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1 Child Protection Policy

1.1 Introduction

All pupils attending Wicklow Educate Together National School (WETNS) have a right to be educated in a secure and safe environment. WETNS embraces this right and is dedicated to promoting and ensuring the protection of all pupils. The school is committed to the continued education and care of the child in the event of an allegation. In any investigation of abuse, all parties will be presumed innocent until proven otherwise.

This Child protection policy has been developed for WETNS, based on the following guidelines:

- *Children First*. National Guidelines for the protection and Welfare of Children. 1999
- *Our Duty to Care*. The principles of Good practice for the Protection of Children and Young people. 2002
- *Child protection- Guidelines and procedures*. Department of Education and Science 2001

In addition, it is also important to refer to the legal context for this policy:

- UN Convention on the Rights of the Child
- The Child Care Act 1991
- The Education Act 1998
- The Freedom of Information Act 1997
- Protection of persons reporting Child abuse act 1998

This policy should be read in conjunction with other policies relating to the school in particular the Complaints Procedure, the Anti Bullying policy, Code of Behaviour and Garda Vetting procedures.

1.2 Aims of the Policy

- To create a safe, trusting, responsive and caring environment.
- To provide a personal safety skills education which specifically addresses abuse prevention for all children in the school.

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- To develop awareness and responsibility in the area of child protection amongst the whole school community.
- To put in place procedures for good practice to protect all children and staff.
- To ensure that all staff members are aware of and familiar with the “Children First” and the DES guidelines and procedures in relation to reporting concerns and/or disclosures of child abuse.
- To provide for ongoing training in this and related areas for all school staff.

1.3 Confidentiality

All information regarding concerns/ allegations of possible child abuse will only be shared on a need to know basis in the interests of the child.

The Board of Management do not need to know all the details of an allegation of abuse. The Board have a designated person to support the school/staff /children in relation to allegations.

No undertakings regarding secrecy can or will be given. Those working with a child and family will make this clear to all parties involved.

Giving information to others for the protection of a child is not a breach of confidentiality.

1.4 The Designated Liaison Person (DLP)

The role of the DLP is to inform the Board, at each meeting, whether there has or has not been a referral/report made to the HSE. *In addition to informing the school authority of those cases where a report involving a child in the school has been submitted to the HSE, the DLP shall also inform the school authority of cases where the DLP sought advice from the HSE and as a result of this advice, no report was made. At each Board of Management meeting the principal’s report shall include the number of all such cases and this shall be recorded in the minutes of the board meeting.*

Circular 0065/2011

1.5 Prevention

The Stay Safe Programme is the primary resource used in this school to provide education for children on abuse prevention. The programme is taught as part of the schools Social, Personal and Health Education (SPHE) curriculum under the strand ‘Myself’ and the strand unit “Safety and Protection”.

On enrolment of their child, parents will be informed that the “Stay Safe Programme” is in use in this school and will be asked to sign permission for their child to participate in the programme.

The formal lessons of the programme will be taught in their entirety every second year in accordance with the SPHE two year cycle plan.

Children will be made aware of the complaints procedure within the school.

Staff will make every effort to ensure that the messages of the programme are reinforced whenever possible.

The code of conduct for staff and volunteers is the basis for protection of children from abuse within the school.

1.6 Recruitment

Teachers are vetted by the Teaching Council under Teaching Council regulations.

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KETNS will use the Garda vetting policy/procedure for volunteers in regular contact with children. Any volunteers for one off talks will not be left unsupervised with the children. (ref. Garda vetting policy for staff and volunteers WETNS).

Refer to the policy on the employment of substitute teachers for details on vetting of substitutes.

1.7 Definitions of Abuse

In order to respond to and prevent child abuse, all school personnel are familiar with signs and behaviours that may be indicative of child abuse. Child abuse can be categorised into four different types:

- neglect
- emotional abuse
- physical abuse
- sexual abuse

A child may be subjected to one or more forms of abuse at any given time. For detailed definitions of abuse, refer to *Children First: National Guidelines for the Protection and Welfare of Children* (Department of Health & Children). The categories of abuse may be summarised as follows:

Child Neglect

Neglect can be defined in terms of an omission, where the child suffers significant harm or impairment of development by being deprived of food, clothing, warmth, hygiene, intellectual stimulation, supervision and safety, attachment to and affection from adults or medical care.

