## Taking Care

Reporting and Responding to Child Protection and Welfare Concerns - Republic of Ireland

<table>
<thead>
<tr>
<th>Contents</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overview</td>
<td>2</td>
</tr>
<tr>
<td>Glossary</td>
<td>3</td>
</tr>
<tr>
<td>Recognising Abuse</td>
<td>4</td>
</tr>
<tr>
<td>Categories of abuse</td>
<td>4</td>
</tr>
<tr>
<td>Circumstances which may make children more vulnerable to harm</td>
<td>8</td>
</tr>
<tr>
<td>Identifying Reasonable Grounds for Concern</td>
<td>9</td>
</tr>
<tr>
<td>Procedures for reporting child protection and welfare concerns</td>
<td>9</td>
</tr>
<tr>
<td>Responding to a child who discloses abuse</td>
<td>11</td>
</tr>
<tr>
<td>Mandated Persons</td>
<td>13</td>
</tr>
<tr>
<td>Mandated Persons reporting procedures</td>
<td>14</td>
</tr>
<tr>
<td>Responding to adults who disclose childhood abuse</td>
<td>16</td>
</tr>
<tr>
<td>Confidentiality</td>
<td>12+17</td>
</tr>
<tr>
<td>Record Keeping</td>
<td>17</td>
</tr>
<tr>
<td>Responding to allegations of abuse made against a staff member/volunteer</td>
<td>18</td>
</tr>
<tr>
<td>Erroneous Allegations</td>
<td>21</td>
</tr>
<tr>
<td>Whistleblowing – a responsibility to speak out</td>
<td>21</td>
</tr>
<tr>
<td>Appendices</td>
<td>23</td>
</tr>
</tbody>
</table>
Taking Care

Reporting and Responding to Child Protection and Welfare Concerns - Republic of Ireland

Overview
The Methodist Church in Ireland (MCI) has congregations across the Republic of Ireland. MCI provides weekly opportunities for corporate acts of worship, for all ages. Activities for under 18s include faith-based Christian discipleship activities in a variety of settings.

Status of this document

Guiding Principles
The Methodist Church in Ireland recognises that:
- The welfare and safety of every child and young person who attends our activities is paramount;
- Our guiding principles and procedures to safeguard children and young people reflect national policy and legislation and we will review our guiding principles and child safeguarding procedures every two years;
- All children and young people have an equal right to attend our activities that respects them as individuals and encourages them to reach their potential, regardless of their background;
- We are committed to upholding the rights of every child and young person who attends our activities, including the rights to be kept safe and protected from harm, listened to and heard;
- Our guiding principles apply to everyone who works or volunteers in the Methodist Church in Ireland;
- Workers/volunteers must conduct themselves in a way that reflects the principles of the Methodist Church in Ireland.

Governance Structures
The Governance Board of MCI operates under the delegated authority of Conference to act as the body responsible for the day-to-day control, direction, administration and management of the affairs of the Church. The Governance Board has overall responsibility for all aspects of the life of the church.

The task of Safeguarding has been delegated to the Connexional Safeguarding Board (CSB). The CSB manages the day-to-day running and administration of Safeguarding across the Connexion. The work of CSB is supported by its Chair, on a part-time basis, and the Connexional Safeguarding Officer (CSO) on a full-time basis.

Implementation at the local level is delegated to the Church Council/ Circuit Executive. While the Governance Board is ultimately responsible for Connexional Safeguarding, it is incumbent upon the local church to ensure that the highest standards are observed, and that there is no variance between policy and practice.
An annual report is submitted by each superintendent minister on behalf of the circuit outlining the commitment to best practice, giving assurances of compliance and affirming that volunteers have been vetted and trained in accordance with MCI policy.

**Glossary**

Child means a person under 18 years excluding a person who is or has been married.

Staff means anyone with a formal contract of employment who is employed and paid by the Methodist Church in Ireland. This also includes stipendiary and non-stipendiary ministers.

Volunteer means anyone engaged by the Methodist Church in Ireland in a position of responsibility towards children or assisting with a group or organisation providing activities involving children, or care or supervision of children, and who is not paid for this involvement.

Child Safeguarding Officer (CSO) is the Designated Liaison Person for the Methodist Church in Ireland. The Chair of the Connexional Safeguarding Board is the Deputy Designated Liaison Person.

Safeguarding Team; at local-level, responsibility for child protection is delegated to the Safeguarding Team. This team consists of the Designated Person (DP), who is a lay-person appointed by the Church Council/ Circuit Executive, and the Deputy DP, who is a Minister/ Lay Pastor appointed by MCI. The DP works alongside the Minister and have responsibility for ensuring that the correct child protection procedures are followed.

Statutory Authorities refers to Tusla (The Child and Family Agency) which is the statutory body responsible for child protection matters, who is responsible for keeping children safe and protected from harm. An Garda Síochána are empowered under legislation to investigate possible criminal offences.
Mandated Person means those defined in the Children First Act 2015 that have by law an obligation to report concerns which reach a particular threshold to Tusla and to cooperate with Tusla in the assessment of mandated reports.

