

CHILD PROTECTION & WELFARE POLICY

GRAPHIC STUDIO DUBLIN

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January 2025

Graphic Studio Dublin is committed to a child-centred approach to our work with children and young people. We undertake to provide a safe environment and experience in which the welfare of the child/young person is paramount. We will adhere to the recommendations of Children First: National Guidelines for the Protection and Welfare of Children 2017, published by the Department of Health and Children.

We have implemented procedures covering:

- Code of behaviour for all staff;
- Reporting of suspected or disclosed abuse
- Confidentiality;
- Recruitment and selecting staff;
- Managing and supervising staff;
- Involvement of primary carers;
- Allegations of misconduct or abuse by staff;
- Complaints and comments;
- Incidents and accidents.

This policy will be reviewed in January 2028

Signed by Relevant Person: Robert Russell, Studio Director

Our child protection policy complies with the Children First Act 2015.

-GSD is a 'Relevant Service' in that we cover:

'Any work or activity which involves providing:

Educational, research, training, cultural, recreational, leisure, and social

or physical activities for children, and we employ more than one person to provide that service.

-GSD's '**Relevant Person**' is the Studio Director, Robert Russell.

-GSD's '**Designated Liaison Person**' is the Studio Director, Robert Russell.

-GSD's '**Deputy Designated Liaison Person**' is Executive Director, Laura Garbataviciute

-GSD do not have any mandated persons working within the Company.

1. TYPES OF CHILD ABUSE AND HOW THEY MAY BE RECOGNISED

Child abuse can be categorised into four different types: neglect, emotional abuse, physical abuse and sexual abuse. 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, you should consider it a child welfare and protection issue for both children, and you should follow child protection procedures for both the victim and the alleged abuser.

The important factor in deciding whether the behaviour is abuse or neglect is the impact of that behaviour on the child rather than the intention of the parent/carer.

The definitions of neglect and abuse presented in this section are not legal definitions. They are intended to describe ways in which a child might experience abuse and how this abuse may be recognised.

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 are 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 is not met, due to incapacity or indifference from their parent or caregiver. Emotional abuse can also occur when adults responsible for taking care of children are unaware of and unable (for a range of reasons) to meet their children's emotional and developmental needs. Emotional abuse is not easy to recognise because the effects are not easily seen.

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

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

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

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

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

Physical abuse:

Physical abuse 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 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 the gratification or arousal of others. It includes the child being involved in sexual acts (masturbation, fondling, oral or penetrative sex) or exposing the child to sexual activity directly or through pornography.

Child sexual abuse may cover a wide spectrum of abusive activities. It rarely involves just a single incident, and in some instances occurs over a number of years. Child sexual abuse most commonly happens within the family, including older siblings and extended family members. Cases of sexual abuse mainly come to light through disclosure by the child or his or her siblings/friends, from the suspicions of an adult, and/or by physical symptoms.

Examples of child sexual abuse include the following:

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

- Exposing a child to inappropriate or abusive material through information and communication technology
- Consensual sexual activity involving an adult and an underage person

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.

Circumstances which may make children more vulnerable to harm:

If you are dealing with children, you need to be alert to the possibility that a welfare or protection concern may arise in relation to children you come in contact with. 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. Some children may be more vulnerable to abuse than others. Also, there may be particular times or circumstances when a child may be more vulnerable to abuse in their lives. In particular, children with disabilities, children with communication difficulties, children in care or living away from home, or children with a parent or parents with problems in their own lives may be more susceptible to harm. 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 for you 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; Domestic violence; Adolescent parents; Parental disability issues, including learning or intellectual disability

Child factors:

-Age; Gender; Sexuality; Disability; Mental health issues, including self-harm and suicide; Communication difficulties; Trafficked/Exploited; Previous abuse; Young carer

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

Poor motivation or willingness of parents/guardians to engage:

- Non-attendance at appointments; 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.

You should consider these factors 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.

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. It is behaviour that intentionally aggravates and intimidates, and it occurs mainly among children in social environments such as schools. It includes behaviours such as physical aggression, cyberbullying, damage to property, intimidation, isolation/exclusion, name-calling, malicious gossip and extortion. Bullying can also take the form of abuse based on gender identity, sexual preference, race, ethnicity and religious factors. With developments in modern technology, children can also be the victims of non-contact bullying, via mobile phones, the internet and other personal devices.

While bullying can happen to any child, some may be more vulnerable.