Harm can be defined as the ill-treatment or the impairment of the health or development of a child. Whether it is significant is determined by his/her health and development as compared to that which could reasonably be expected of a child of similar age.

Neglect generally becomes apparent in different ways over a period of time rather than at one specific point.

Emotional Abuse

Emotional abuse is normally to be found in the relationship between an adult and a child rather than in a specific event. It occurs when a child's need for affection, approval, consistency and security is not met. It is rarely manifested in terms of physical symptoms.

For children with disabilities it may include over-protection or conversely failure to acknowledge or understand a child's disability.

Examples of emotional abuse include:

- Persistent criticism, sarcasm, hostility or blaming
- Where the level of care is conditional on his or her behaviour
- Unresponsiveness, inconsistent or inappropriate expectations of a child
- Premature imposition of responsibility on the child
- Over or under protection of the child
- Failure to provide opportunities for the child's education and development
- Use of unrealistic or over-harsh disciplinary measures
- Exposure to domestic violence

Physical Abuse

Physical abuse is any form of non-accidental injury or injury which results from willful or neglectful failure to protect a child.

Sexual Abuse

Sexual abuse occurs when a child is used by another person for his or her gratification or sexual arousal, or for that of others. Cases of underage pregnancy/sexual activity may be indicative of child abuse. If such concerns exist the Designated Liaison Person for the school should seek advice from the Duty Social Worker in HSE Child Protection Office.

1.8 Signs and Symptoms of Child Abuse

Signs of abuse can be physical, behavioural or developmental. A cluster or pattern of signs is the most reliable indicator of abuse.

It is important to realise that all of these indicators can occur in other situations where abuse has not been a factor and that the list is not exhaustive.

Physical Indicators

- Unexplained bruising in soft tissue areas
- Repeated Injury
- Black eye(s)
- Injuries to mouth
- Torn or bloodstained clothing
- Burns and scalds
- Bites
- Fractures
- Marks from implements
- Inconsistent stories, excuses relating to injuries

Behavioural/Developmental Indicators

- Unexplained changes in behaviour - becoming withdrawn or aggressive
- Regressive behaviour
- Difficulty in making friends
- Distrustful of adults or excessive attachment to adults
- Sudden drop in performance
- Inappropriate sexual awareness, behaviour or language
- Unusual reluctance to remove clothing
- Reluctance to go home
- Change in attendance pattern**

**The Education Welfare Act 2000 requires a Principal to report certain categories of non-attendance to an Educational Welfare Officer. However, where it is considered that a pattern of non-attendance may also be an indicator of possible child abuse it remains the responsibility of the Designated Liaison Person in the school to consult with and/or report the matter to the Health Services Executive.

Particular behavioural signs and emotional problems suggestive of child abuse in older children (10 years +) may include mood change (e.g. depression, failure to communicate), running away, substance abuse (e.g. drugs, alcohol, solvents), self-mutilation, suicide attempts, delinquency, truancy, eating disorders and isolation. All signs/ indicators need careful assessment relative to the child's circumstances.

More detailed information on the signs and symptoms of child abuse is provided in Chapter 3 and Appendix 1 of Children First.

1.9 Recognising Child Abuse

Not every situation is as clear-cut as a disclosure, allegation or observation of abuse. There may be times when a concern may arise because of a child's behaviour or information from

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other sources. All school staff will be aware of recognising symptoms of abuse. All concerns will be discussed with the DLP in consultation with HSE if appropriate.

1.10 Response if a child discloses abuse

An abused child is likely to be under severe emotional stress and a member of staff may be the only adult whom the child is prepared to trust. Great care will be taken not to damage that trust in responding to the disclosure. The member of staff will reassure the child, and endeavour to retain his or her trust, while explaining the need for action which will necessitate the involvement of other relevant adults. The child will be told that everything possible will be done to protect and support him/her. Staff will be mindful not to make promises that cannot be kept e.g. promising not to tell anyone else. No judgemental statements will be made about the alleged perpetrator.