Recognising Abuse
The legal and moral responsibility to report child protection or welfare concerns applies to everyone who has contact with children whether paid, voluntary, lay or ordained.

Knowing and recognising what the signs and symptoms of abuse are, is an important step to being alert to the possibility that children may be experiencing abuse and neglect.

- It is important to remember that a child may be subjected to one or more forms of abuse at any given time.
- Abuse and neglect can occur within the family, in the community or in an institutional setting.
- The abuser may be someone known to the child or a stranger, and can be an adult or another child. In a situation where abuse is alleged to have been carried out by another child, it should be considered a child welfare and protection issue for both children and child protection procedures should be followed for both the victim and the alleged abuser.
- Abuse is not always committed through personal contact with a child or young person, sometimes it is perpetrated through social media or the use of information and communication technology.
- A child needs to have someone they can trust in order to feel able to disclose abuse they may be experiencing. They need to know that they will be believed and will get the help they need. Without these things, they may be vulnerable to continuing abuse.
- Other indicators may be related to the child’s behaviour such as being aggressive, impulsive, or withdrawn. A cluster or pattern of signs is more likely to be indicative of neglect or abuse.

Categories and Indicators of Abuse
Child abuse can be categorised into four different types: neglect, emotional abuse, physical abuse and sexual abuse. The definitions of neglect and abuse outlined below are taken from Children First: National Guidance for the Protection and Welfare of Children 2017.

Neglect
Child neglect is the most frequently reported category of abuse, both in Ireland and internationally. Ongoing chronic neglect is recognised as being extremely harmful to the development and well-being of the child and may have serious long-term negative consequences.

Neglect occurs when a child does not receive adequate care or supervision to the extent that the child is harmed physically or developmentally. It is generally defined in terms of an omission of care, where a child’s health, development or welfare is impaired by being deprived of food, clothing, warmth, hygiene, medical care, intellectual stimulation or supervision and safety.

Emotional neglect may also lead to the child having attachment difficulties. The extent of the damage to the child’s health, development or welfare is influenced by a range of factors. These factors include the extent, if any, of positive influence in the child’s life as well as the age of the child and the frequency and consistency of neglect.
Neglect is associated with poverty but not necessarily caused by it. It is strongly linked to parental substance misuse, domestic violence, and parental mental illness and disability.

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

The following are features of child neglect:

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

**Emotional abuse**

Emotional abuse is the systematic emotional or psychological ill-treatment of a child as part of the overall relationship between a caregiver and a child. Once-off and occasional difficulties between a parent/carer and child are not considered emotional abuse. Abuse occurs when a child’s basic need for attention, affection, approval, consistency and security are not met, due to incapacity or indifference from their parent or caregiver. Emotional abuse can also occur when adults responsible for taking care of children are unaware of and unable (for a range of reasons) to meet their children’s emotional and developmental needs.

Emotional abuse is not easy to recognise because the effects are not easily seen. A reasonable concern for the child’s welfare would exist when the behaviour becomes typical of the relationship between the child and the parent or carer.

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

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

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

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

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

Physical abuse can include the following:
- Physical punishment;
- Beating, slapping, hitting or kicking;
- Pushing, shaking or throwing;
- Pinching, biting, choking or hair-pulling;
- Use of excessive force in handling;
- Deliberate poisoning;
- Suffocation;
- Fabricated/induced illness;
- Female genital mutilation.

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

**Sexual abuse**
Sexual abuse occurs when a child is used by another person for his or her gratification or arousal, or for that of others. It includes the child being involved in sexual acts (masturbation, fondling, oral or penetrative sex) or exposing the child to sexual activity directly or through pornography.
Child sexual abuse may cover a wide spectrum of abusive activities. It rarely involves just a single incident and, in some instances, occurs over a number of years. Child sexual abuse most commonly happens within the family, including older siblings and extended family members.

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

It should be remembered that sexual activity involving a young person may be sexual abuse even if the young person concerned does not themselves recognise it as abusive.

Examples of child sexual abuse include the following:

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

An Garda Síochána will deal with any criminal aspects of a sexual abuse case under the relevant criminal justice legislation. The prosecution of a sexual offence against a child will be considered within the wider objective of child welfare and protection. The safety of the child is paramount and at no stage should a child’s safety be compromised because of concern for the integrity of a criminal investigation. In relation to child sexual abuse, it should be noted that in criminal law the age of consent to sexual intercourse is 17 years for both boys and girls. Any sexual relationship where one or both parties are under the age of 17 is illegal. However, it may not necessarily be regarded as child sexual abuse.

**Child Welfare Concern**

The Child Protection and Welfare Practice Handbook defines a child welfare concern as “a problem experienced directly by a child, or the family of a child, that is seen to impact negatively on the child’s health, development and welfare, and that warrants assessment and support, but may not require a (statutory) child protection response”.

**Bullying**

It is recognised that bullying affects the lives of an increasing number of children and can be the cause of genuine concerns about a child’s welfare. Bullying can be defined as repeated aggression –
whether it is verbal, psychological or physical – that is conducted by an individual or group against others.

