's concerned state clearly that they do not want any information about the activity to be disclosed to Tusla.

16. Safe Practice

- 16.1 If a parent/ legal guardian brings a child into the service, the service will record the name and address of the child, but the child will be the responsibility of the parent / legal guardian.
- 16.2 In the event that a child who is under the age of 16 is brought into the organisation accompanied by an adult who is not their parent / legal guardian, and where this is a new arrangement or unknown arrangement, the appropriate brief intervention will be provided however the young person will be advised that a continuation of 1-1's or the group work will necessitate signed consent by one or both parent(s)/legal guardians(s).
- 16.3 BCAT offers 1-1 appointments to young people engaged in addiction treatment and rehabilitation processes. This necessitates a level of privacy in order to deliver clinical interventions as appropriate. However, at no time should young people be within an enclosed space with a BCAT staff member whilst access to the room is limited to others in the building. To achieve this policy position it is a requirement that the rooms young people are using have windows on doors and surrounding panels, whereby other staff members can have an unrestricted view of both parties.

17. Garda Vetting

- 17.1 The Garda Vetting policy states that all staff members working directly with under 18s or vulnerable adults will be required to furnish details of past addresses to facilitate garda vetting and that any individuals with past offences in relation to child abuse will not have access to children or vulnerable adults by the organisation. The National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016 provide a statutory basis for the vetting of persons carrying out relevant work with children.
- 17.2 See Garda Vetting Policy for further detail.

18. Contact Details for Relevant Statutory Services

An Garda Síochána

Bray Garda Station, Convent Ave, Bray, Co. Wicklow.
Ph: 01 666 5300.

Tusla Duty Social Worker

Wicklow Primary Healthcare Centre, Port Road, Wicklow.
Ph: 076 6958400.

Tusla Duty Social Work Office

Child and Family Agency, Unit 9, Nutgrove Retail Park, Churchtown, Dublin 14.
Ph: 01 9213400.

BCAT Manager

Bray Community Addiction Team, 37 Beech Wood Close, Boghall Road, Bray, Co. Wicklow.
Ph: 01 2764692.

Appendix 1 – The National Principles, Procedures, Protocols and Legislation Supporting Our Responsibility to Safeguard Children and all U18s Service Users

Principles, procedures, protocols

1. Children First National Guidelines for the Protection and Welfare of Children (2017) (https://www.tusla.ie/uploads/content/Children_First_National_Guidance_2017.pdf).
2. HSE Children First Services and Information (<https://www.hse.ie/eng/services/list/2/primarycare/childrenfirst/>).
3. HSE Policies for Managing Allegations of Abuse against Staff Members (<https://www.hse.ie/eng/staff/resources/hrppg/trust-in-care.pdf>).
4. Tusla Child and Family Agency (<https://www.tusla.ie/about/>).
5. Tusla Children First E-Learning Programme (<http://www.tusla.ie/children-first/children-first-e-learning-programme>).
6. Tusla Guide for the Reporting of Child Protection and Welfare Concerns (https://www.tusla.ie/uploads/content/4214-TUSLA_Guide_to_Reporters_Guide_A4_v3.pdf).

Legislation

1. Children First Act 2015 (<https://www.irishstatutebook.ie/eli/2015/act/36/enacted/en/html>).
2. Criminal Justice Act 2006. (<https://www.irishstatutebook.ie/eli/2006/act/26/enacted/en/print.html>).
3. Child Care Act 1991 (<https://www.irishstatutebook.ie/eli/1991/act/17/enacted/en/html>).
4. Children Act 2001 (<https://www.irishstatutebook.ie/eli/2001/act/24/enacted/en/html>).
5. Criminal Law (Sexual Offences) Act 2006-2017 as amended by the Criminal Law (Sexual Offences) Act 2019 (<https://www.irishstatutebook.ie/eli/2017/act/2/enacted/en/html>) (<https://www.irishstatutebook.ie/eli/2019/act/4/enacted/en/html>).
6. Protections for Persons Reporting Child Abuse Act 1998 (<https://www.irishstatutebook.ie/eli/1998/act/49/enacted/en/print.html>).
7. Criminal Justice (Withholding of Information on Offences against Children and Vulnerable Persons) Act 2012 (<https://www.irishstatutebook.ie/eli/2012/act/24/enacted/en/html>).
8. Protected Disclosures Act 2014 and the Protected Disclosures (Amendment) Act 2022 (<https://www.irishstatutebook.ie/eli/2014/act/14/enacted/en/html> / <https://www.irishstatutebook.ie/eli/2022/act/27/enacted/en/html>).
9. National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 – 2016 (<https://www.irishstatutebook.ie/eli/2012/act/47/enacted/en/html>).

Appendix 2 – The Signs of Safety (Tusla)

The BCAT staff member who has a concern should ask the following questions and then follow the procedures for reporting as set out in this policy above.

Note: it may not always be appropriate or necessary to ask all of these questions and staff members should use their professional judgement in each situation.