While the basis for concern must be established as comprehensively as possible, the following advice is offered to school personnel to whom a child makes a disclosure of abuse:

It is important to deal with any allegation of abuse in a sensitive and competent way through listening to and facilitating the child to tell about the problem, rather than interviewing the child about details of what happened;

- It is important to stay calm and not to show any extreme reaction to what the child is saying. Listen compassionately and take what the child is saying seriously.
- It should be understood that the child has decided to tell about something very important and has taken a risk to do so. The experience of telling should be a positive one so that the child will not mind talking to those involved.
- The child should understand that it is not possible that any information will be kept a secret.
- No judgmental statement should be made about the person against whom the allegation is made.
- The child should not be questioned unless the nature of what s/he is saying is unclear. Leading questions should be avoided. Open, non-specific questions should be used such as "Can you explain to me what you mean by that?".
- The child will be given some indication of what should happen next, such as informing the Designated Liaison Person, parents/carers, Health Services Executive or possibly An Garda Síochána. Staff will take into account the child's age and level of understanding when communicating with the child and will endeavour to use age appropriate language. It should be kept in mind that the child may have been threatened and may feel vulnerable at this stage.
- Record the disclosure immediately afterwards using, as far as possible, the child's own words.

The duty of the recipient of such information is to report it to the Designated Liaison Person. It must always be remembered that school personnel have a supportive, not an investigative role.

In emergency situations, where the Health services executive cannot be contacted, and the child appears to be at immediate and serious risk, An Garda Síochána should be contacted immediately. Contacts listed in appendix.

1.11 Role of the DLP

The role of the DLP is to:

- Establish contact with the HSE personnel responsible for child protection in the Wicklow area.
- Provide information and advice on child protection.
- Ensure that all staff, volunteers and ancillary workers understand the Child Protection Policy and understand procedures to be followed in informing the HSE of relevant concerns about individual children.
- Ensure that appropriate information is available at the time of referral, and that the referral is confirmed in writing.
- Liaise with HSE, An Garda Síochána and other agencies as appropriate.

1.12 Responsibility of the DLP

The DLP is responsible for the following:

- To act as a source of advice on child protection matters.
- For coordinating action within the school.
- For liaising with appropriate HSE officers and An Garda Síochána and other agencies about suspected or actual cases of child abuse.

All matters pertaining to the processing or investigation of child abuse will be processed through the DLP. Further information on the responsibilities of the DLP is included in *Child Protection (Guidelines and Procedures)*.

The Designated Liaison Person who is submitting a report to the Health Services Executive or An Garda Síochána will inform the child's parent/guardian unless doing so is likely to endanger the child or place that child at further risk. A decision not to inform a parent/guardian should be recorded together with the reasons for not doing so.

1.13 Record keeping

When there is a suspicion, allegation or disclosure of child abuse, it is essential to have a written record of all the information available.

- Staff/ volunteer/individual will note carefully what they have observed and when they observed it. Record in writing what the child has said, including as far as possible the exact words used by the child.
- Any observations will be recorded with dates and times.
- All communications with parents/guardians, HSE or An Garda Síochána will be recorded.
- The record of the discussion should be signed and dated and given to and retained by the Designated Liaison Person.
- All records created should be regarded as highly confidential and placed in a secure location by the Designated Liaison Person.

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It is possible that school personnel may subsequently be invited to attend a child protection conference by the appropriate health services executive. Please consult DES guidelines, Chapter 4 Paragraph 4.4, for further information on child protection conferences.

- All records kept in this regard will be in compliance with the Data Protection Act 1988 and Data Protection (amended) Act 2003.

1.14 Reporting Procedures following Allegation or Suspicion

Action to be taken by school personnel

If a member of staff receives an allegation or has a suspicion that a child may have been abused, or is being abused, or is at risk of abuse he/she should, without delay, report the matter to the Designated Liaison Person in that school. A written record of the report should be made and placed in a secure location by the Designated Liaison Person. The need for confidentiality at all times should be borne in mind. The supports of the school should continue to be made available to the child.

Action to be taken by Designated Liaison Person

If the Designated Liaison Person is satisfied that there are reasonable grounds for the suspicion or allegation, he/she should report the matter to the relevant Health Services Executive immediately.

It may be useful to note

- a) A report should be made to the Health Services Executive either in person, by phone or in writing. Each Health Services Executive area has a social worker on duty for a certain number of hours each day. The Duty Social Worker is available to meet with, or talk on the telephone to, persons wishing to report child protection concerns.
- b) It is generally most helpful if persons wishing to report child abuse concerns make personal contact with the Duty Social Worker. This will facilitate the social worker in gathering as much information as possible about the child and his or her parents/carers.
- c) In the event of an emergency, or the non-availability of Health Services Executive staff, the report should be made to An Garda Síochána.