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

For more information, please see MCI Bullying and Harassment policy.

Circumstances which may make children more vulnerable to harm

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

The following list is intended to help you identify the range of issues in a child’s life that may place them at greater risk of abuse or neglect. It is important to remember that the presence of any of these factors does not necessarily mean that a child in those circumstances or settings is being abused.

Parent or carer factors:

- Drug and alcohol misuse
- Addiction, including gambling
- Mental health issues
- Conflictual relationships

Child Factors:

- Age
- Communication difficulties
- Gender
- Trafficked/Exploited
- Sexuality

Community factors:

- Cultural, ethnic, religious or faith-based norms in the family or community which may not meet the standards of child welfare or protection required in this jurisdiction
- Culture-specific practices, including:
  - Female genital mutilation
  - Forced marriage
  - Honour-based violence
  - Radicalisation

Environmental factors:

- Housing issues
- Children who are out of home and not living with their parents, whether temporarily or permanently.

Poor motivation or willingness of parents/guardians to engage:

- Non-attendance at appointments;

- Parental disability issues including intellectual disability
- Domestic disability
- Adolescent parents

- Previous abuse
- Disability
- Young carer
- Mental health issues, including self-harm and suicide

- Poverty/Begging
- Bullying
- Internet and social media-related concerns

- Lack of insight or understanding of how the child is being affected;
- Lack of understanding about what needs to happen to bring about change;
- Avoidance of contact and reluctance to work with services;
- Inability or unwillingness to comply with agreed plans.

These factors should be considered as part of being alert to the possibility that a child may be at risk of suffering abuse and in bringing reasonable concerns to the attention of Tusla.

**Identifying Reasonably Grounds for Concern**

There are many reasons why staff/volunteers may be concerned about the welfare and protection of a child or young person.

Tusla should always be informed when a person has reasonable grounds for concern that a child may have been, is being, or is at risk of being abused or neglected. If symptoms are ignored, there is the potential the abuse may continue or worsen.

It is not necessary to prove that abuse has occurred to report a concern to Tusla. All that is required is that reasonable grounds for concern exist. It is Tusla’s role to assess concerns that are reported to them.

Reasonable Grounds for a child protection or welfare concern include:

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

**Procedures for reporting child protection or welfare concerns (non-mandated persons)**

Within MCI, concerns regarding the welfare and safety of all must be paramount. Advice from the Connexional Safeguarding Officer can also be sought at any time. (+44 7843 143 434)

The guiding principles on reporting child abuse or neglect may be summarised as follows:

- The safety and well-being of the child must take priority over concerns about adults against whom an allegation may be made;
- Reports of concerns should be made without delay;
- The rule is *if in doubt, pass it on*.

If any leader thinks a child is in immediate danger and cannot make contact with Tusla, that leader should contact the Gardaí without delay.

These are the standard reporting procedures for all staff and volunteers regardless of how a concern comes to their attention. This may arise from a disclosure/allegation being made or from a staff/volunteer’s own observations.
Step 1

- Contact the Safeguarding Team (DP/ Deputy DP) on the day the concern arises to discuss concern. The concern should be recording in writing what as much detail as possible.

Step 2 (A)

- If the Safeguarding Team, in consultation with the person who raised the concern, decides that reasonable grounds for concern exist, then contact should be made with the Duty Social Worker in the local Tusla office to seek advice about the concern and whether a report needs to be made.
- Record and follow the advice given and actions to be taken including whether the parents should be informed of the report being made.
- Tusla can be contacted for informal advice. This provides an opportunity to discuss the query in general and to decide whether a formal report of the concern to Tusla is appropriate at this stage. If the concern is below the threshold for reporting, Tusla may be able to provide advice in terms of keeping an eye on the child and other services that may be more suitable to meeting the needs of the child and/or family.
- If advised to make a formal report, the staff or volunteer who raised the concern and the DP should jointly fill in the Child Protection Report Form which is available on the Tusla website www.tusla.ie
- If advised by Tusla not to make a formal report, the reason should be recorded including the name of the of the Social Worker spoken to. Continue to monitor the child and report any further concerns as above.
- The Safeguarding Team should record the advice given by Tusla
- In cases where a criminal offence has been committed and, on the recommendation, of Tusla, An Garda Síochána may also need to be informed.
- The Connexional Safeguarding Officer should be informed of all reports made to Tusla and/or An Garda Síochána.

Step 2 (B)

- If the Safeguarding Team in consultation with the person who raised the concern decide not to make a report to Tusla then the following steps should be taken:
  - The reasons for not reporting are to be recorded;
  - If any actions are taken as a result of the concern, these should be recorded;
  - The staff or volunteer who raised the concern should be given a clear written explanation of the reasons why the concern is not being reported to Tusla;
  - The staff or volunteer should be advised that if they remain concerned about the situation, they are free to make a report to Tusla or An Garda Síochána.
  - The staff or volunteer who raised the concern should also be reassured that if they do choose to further pursue the matter, they are covered by the Protections for Persons Reporting Child Abuse Act 1998.
Reporting procedure in summary - (non mandated persons)

Responding to a child who discloses abuse
A child may disclose to a staff member or a volunteer that they have been or are being harmed or abused. Children will often have different ways of communicating that they are being abused. If a child or young person hints at or tells a worker or volunteer that he or she is being harmed by someone, be it a parent/carer, another adult or by another child/young person (peer abuse), it should be treated in a sensitive way.