(a) Questions for BCAT staff members to ask themselves:

Q1 – What am I worried about?

- What have I seen or heard that worries me about the child?
- If nothing changes, what am I most worried about that will happen to the child?
- What are the adults that are caring for the child doing that is bad for or harming the child?
- What has been the impact of their behaviour on the child?
- What would the child say they are most worried about?

Q2 – What is working well?

- Who helps or supports the family and child?
- How do they help?
- Thinking about the problems I am worried about who has helped the child and family deal with this problem in the past?
- What do I like about the child/ parent(s)/legal guardians(s)?
- What would the child say are the best things about their life?

(b) Helpful questions BCAT might ask the family before reporting to Tusla.

Q3 – What needs to happen?

- Is there anyone else supporting you at the moment? Do you mind if I speak to them?
- Is there any other support that you feel you need at the moment?
- What would you ideally like to see happen next?
- Have you told anyone about this before?
- Has this happened before?
- Do you feel that professionals understand your concerns?

Q4 – How worried are we on a scale of 1-10?

- We use numbers from '0' to '10' to rate how safe a child's environment is where '10' means it is very safe and '0' means that we are certain the child will come to harm or be abused.

(c) Recording Child Protection and Welfare Concerns Form (Template)

Name of DLP	
Details of Person who raised the concern	
Child's Name	
Child's DOB	
Nature of the Concern relating to the child	
Has the DLP or other nominated person spoken to the child's parent/guardian about this concern? If yes , what is their response? If no – please record why they have not been informed about this concern	
Has the DLP reviewed previous Recording Concerns Forms to see if there are other concerns relating to this child?	
What are the BCAT's next steps in supporting the child/parent/family?	
Has BCAT had Informal Consultation with Tusla? Y/N	
Has this concern been reported to Tusla? Y/N	
Reason for Decision: Reason for decision might include: <ul style="list-style-type: none"> • Meets Reasonable Grounds for Concern, or • Advice from Tusla, or • DLP view that Reasonable Grounds for Concern are not met, or • Mandated person view that threshold of harm has been met or exceeded 	
Has the worker been informed of the decision? Y/ N	

Appendix 3 – Tusla Reporting Forms (Tusla Retrospective Abuse Reporting Form (CPWRF) & Tusla Child Protection and Welfare Report Form (RARF))

Child Protection or welfare reports should be submitted to Tusla using Tusla’s online reporting portal. This is the most secure and efficient method of making a confidential report to Tusla. In circumstances where Tusla’s online reporting portal is not accessible, the Report Form should be sent by registered post or delivered in person, to the Tusla dedicated social work contact point. Reports of concern should be submitted to Tusla without delay. Where a verbal report is made, a written report must be submitted to Tusla as soon as practicable thereafter, and no later than three days. Tusla has two forms for reporting child protection and welfare concerns: (a) The Child Protection and Welfare Report Form and (b) The Retrospective Abuse Report Form

(a) Tusla Child Protection and Welfare Report Form (RARF)

https://www.tusla.ie/uploads/content/Child_Protection_and_Welfare_Report_Form_FINAL.pdf

- The Child Protection and Welfare Report Form (CPWRF) should be completed and submitted to Tusla for concerns about children under the age of 18.
- Where the child is identifiable, the report should be sent to the Tusla dedicated social work contact point in the area where the child lives.
- Where the child is not identifiable, and the person subject of the abuse allegation is identifiable, the report should be sent to the Tusla dedicated social work contact point in the area where the person subject of the abuse allegation lives.
- Where neither the child nor the person subject of the abuse allegation is identifiable, a consultation should be sought with Tusla.

(b) Tusla Retrospective Abuse Reporting Form (CPWRF)²

https://www.tusla.ie/uploads/content/Retrospective_Abuse_Report_Form_FINAL.pdf

- With respect to a retrospective abuse allegation, where the person subject of abuse allegation is identifiable, the report should be sent to the Tusla dedicated social work contact point in the area where the person subject of the abuse allegation lives.
- If the person lives abroad, the report should be sent to Tusla dedicated social work contact point in the area where the adult disclosing the abuse lived at the time of the alleged abuse.
- If a person subject of the abuse allegation is confirmed as deceased, a report to Tusla is not required unless there are broader issues of concern, in which case, consult with Tusla.
- Where the person subject of the abuse allegation is not identifiable, a consultation should be sought with Tusla, and where necessary, the report should be sent to Tusla dedicated social work contact point in the area where the adult disclosing the abuse lived at the time of the alleged abuse.
- Where a retrospective abuse disclosure gives rise to a current concern for the protection or welfare of a child, a Child Protection and Welfare Report Form should also be submitted to Tusla (see 3. Below). It may also be deemed necessary to contact the Gardaí.

² Staff members should also refer to the Vulnerable Person at Risk of Abuse Safeguarding Policy for more information and details on responding to a disclosure about retrospective or historical abuse.