It is recommended that all reports should include as much as possible of the information sought in the Standard Reporting Form as outlined in Appendix 1 of these guidelines. If a report is made by phone, this form, duly completed, should subsequently be forwarded to the Health Services Executive.

Although all information requested might not be available to the person making a report, the forms should be completed as comprehensively as possible. When such a report is being made to a Health Services Executive, the Board of Management of the school should be informed. Any Designated Liaison Person who is submitting a report to the HSE or An Garda Síochána should inform a parent/carer unless doing so is likely to endanger the child or place the child at further risk.

In cases where school personnel have concerns about a child, but the Designated Liaison Person is not sure whether to report the matter to the Health Services Executive, the Designated Liaison Person should seek advice from the Duty Social Worker in the Health Services Executive. In consulting the Duty Social Worker, the Designated Liaison Person should be explicit that he/she is requesting advice and consultation and that he/she is not making a report. At this informal stage the Designated Liaison Person need not give

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identifying details. If the HSE advises that a referral should be made, the Designated Liaison Person should act on that advice.

The Designated Liaison Person, or his/her nominated replacement, should immediately, or as soon as possible thereafter, inform the designated person on the Board of Management that a report involving a student in the school has been submitted to the relevant Health Services Executive. In the interest of protecting the anonymity of the child, no details of the report should be disclosed to the whole Board of Management unless deemed absolutely necessary.

If the Designated Liaison Person decides that the concerns of the member of staff should not be referred to the relevant HSE office, the member of staff should be given a clear statement, in writing, as to the reasons why action is not being taken. The member of staff should be advised that, if he/she remains concerned about the situation, he/she is free to consult with or report to the HSE. He/she should use the Standard Reporting Form at Appendix 1 of these guidelines. Any such report would be covered by the Protection for Persons Reporting Child Abuse Act, 1998.

It is essential that at all times the matter be treated in the strictest confidence and not discussed except among the parties mentioned above.

A list of Health Services Executive contact addresses, phone and fax numbers is contained at Appendix 2 of these guidelines.

1.15 Allegations or Suspicions of Child Abuse by School Employees

The most important consideration for the Chairperson, Board of Management or the DLP is the safety and protection of the child. However employees also have a right to protection against claims, which are false or malicious.

As employers, the Board of Management should always seek legal advice as the circumstances can vary from one case to another.

There are two procedures to be followed;

1. The Reporting Procedure (as outlined earlier)
2. The Procedure for dealing with the Employee.

The DLP has responsibility for reporting the matter to the Health Services Executive. The Chairperson of the Board of Management has responsibility, acting in consultation with his/her board, for addressing the employment issues.

If the allegation is against the DLP, the Board of Management Chairperson will assume the responsibility for reporting the matter to the Health Services Executive.

It should be recognised that school employees may be subject to erroneous or malicious allegations. Therefore any allegation of abuse should be dealt with sensitively and support provided for staff including counselling where necessary. *The employee should be treated fairly which includes the right not to be judged in advance of a full and fair enquiry.*

Employers should note that legal advice should always be sought in these cases as circumstances can vary from one case to another.

At all stages it should be remembered that the first priority is to ensure that no child is exposed to unnecessary risk. The Employer should as a matter of urgency ensure that any necessary protective measures are taken. These measures should be proportionate to the level of risk and should not unreasonably penalise the employee, financially or otherwise, unless necessary to protect children. Where protective measures do penalise the employee, it is important that early consideration be given to the case.

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1.15.1 Action to be taken by the DLP

Where an allegation of abuse is made against a school employee, the Designated Liaison Person within the school should immediately act in accordance with the procedures outlined previously in this policy.

Once a disclosure is made by a child, a written record of the disclosure should be made as soon as possible by the person receiving it. If a child wishes to make a written statement this should be allowed. Where an allegation of abuse is made by an adult, a written statement should be sought from this person. The ability of the Health Services Executive or the employer to assess suspicions or allegations of abuse will depend on the amount and quality of information conveyed to them. Whether or not the matter is being reported to the appropriate Health Services Executive, the Designated Liaison Person should always inform the Employer of the allegation.

School employees, other than the Designated Liaison Person, who receive allegations of abuse against another school employee, should report the matter without delay to the Designated Liaison Person. The Designated Liaison Person should then follow the prescribed procedures as laid out above.