A child may disclose abuse to a trusted adult at any time during their work with them. It is important that leaders are aware and prepared for this. Leaders should observe the following:

- Be as calm and natural as possible;
- Remember that leaders are approached because they are trusted and possibly liked;
- The leader should not panic;
- The leader must not promise to keep secrets;
- The leader should be aware that disclosures can be very difficult for the child/young person.
- The child or young person may initially be testing the reaction of the leader and may only fully open up over a period of time;
- Listen to what the child/young person has to say. The child/ young person should be given the time and opportunity to tell as much as they are able and wish to;
- Do not pressurise the child/young person. Allow him or her to disclose at their own pace and in their own language;
- Conceal any signs of disgust, anger or disbelief;
- Accept what the child or young person has to say – false disclosures are very rare;
- It is important to differentiate between the person who carried out the abuse and the act of abuse itself. The child/young person quite possibly may love or strongly like the alleged abuser while also disliking what was done to them. It is important therefore to avoid expressing any judgement on, or anger towards the alleged perpetrator while talking with the child.
• It may be necessary for the leader to reassure the child/young person that the leader’s feelings towards him or her have not been affected in a negative way as a result of what they have disclosed;
• Reassure the child/young person that they have taken the right action in talking about this issue;
• Do not ask leading questions;
• Explain to the child that this information will only be shared with the people who can help.

TIP BOX
Some useful phrases when responding to a disclosure

Things to say:
• I want to listen to what you have to say
• I am going to do my best to help you
• You did the right thing by telling me, this is what I am going to do next...
• You are not to blame
• Is there anything else you want to share?

Things not to say:
• Wait until I get the main leader so you can tell them too.
• I can’t do anything.
• I can’t believe it, I’m shocked.
• This is your fault.
• Don’t tell me anymore.

Confidentiality
The leader should not promise to keep secrets

At the earliest opportunity, the leader should:
• acknowledge that the child/young person has made this disclosure because of the trust in the leader;
• tell the child/young person that this information will be shared only with people who understand this area and who can help;
• tell the young person that there are secrets which are not helpful and should not be kept because they make matters worse. Such secrets hide things that need to be known if people are to be helped and protected from further on-going hurt.

It should be noted that by refusing to make a commitment to secrecy to the child/young person, there is a risk that the individual may not disclose everything (or, indeed, anything) there and then. However, it is better to do this than to tell a lie and ruin the child/young person’s confidence in yet another adult. By being honest, it is more likely that the child/young person will return to the leader at another time.

The leader should always think before making a promise. The leader should not make a promise that cannot be kept.
Recording
As soon as possible, the leader should:
• Record in writing, in a factual manner, what the child/young person has said, including, as far as possible, the exact words used by the child/young person.
• Inform the Safeguarding Team immediately who will agree measures to protect the child/young person, e.g., report the matter directly to Tusla.
• Maintain appropriate confidentiality.

On-going support
Following a disclosure by a child, it is important that staff/volunteers continue in a supportive relationship with the child. Disclosure is a huge step for a child. Staff/volunteers should continue to offer support, particularly by:
• Maintaining a positive relationship with the child/young person;
• Keeping lines of communication open by listening carefully to the child/young person;
• Continuing to include the child/young person in the usual activities.
• Any further disclosure should be treated as a first disclosure and responded to as indicated above. Where necessary, immediate action should be taken to ensure the child/young person’s safety.

Mandated Persons
Mandated persons are people who have ongoing contact with children and/or families and who because of their qualifications, training and/or employment role, are in a key position to help protect children from harm.

Within MCI, any paid employee who works with children and young people are mandated persons. Within MCI, this includes Ordained Ministers, pastorally-focussed vocational employees, Professional Youth Workers/Pastors and the Connexional Safeguarding Officer. For further information on who is considered to be a Mandated Person, please see Appendix 1.

Under the Children First Act 2015 mandated persons are required to report any knowledge, belief or reasonable suspicion that a child:
• has been harmed;
• is being harmed;
• or is at risk of being harmed;
and to assist Tusla, if requested, in assessing a concern which has been the subject of a mandated report known as ‘mandated assisting’.

‘Harm’ as defined by the Children First Act 2015: ‘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, or,
(b) sexual abuse of the child whether caused by a single act, omission or circumstances or a series or combination of acts, omissions or circumstances, or otherwise.

Section 14(1) of the Children First Act 2015 states:
‘...where a mandated person knows, believes or has reasonable grounds to suspect, on the basis of information that he or she has received, acquired or becomes aware of in the course of his or her employment or profession as such a mandated person, that a child—
(a) has been harmed;
(b) is being harmed;
(c) or is at risk of being harmed;
he or she shall, as soon as practicable, report that knowledge, belief or suspicion, as the case may be, to the Agency.’