These include: children with disabilities or special educational needs; those from ethnic minority and migrant groups; from the Traveller community; lesbian, gay, bisexual or transgender (LGBT) children and those perceived to be LGBT; and children of minority religious faiths.

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

Bullying in schools is a particular problem due to the fact that children spend a significant portion of their time there and are in large social groups. In the first instance, the school authorities are responsible for dealing with such bullying. School management boards must have a code of behaviour and an anti-bullying policy in place. If you are a school staff member, you should also be aware of your school's anti-bullying policy and the relevant guidelines for handling it.

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.

Robert Russell has been designated as the person to contact if you have an issue or concern about any aspect of a child's or young person's safety and welfare. It is the responsibility of this person to support and advise staff on child protection policies and procedures, and to ensure they are followed. It is also the responsibility of the Designated Person to liaise with the Health Service Executive or Gardaí where appropriate. Robert Russell can be contacted at Graphic Studio Dublin, 01-817 0938. Niamh Flanagan has been designated as deputy to Robert Russell and can be contacted at Graphic Studio Dublin, 01 817 0942.

Children's Right to Safety and How to Raise a Concern:

Graphic Studio Dublin is committed to ensuring that all children and young people who engage with our activities feel safe, respected, and listened to.

All children have the **right to be protected from harm** while taking part in our services and activities. They also have the right to **speak up if they feel unhappy, uncomfortable, or unsafe**, and to be taken seriously when they do so.

We ensure that children are informed, in an age-appropriate way, that:

- They should feel safe when participating in activities at Graphic Studio Dublin

- It is okay to talk to an adult if something does not feel right
- They will be listened to and supported if they raise a concern
- They will not get into trouble for speaking up

Children are encouraged to raise any concerns by:

- Speaking to a trusted adult involved in the activity
- Speaking directly to the **Designated Liaison Person** or another staff member

Where appropriate, information on safeguarding and how to raise concerns will be shared with children in a clear and accessible manner, taking into account the child's age, understanding, and communication needs.

Any concerns raised by a child will be handled in accordance with this **Child Protection & Welfare Policy**, with the child's welfare and safety as the paramount consideration.

2. RESPONDING TO A CHILD / YOUNG PERSON WHO DISCLOSES ABUSE

A child or young person may disclose to a worker or volunteer that they have been or are being harmed or abused. Children/young people 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.

Remember, a child/young person may disclose abuse to you as a trusted adult at any time during your work with them. It is important that you are aware and prepared for this.

You should:

- Be as calm and natural as possible.
- Remember that you have been approached because you are trusted and possibly liked.
- Do not panic.
- Be aware that disclosures can be very difficult for the child/young person.
- Remember, the child or young person may initially be testing your reactions and may only fully open up over a period of time.
- Listen to what the child/young person has to say.
- Give them 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 judgment on or anger towards the alleged perpetrator while talking with the child/young person
- It may be necessary to reassure the child/young person that your 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 to you.

Questions should be supportive and for the purpose of clarification only. Avoid leading questions, such as asking whether a specific person carried out the abuse. Also, avoid asking about intimate details or suggesting that something else may have happened other than what you have been told. Such questions and suggestions could complicate the official investigation.

Confidentiality - Do not promise to keep secrets. At the earliest opportunity, tell the child/young person that:

- You acknowledge that they have come to you because they trust you.
- You will be sharing this information only with people who understand this area and who can help. - 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.

By refusing to make a commitment to secrecy to the child/young person, you do run the risk that they may not tell you everything (or, indeed, anything) there and then. However, it is better to do this than to lie and undermine 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 you at another time.

Think before you promise anything – do not make promises you cannot keep.

At the earliest possible opportunity:

- 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 DLP immediately and agree on measures to protect the child/young person, e.g. report the matter directly to Tusla.
- Maintain appropriate confidentiality

Ongoing support: Following a disclosure by a child/young person, it is important that the worker or volunteer maintain a supportive relationship with the child/young person. Disclosure is a huge step for a child/young person.

Workers/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.

3.RESPONDING TO CONCERNS:

3.1 Recording & Reporting Procedures:

The reporting procedure should be known and accessible to all staff. The person who expresses the concern should be involved and kept informed. Actions and outcomes should be noted in the Incident Book.