School employees who form suspicions regarding the conduct of another school employee should consult with the Designated Liaison Person. The Designated Liaison Person may wish to consult with the appropriate Health Services Executive. If the Designated Liaison Person is satisfied that there are reasonable grounds for the suspicion, he/she should report the matter to the relevant Health Services Executive immediately. The Designated Liaison Person should also report the matter to the Employer (Board of Management), who should proceed in accordance with the procedures outlined below.

1.15.2 Action to be taken by Employer

It is essential that at all times the matter be treated in the strictest confidence and that the identity of the employee should not be disclosed until such time as the employee has been offered the opportunity to address and/or be represented to the employer.

When an Employer becomes aware of an allegation of abuse against a school employee, the Employer should arrange to privately inform the employee of the following:

- i) the fact that an allegation has been made against him/her
- ii) the nature of the allegation
- iii) whether or not the matter has been reported to the appropriate Health Services Executive by the Designated Liaison Person;

The employee should be given a copy of the written record and/or allegation, and any other related documentation while ensuring that appropriate measures are in place to protect the child.

Once the matter has been reported to the Health Services Executive the employee should be offered the opportunity to respond to the allegation in writing to the Employer within a specified period of time. The employee should be told that his/her explanation to the Employer would also have to be passed on to the Health Services Executive.

Where the Employer is unsure as to whether the nature of the allegations warrants the absence of the employee from the school while the matter is being investigated, the Employer should

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consult with the Child Care Manager of the local Health Services Executive and/or An Garda Síochána for advice as to the action that those authorities would consider necessary. Following those consultations, the Employer should have due regard for the advice offered. If in the opinion of the Employer, the nature of the allegation warrants immediate action, the Employer should direct that the employee absent him/herself from the school with immediate effect. The principles of natural justice and fair procedures should be adhered to.

In certain situations, it might not be possible for the Employer to reach any definitive conclusions as to whether the alleged abuse actually occurred. Such a situation could occur where the allegations of abuse relate to the past employment of the school employee and where these allegations are being investigated by either the Health Services Executive or An Garda Síochána.

In such situations it may not prove possible for an Employer to conduct any proper enquiry into the allegations. In these cases the Employer should maintain regular and close liaison with those authorities and a decision on the position of the school employee should be taken having due regard to the advice given to the Employer by those authorities.

Where the employer has directed an employee to absent him/herself from the school, such an absence would not imply any degree of guilt on the part of the school employee. Where such an absence is directed, the Department of Education and Science should immediately be contacted with regard to

- i) Formal approval for the payment of remuneration or ex-gratia payments in lieu of remuneration as appropriate, and
- ii) Departmental sanction for the employment of a substitute teacher where necessary.

1.15.3 Further Follow Up Required

The Employer should take care to ensure that actions taken do not undermine or frustrate any investigations being conducted by the Health Services Executive or An Garda Síochána. It is strongly recommended that the Employer maintain a close liaison with these authorities to achieve this.

Employers are reminded of their serious responsibilities to maintain strict confidentiality about all matters relating to these issues. The principles of due process and natural justice should be adhered to by the Employer at all times.

Any further follow up action required should accord with established grievance and disciplinary procedures for the sector and any follow up will only be made following consultation with the Health Services Executive (and the Garda Síochána if involved).

After the consultations referred to above have taken place, and when dealing with the question of the future position of the employee the employer should advise the employee of the situation and should follow the agreed procedures for the sector. The Department of Education and Science should be informed of the outcome.

1.15.4 Appendices

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| Appendix 1 | Standard reporting form |
| Appendix 2 | Contact Numbers |
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Appendix 1: Standard Form For Reporting Child Protection and/or Welfare Concerns

PRIVATE AND CONFIDENTIAL

In case of Emergency or outside Health Service Executive hours, contact should be made with An Garda Síochána

A. To Social Worker team Leader

1. Details of Child

Name: _____ Male: _____ Female: _____
Address: _____ Age/ _____
D.O.B: _____

School: _____

1a. Details of Parents

Name of Mother: _____ Name of Father: _____
Address of Mother if different to child: _____ Address of Father if different to child: _____

Telephone Number: _____ Telephone Number: _____

1b. Care and Custody arrangements regarding child, if known:

1c. Household Composition:

Name	Relationship to child	Date of Birth	Additional Information e.g. School/ Occupation

Note: A separate report form must be completed in respect of each child being reported.