Section 14(2) of the Children First Act 2015 also places obligations on mandated persons to report any disclosures made by a child:
‘Where a child believes that he or she–
(a) has been harmed;
(b) is being harmed;
(c) or is at risk of being harmed,
and discloses this belief to a mandated person in the course of a mandated person’s employment or profession as such a person, the mandated person shall, as soon as is practicable, report that disclosure to the Agency.’

The threshold of harm for each category of abuse at which mandated persons have a legal obligation to report concerns is outlined in Children First: National Guidance for the Protection and Welfare of Children 2017 or in Appendix 2.

If mandated persons are in doubt about whether a concern reaches the legal definition of harm for making a mandated report, Tusla can provide advice in this regard. Details of how to contact Tusla’s Dedicated Contact Point and Duty Social Worker to discuss a concern can be found on the Tusla website www.tusla.ie
The CSO can also provide advice in this regard.

Out of Hours Social Work Service
Mandated persons can access Tusla’s emergency out-of-hours social work service on 0818 776 315 between 6pm and 6am every week night and between 9am and 5pm on Saturdays, Sundays and bank holidays. In an emergency, An Garda Síochána should be contacted outside of these hours.

Mandated Persons Reporting Procedures
Where a mandated person has a concern that they believe reaches the threshold for a mandated report they should contact Tusla to make a mandated report using the Child Protection and Welfare Report Form which is available on the Tusla website www.tusla.ie The report can be made independently or jointly with the Connexional Safeguarding Officer. Subsequent to any report being made to Tusla, the CSO should always be informed, and provided with a copy of the report.

The Mandated Person must discharge their duty to report under the Children First Act 2015 and cannot be discharged by the CSO on their behalf. The CSO can provide support in this process and a report can be submitted jointly. Importantly the CSO cannot make a report on behalf of a Mandated Person.

Mandated Reports must be made using the Child Protection and Welfare Report Form which is available on the Tusla website www.tusla.ie
Mandated Reporting Procedures in summary -

The legal obligation to report as a mandated person under the Children First Act 2015 applies only to information that mandated persons acquire in the course of their professional work or employment. It does not apply to information they acquire outside of work, during a voluntary role, or information given to them on the basis of a personal rather than a professional relationship.

If a concern does not reach the threshold of harm for mandating reporting, but the mandated person feels there are reasonable grounds for concern about the welfare or protection of a child, Tusla should be consulted about the appropriateness of whether a non-manded report should be submitted.

**Reporting suspected crimes to An Garda Síochána**
The Criminal Justice (Withholding of Information on Offences against Children and Vulnerable Persons) Act 2012 requires that any person who has information about a serious offence against a child, which may result in charges or prosecution, must report this to An Garda Síochána as soon as is practicable. Failure to report under the Act is a criminal offence under that legislation. This obligation is in addition to any obligations under the Children First Act 2015. (In general terms, they are more serious offences, including murder, manslaughter, rape and a large number of sexual offences).

**Informing family members of a mandated report**
It may be prejudicial to the outcomes of the individual for the family to be informed that a Mandated Report has been made. Therefore, before a family is informed of a mandated report, advice should always be sought from Tusla on the suitability of such an action.
Mandating Assisting
Mandated persons can be asked by Tusla to provide any necessary and proportionate assistance to aid Tusla in assessing the risk to a child arising from a mandated report. Legally, Mandated Persons must comply with this request, regardless of who made the report. The policy of MCI is provide any and all help that is requested or required by Tusla and/or An Garda Síochána in regard to any matter pertaining to welfare of an individual.

Exemptions from the Requirement to Report
Underage Consensual Sexual Activity
Under the Criminal Law (Sexual Offences) Act 2006, the legal age of consent is 17 years. While a sexual relationship where one or both parties are under 17 years of age is illegal, when making a report to Tusla, it might not be regarded as child sexual abuse. There are certain exemptions from reporting underage consensual sexual activity. If a mandated person or Safeguarding Team is satisfied that all of the following criteria are met, they are not required to make a report to Tusla:

- The young persons concerned are between 15 and 17 years old.
- The age difference between them is not more than 24 months.
- There is no material difference in their maturity or capacity to consent.
- The relationship between the people engaged in the sexual activity does not involve intimidation or exploitation of either person.
- The young person states clearly that they do not want any information about the activity to be disclosed to Tusla.

In effect, this means that if all of the above criteria are met, a mandated person or Safeguarding Team do not have to report consensual sexual activity between older teenagers as sexual abuse to Tusla. However, all persons must uphold the key principle that the welfare of the child is paramount and if a mandated person or Safeguarding Team have any concerns, even where all the above criteria are met, a report should be made to Tusla and/or An Garda Síochána.

Responding to adults who disclose childhood abuse
There are an increasing number of adults disclosing abuse that took place during their childhood. Such disclosures may come to light during the provision of pastoral support.

Where such a disclosure is made it is essential to establish whether there may be current risk to any child or young person who may be in contact with the alleged abuser revealed in the disclosure. This is important even where the children/young people about whom there may be a concern are still to be identified.

When a retrospective disclosure is made by an adult to a staff member or volunteer it should be reported to the Safeguarding Team in the same way as if a child made a disclosure. The Safeguarding Team must consult with Tusla and seek advice as to whether a report should be made. If making a report to Tusla the Retrospective Abuse Report Form should be used which is available on the Tusla website www.tusla.ie
The CSO can be consulted in regard to the disclosure of retrospective child abuse. If a Retrospective Abuse Report Form is submitted to Tusla, the CSO must be informed.
It is recommended when working with adults, to let them know that if a child protection issue arises and if the alleged abuser is identifiable staff/volunteers are obliged to pass the information on to Tusla, as the alleged abuser may still pose a risk to children.

Confidentiality
While reporting mechanisms dictate that the correct people are informed, it is imperative that the dignity of the individual is respected. All information should be handled in a confidential and sensitive manner.

It is the policy of MCI that any relevant information will be shared with Tusla and/ or An Garda Síochána where required or requested for the protection or welfare of a child. Therefore, only those who ‘need to know’ are informed about allegations/disclosures/ concerns. Confidentiality should never be promised to an individual who is making an allegation/ disclosure, as they must always be reported. Those who are considered as ‘need to know’ are the DP, the Minister, the CSO unless there is a conflict of interest that would negate their being informed.

No undertakings regarding secrecy can be given. Those working with children and families should make this clear to parents/guardians and to the child. 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. Parents/guardians and children/young people have a right to know if personal information is being shared, unless doing so could put the child/young person at further risk or may put the reporter at risk.

Record Keeping
It is important that information about concerns for the welfare or protection of a child/young person is gathered early and shared as soon as possible with the appropriate person.

The ability of Tusla to assess and investigate suspicions or allegations of child abuse or neglect will be influenced by the amount and quality of information conveyed to it by the individual or organisation reporting the concerns.

Child Protection Records
Records should be factual and include details of contacts, consultations and any actions taken. All agencies dealing with children must cooperate in the sharing of records with Tusla where a child protection or welfare issue arises. Ensure that records on child protection concerns, allegations and disclosures are kept securely and safely within the organisation.

Records should only be used for the purpose for which they are intended. Records should only be shared on a need-to-know basis in the best interests of the child/young person.

Within MCI, it is incumbent upon each circuit and society to have high record-keeping standards, as poor record-keeping can lead to inaction, avoidable delay and can potentially inhibit recognition of abuse. Any records should only be accessible by the current DP, the current Minister and the current CSO. The hard copy of any child protection reports or concerns and any notes relating to the case should be stored in a secure folder within the Manse. Digital copies should be sent to the CSO, who will store them as a ‘master file.’ This file will reference any other documentation and state clearly how any such documentation can be accessed. If digital copies are held at the local level, they
should be stored securely within Irish Methodism’s Microsoft 365 account. Under no circumstances should personal email addresses or storage be used in relation to sensitive documentation.

Any information relating to the welfare of children, including reports, concerns and notes, will be kept indefinitely. Incident/ Accident Forms and attendance records at all church organisations, including children and leaders, will also be kept indefinitely as a historical record.

Responding to allegations of abuse made against staff/volunteers

An allegation of abuse may relate to a person who works with children who has:

- Behaved in a way that has or may have harmed a child/young person;
- Possibly committed a criminal offence in relation to a child/young person;
- Behaved towards a child/young person or children/young people in a way that indicates they may pose a risk of harm to a child/young person;
- Behaved in a way that is contrary to MCI’s code of behaviour for workers and volunteers;
- Behaved in a way that is contrary to professional practice guidelines.

If an allegation is made against a staff member or volunteer, there is dual responsibility in respect of both the child and the staff member/volunteer. There are two separate procedures to be followed:

- The reporting procedure to Tusla in respect of the child and the alleged abuser;
- The internal personnel procedure for dealing with the staff member/volunteer.

Reporting Procedures to Tusla in respect of the child

As with any child protection or welfare concerns, the appropriate reporting procedure must be followed including reporting to Tusla. Allegations of abuse are very serious for both the child involved and the worker/volunteer concerned. The priority is to protect the child/young person while taking account of the worker/volunteer’s right to due process.

When the local Safeguarding Team (Designated Person/ Minister) become aware of an allegation made against a staff member/volunteer and if an opinion is reasonably formed that abuse may have taken place the child protection reporting procedures should be followed as laid out previously (please refer to section on procedures for reporting child protection concerns in Taking Care).

It is the policy of MCI to seek advice from Tusla when a question arises about reasonable grounds for concern. A report should be made to Tusla or, in an emergency where a child is believed to be at immediate risk, An Garda Síochána.