2.Details of concern(s), allegation(s) or incident(s) dates, times, who was present, description of any observed injuries, parent's view(s), child's view(s) if known.

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3. Details of person(s) allegedly causing concern in relation to the child:

Name: _____ Age: _____ Male:
Female:

Address: _____

Relationship to
Child: _____

Occupation: _____

4. Name and Address of other personnel or agencies involved with this child:

Social Workers: _____
School: _____

Public Health Nurse: _____
Gardaí: _____

G.P. _____
Crèche: _____

Hospital: _____
Other: _____

5. Are Parents/Legal Guardians aware of this referral to the Gardai? Yes: No:

If Yes, what is their
attitude? _____

6. Details of Person reporting concerns:

Name: _____
Occupation: _____

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Address: _____

_____ Telephone
Number: _____

Nature and extent of contact with
Child/Family: _____

7. Details of Person completing form:

Name: _____
Occupation: _____

Address: _____

_____ Telephone
Number: _____

Signed: _____
Date: _____

Guidance Notes:

Health Service Executives have a statutory responsibility under the Child Care Act 1991 to promote the welfare and protection of children in their area. Health Service Executives therefore have an obligation to receive information about any child who is not receiving adequate care and/ or protection.

This reporting form is for use by:

- Health Service Executive Personnel
- Professionals and individuals in the provision of child care services in the community who have service contracts with the Health Service Executives
- Designated person in a voluntary or community agency

Please fill in as much information and detail as is known to you (health Service Executive Personnel should do this in consultation with their line manager). This will assist the Social Work Department in assessing the level of risk to the child, or support services required. If the information requested is not known to you, please indicate by putting a line through the question. It is likely that a social worker will contact you to discuss your report.

Health Service Executives aim to work in partnership with parents. If you are making this report in confidence you should note that the Health Service Executive cannot guarantee absolute confidentiality as

- A Court could order that information be disclosed

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- Under the Freedom of Information Act 1997, the Freedom of Information Commissioner may order that information be disclosed.

You should also note that in making a 'bona fide report' you are protected under the Protection for Persons Reporting Child Abuse Act 1998.

If you have any other relevant information or reports regarding this matter, please attach when forwarding this report.

If you are uncertain as to whether you should report your concerns please telephone the social work department to discuss your concerns. The following contact arrangements are in place:

Community Care Area 10

Delgany Health Centre Tel: 012871482 Fax: 012871490

Social Work Office, The Murrough, Wicklow Town – Tel: 0404 60800 Fax: 040460888

On completion, please return this form to the Social Work Team Leader at the appropriate address above.

Appendix 2: Useful Support Numbers

Samaritans (listening service for the lonely, despairing and suicidal)	1800 609 090
Aware Helpline (listening service for people affected by depression)	1890 30 33 02
Child & Adolescent Mental Health Services – Lucena Clinic – Wicklow Town.	Tel: 0404 25591 Fax: 0404 20452
Childline	1800 666 666
Parentline (support for parents under stress)	1890 927 277
Rape Crisis Centre	1850 355 355
Bray Women's Refuge	01 2866163
Adult Counselling Service, HSE	1800 234 114
Designated Liaison Person (Principal)	086 3226452

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Designated Board Member (Mary Dee – Deputy Principal)	087 6774960
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Appendix 3 Role of The Health Service Executive

Health Services Executives were established under the Health Act, 1970. With the passing of the Child Care Act, 1991, Health Services Executives were given a range of statutory responsibilities in the area of child welfare, family support, child protection and child care.

The responsibility given to Health Services Executives to protect children is contained in Sections 3(1) and 3(2)(a) of the Child Care Act, 1991, where it is stated that:

3(1) It shall be a function of every Health Services Executive to promote the welfare of children in its area who are not receiving adequate care and protection;

3(2) in the performance of this function a Health Services Executive shall:

a) take such steps as it considers requisite to identify children who are not receiving adequate care and protection and co-ordinate information from all relevant sources relating to children in its area;

b) having regard to the rights and duties of parents, whether under the Constitution or otherwise -

i) regard the welfare of the child as the first and paramount consideration, and

ii) in so far as is practicable, give due consideration, having regard to his age and understanding, to the wishes of the child; and

iii) have regard to the principle that is generally in the best interests of a child to be brought up in his own family.