If making a formal report to Tusla advise them that the report is being made in relation to a staff member/volunteer within MCI. This will allow Tusla to apply the necessary policies and procedures in relation to allegations against staff or volunteers in organisations. Parents/guardians should be informed of any action planned while having regard to the confidentiality and rights of others, such as the person against whom the allegation has been made. The Connexional Safeguarding Officer (CSO) should be made aware of any allegation without delay by the Mandated Person/ Designated Person.
Internal personnel procedures

Procedures for dealing with the staff member/volunteer who is the subject of an allegation of abuse:

The risk of harm to a child will be at the forefront of any decisions made or actions taken;

• The first priority is to ensure that no child/young person is exposed to unnecessary risk. As a matter of urgency, protective measures will be agreed while taking into account the staff members/volunteers right to due process. ‘Protective measures’ do not presume guilt;
• MCI’s disciplinary procedures will ensure that fair procedure is followed and will take account of any applicable employment contract or volunteer arrangement as well as the rules of natural justice and employment law;
• MCI will privately inform the staff member/volunteer that an allegation has been made against him or her and the nature of the allegation. The worker/volunteer should be afforded an opportunity to respond;
• MCI will note the response and pass on this information if making a formal report to Tusla;
• The worker/volunteer should be offered the option to have representation at this stage and should be informed that any response may be shared with Tusla;
• MCI will ensure that actions taken do not frustrate or undermine any investigations or assessments undertaken by Tusla or An Garda Síochána. MCI will liaise closely with the investigating bodies to ensure this;
• The requirements of fair procedure and natural justice mean that Tusla usually will not share the detail of any assessment regarding allegations of abuse against a worker/volunteer until the worker/volunteer has had an opportunity to fully respond to the allegation and any findings and decisions of Tusla;

Within MCI, each situation will be treated on its own merits, therefore there is no such thing as precedence. It is not possible in these guidelines to deal with every scenario as conditions of employment can vary greatly from individual to individual. In a situation where the statutory investigation does not lead to prosecution or conviction, MCI will reserve the right to conduct an internal review of the issue. It may be that this review is held subsequent to the conclusion of, or concurrent with, any statutory review.

The Connexional Safeguarding Board and District Superintendent will appoint a panel to investigate the situation. This panel will prepare a report with any necessary actions or recommendations in relation to the subject’s suitability to return to their position. The subject will have the right to be accompanied to the meeting by a nominated companion, and will have the right to appeal. In the event of an appeal, a panel will be convened.

When an allegation is made against a staff member/volunteer a quick solution should be sought for the benefit of all concerned.

In a situation where a staff member is the subject of an allegation the following should be remembered:

• The Connexional Safeguarding Board (CSB) through the Connexional Safeguarding Officer (CSO) should be made aware of this allegation without delay;
• The Secretary of Conference will be made aware of these allegations;
• It is a requirement that advice be sought by the local Safeguarding Team from MCI’s HR department as quickly as possible to ensure that employment law procedures and natural justice principles are correctly followed;
• MCI will advise Methodist Insurance of any issue of alleged abuse.
If the person is a paid employee or Minister, in some cases MCI may decide to suspend the employee or cease to use the services of a volunteer. Suspension does not indicate guilt and will not happen automatically where an allegation has been made. Any suspension is considered to be without prejudice, pending further investigation by the statutory authorities/Connexional Safeguarding Board, may be appropriate. It may be appropriate to re-assign the staff member to work that does not involve contact with children.

Any person who has been suspended should be advised to seek his/her own independent legal advice. Both the person alleged victim and the subject of the allegation, together with family, should be offered pastoral care. This pastoral support should come from different sources.

All stages of the process must be recorded

**Erroneous allegations**

Staff members or volunteers working with children/young people may feel vulnerable to accusations of child abuse. There may have been occasions when erroneous or untrue allegations have been made against staff members/volunteers. This might have been because of a misunderstanding of what has happened or a genuine mistake.

Any allegation of abuse against a staff member/volunteer will be dealt with sensitively and support provided, for both the staff member or volunteer who allegedly abused a child/young person and the staff member or volunteer who reported the alleged abuse. Appropriate levels of confidentiality will be ensured. Deliberately making a false claim of abuse against an individual is a criminal offence.

**Whistleblowing – a responsibility to speak out**

Whistleblowing as part of the safeguarding procedures is intended to encourage and enable staff members/volunteers with a serious concern, to raise that concern to the appropriate authorities outside the organisation if they are inhibited, for any reason, in reporting an incident internally or where they are dissatisfied with the internal response.

It is very important that everyone knows that if they raise a concern, which through Tusla’s investigation is not validated, they have not in any way been wrong in their initial action.

For further information on this, please see MCI’s Whistleblowing Policy.

This policy was adopted by MCI’s Child Safeguarding Board in July 2022.

It will be reviewed by the board annually, starting in July 2023.
Appendix 1

Who are considered to be Mandated Persons?

Schedule 2 of the Children First Act 2015 specifies the following classes of persons as Mandated Persons for the purposes of the Act:

1. Registered medical practitioner within the meaning of section 2 of the Medical Practitioners Act 2007.
2. Registered nurse or registered midwife within the meaning of section 2(1) of the Nurses and Midwives Act 2011.
3. Physiotherapist registered in the register of members of that profession.
4. Speech and language therapist registered in the register of members of that profession.
5. Occupational therapist registered in the register of members of that profession.
7. Psychologist who practises as such and who is eligible for registration in the register (if any) of members of that profession.
8. Social care worker who practises as such and who is eligible for registration in accordance with Part 4 of the Health and Social Care Professionals Act 2005 in the register of that profession.
9. Social worker who practises as such and who is eligible for registration in accordance with Part 4 of the Health and Social Care Professionals Act 2005 in the register (if any) of that profession.
10. Emergency medical technician, paramedic and advanced paramedic registered with the Pre-Hospital Emergency Care Council under the Pre-Hospital Emergency Care Council (Establishment) Order 2000 (S.I. No. 109 of 2000).
11. Probation officer within the meaning of section 1 of the Criminal Justice (Community Service) Act 1983.
12. Teacher registered with the Teaching Council.
13. Member of An Garda Síochána.
15. Person employed in any of the following capacities:
   (a) manager of domestic violence shelter;
   (b) manager of homeless provision or emergency accommodation facility;
   (c) manager of asylum seeker accommodation (direct provision) centre;
   (d) addiction counsellor employed by a body funded, wholly or partly, out of moneys provided by the Oireachtas;
   (e) psychotherapist or a person providing counselling who is registered with one of the voluntary professional bodies;
   (f) manager of a language school or other recreational school where children reside away from home;
   (g) member of the clergy (howsoever described) or pastoral care worker (howsoever described) of a church or other religious community;
   (h) director of any institution where a child is detained by an order of a court;
   (i) safeguarding officer, child protection officer or other person (howsoever described) who is employed for the purpose of performing the child welfare and protection function of religious, sporting, recreational, cultural, educational and other bodies and organisations offering services to children;
   (j) child care staff member employed in a pre-school service within the meaning of Part
VIIA of the Child Care Act 1991;
(k) person responsible for the care or management of a youth work service within the meaning of section 2 of the Youth Work Act 2001.

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

17. Foster carer registered with the Agency.
18. A person carrying on a pre-school service within the meaning of Part VIIA of the Child Care Act 1991
REPORTING MANDATED CONCERNS


NEGLECT
Neglect is defined as 'to deprive a child of adequate food, warmth, clothing, hygiene, supervision, safety or medical care'. The threshold of harm, at which you must report to Tusla under the Children First Act 2015, is reached when you know, believe or have reasonable grounds to suspect that a child's needs have been neglected, are being neglected, or are at risk of being neglected to the point where the child's health, development or welfare have been or are being seriously affected, or are likely to be seriously affected.

EMOTIONAL ABUSE/ILL-TREATMENT
ILL-treatment is defined as 'to abandon or cruelly treat the child, or to cause or procure or allow the child to be abandoned or cruelly treated'. Emotional abuse is covered in the definition of ill-treatment used in the Children First Act 2015. The threshold of harm, at which you must report to Tusla under the Children First Act 2015, is reached when you know, believe or have reasonable grounds to suspect that a child has been, is being, or is at risk of being ill-treated to the point where the child's health, development or welfare have been or are being seriously affected, or are likely to be seriously affected.

PHYSICAL ABUSE
Physical abuse is covered in the references to assault in the Children First Act 2015. The threshold of harm, at which you must report to Tusla under the Children First Act 2015, is reached when you know, believe or have reasonable grounds to suspect that a child has been, is being, or is at risk of being assaulted and that as a result the child's health, development or welfare have been or are being seriously affected, or are likely to be seriously affected.

SEXUAL ABUSE
If, as a mandated person, you know, believe or have reasonable grounds to suspect that a child has been, is being, or is at risk of being sexually abused, then you must report this to Tusla under the Children First Act 2015. Sexual abuse to be reported under the Children First Act 2015 [as amended by section 55 of the Criminal Law (Sexual Offences) Act 2017] is defined as an offence against the child, as listed in Schedule 3 of the Children First Act 2015.
A full list of relevant offences against the child which are considered sexual abuse is set out in Appendix 3 of Children First: National Guidance for the Protection and Welfare of Children. As all sexual abuse falls within the category of seriously affecting a child's health, welfare or development, you must submit all concerns about sexual abuse as a mandated report to Tusla. There is one exception, which deals with certain consensual sexual activity between teenagers which is outlined previously.
Appendix 3
Child Safeguarding: Relevant Legislation

The United Nations Convention on the Rights of the Child

Child Care Act 1991.

Children First Act 2015.


Criminal Justice (Withholding of Information on Offences against Children and Vulnerable Persons) Act 2012.

National Vetting Bureau (Children and Vulnerable Persons Act), 2012 - 2016.


Criminal Justice Act 2006, Section 176: Reckless Endangerment of Children

Reference information -

Children First: National Guidance for the Protection and Welfare of Children 2017

Child Protection and Welfare Handbook 2011 (HSE)

Child Safeguarding: A Guide for Policy, Procedure and Practice 2018 (Tusla)