Once a report of suspected child abuse has been made to a Health Services Executive, it is then a matter for that Health Services Executive to decide upon the action, if any, which is necessitated by that report. The social worker handling the case may need to seek further clarification from the person who first raised the concerns. In some cases, the response of the Health Services Executive will be to call a child protection conference.

Feedback from Health Services Executive

Children First guidelines place an onus on Health Services Executives to ensure that arrangements are put in place to provide feedback to employers in regard to the progress of a child abuse investigation regarding an employee. It is clearly stated in those guidelines that efforts should be made to investigate complaints against employees promptly bearing in mind the serious implications for an innocent employee. Health Services Executives should pass on reports and records to the employer and the employee in question where appropriate. This will assist the employer in reaching a decision as to the action to be taken in the longer term concerning the employee. Employers should always be notified of the outcome of investigations. It is the responsibility of the Employer to maintain close contact with the Health Services Executives to ensure that the Health Services Executives act promptly in cases of alleged abuse involving school employees.

It is outside the scope of these Guidelines to impose time limits on, or to proscribe the actions to be taken by, Health Services Executives. However, the following paragraphs, taken directly from Children First are relevant.

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Guidance for Health Services Executive

Health Services Executives will regularly receive allegations of abuse against people who have contact with children in their workplace or in a sports or youth club. If the Health Services Executive considers that children are, or may be, at risk from the alleged abuser, they should contact the institution or employer immediately. In this situation it is not necessary to notify the alleged abuser in advance of the allegations against him or her.

Where a Health Services Executive proposes to notify an alleged abuser's employer or person in-charge of a club where (s)he attends, and where there is no immediate danger to children, the alleged abuser must be notified in advance of the allegations against him/her. The approach to an employer/person-in-charge in such cases may take place at any stage in the wider investigation and it may be practical that such an approach does not take place until any criminal or Health Services Executive investigation has concluded.

Health Service Executive should put arrangements in place to provide feedback to employers/persons-in-charge in regard to the progress of a child abuse investigation involving an employee. Efforts should be made by Health Service Executive to investigate complaints against employees promptly and to complete their assessment as quickly as possible bearing in mind the serious implications for the innocent employee. Employers/persons-in-charge should be notified of the outcome of an investigation. The Health Services Executive should pass on reports and records to the employer and to the employee in question where appropriate. This will assist the employer/person-in-charge in reaching a decision as to the action to be taken in the longer term concerning the employee.

Notes: "Staff member/ Employee" shall also refer to anyone working directly with children in WETNS

2 Code of Conduct for Staff and Volunteers

Ref. also Health and Safety Statement

Wicklow Educate Together N.S. has a child centred ethos and commitment to an environment that supports the esteem of children. The code of conduct, in conjunction with the broader school policies, is designed to support and protect children. Good practise necessitates staff challenging conduct that is not safe or supportive to children either on an individual basis or by bringing it to the attention of the principal. The responsibilities of adults are also referred to in the policy on the children's code of behaviour which should be read by adults in contact with children in WETNS.

The adults encountered by children should model positive respectful behaviour at all times.

2.1 Aims

- To create a positive learning environment that encourages and reinforces good behaviour.
- To promote self-esteem and positive relationships.
- To support the education and development of every child.
- To foster caring attitudes to one another and to the environment.
- To ensure the rights of children are upheld.

2.2 Conduct

- All children should be treated with respect.

WICKLOW ETNS POLICIES AND PROCEDURES

- Children should be encouraged and praised.
- Discipline methods should support and encourage good behaviour. Punitive discipline methods are to be avoided.
- Children need to be and should be listened to.
- Children should be involved in decision making as appropriate.
- Staff and volunteers need to be aware of the negative impact of favouritism on the group and individuals.
- Everyone should respect the personal space, safety and privacy of individuals.
- Staff or volunteers should never physically punish a child.
- Physical contact is a valid way of comforting a child. It should be appropriate, non threatening, open and safe.
- Children should be encouraged to report their concerns and be supported to manage small issues, the child protection policy and bullying policy should be utilised when necessary.
- Children's privacy should be respected in bathrooms or changing rooms.
- Staff and volunteers should be familiar with all the school policies.
- If in any doubt a volunteer should defer to the staff on duty for decisions regarding the above.
- Staff and volunteers who have not been Garda Vetted should not work unattended with a child.
- Staff should not take children alone in their car or to their homes.
- Staff should not send text or picture messages to any child from their own phone.
- Staff should not use personal phone for any contact with a child in the school.