An Incident Book should be kept in a Secure Location by the Designated Liaison Officer, with access available to all staff. **In the event of a concern, the Incident Book should be filled in as follows:**

- Record all details, including the date, time and people involved in the concern or disclosure and the facts.
- Information recorded should be factual. Any opinions should be supported by facts.
- Concerns which do not initially meet reasonable grounds for concern may, upon review, show patterns or clusters which may heighten the level of concern.

Inform the Designated Person or his or her deputy, if unavailable. The most appropriate person should discuss the concern or consult with primary carers. Parents, carers or responsible adults should be made aware of a report to the Health Service Executive unless it is likely to put the child/young person at further risk.

The Designated Person may contact the Health Service Executive Duty Social Work Department for an informal consultation prior to making a report. Information will be shared on a strictly 'need to know' basis. If reasonable grounds for concern exist, the Designated Liaison Person will report to the Tusla duty social worker. If the DLP decides not to make a report, the worker/volunteer with a reasonable concern is still entitled to make a report to Tusla under Children First: National Guidance for the Protection and Welfare of Children, should they wish to do so.

Information will be supplied to Tusla that will help them assess the concern, including:

- The child's name, address and age
- Names and addresses of parents or guardians
- Names, if known, of those who are allegedly harming the child or not caring for them appropriately
- A detailed account of your grounds for concern (e.g. details of the allegation, dates of incidents, and description of injuries)
- Names of other children in the household
- Name of the school the child attends
- Worker's name, contact details and relationship to the child

An individual worker has protections under the Protection of Persons Reporting Child Abuse Act 1998 if they report independently. In an emergency, any person can directly report a child abuse or neglect concern to Tusla, or to An Garda Síochána, in person, by telephone or in writing. A GSD worker who does so must notify the Designated Liaison Person to enable the organisation to ensure the process is undertaken in line with policy, procedures, and best-practice guidelines. They will also offer support and guidance to the worker regarding their concerns.

While it is possible to report a concern without giving your name, it may make it difficult for Tusla to assess your concern. All information that you provide will be dealt with in a professional manner. While Tusla cannot guarantee confidentiality, in general, it will not reveal the names of members of the public who report suspected child abuse without their permission.

3.2 What happens after a report is received by Tusla

Tusla has the statutory responsibility to assess all reports of child welfare and protection concerns. Assessments are carried out by Tusla social workers. If concerns are identified after the initial checks, a further evaluation, including a detailed examination of the child's and family's circumstances, will follow. If concerns about a child's welfare are found, but do not involve a child protection issue, then the family may be referred to community or family support services. If no concerns are found, then the information

gathered is recorded and kept in a confidential file where it will be examined if further concerns or more information come to light.

If you make a report about a child, Tusla will normally acknowledge it, and may contact you for further information, if necessary. It is understandable that you would like to be assured that the matter is being followed up on. However, to protect the privacy of the child and family, it may not be possible for Tusla to inform you of the progress or outcome of Tusla's contact with the child or family, unless you are involved in discussions around family support or child protection plans. If you continue to have concerns about the child, or if additional information comes to light, you should contact Tusla.

3.3 Concerns about an adult who may pose a risk to children:

While in most cases concerns for the welfare or safety of a child develop from your own observation or knowledge of the child or their family, sometimes concerns arise about whether an adult may pose a risk to children, even if there is no specific child named in relation to the concern. For example, based on known or suspected past behaviour, a concern could exist about the risk an individual may pose to children with whom they may have contact. You should report any such reasonable concerns to Tusla, who will try to establish whether or not any child is currently at risk from the individual in question.

While Tusla will make every effort to examine such cases, it is a very complex area involving the accused's constitutional rights to their good name, privacy and the right to earn a living, as well as the requirements of natural justice.

Tusla must work within the Constitution, the law, the legal system and the demands of natural justice to balance the conflicting rights of those involved. This may limit how much feedback Tusla can provide to you on the progress or outcome of the case. Tusla's examination can be greatly improved if the alleged victim feels able to cooperate with Tusla in its assessment or investigation.

3.4 Retrospective abuse:

In cases of retrospective abuse, a report needs to be made where there is a current or potential future risk to children from the person against whom there is an allegation. The term retrospective abuse refers to abuse that an adult discloses that took place during their childhood.

When attending counselling or being treated for a psychiatric or health problem, adults may disclose that they were abused during their childhood. If you are, for example, a counsellor or a health professional, and you receive a disclosure from a client that they were abused as a child, you must report this information to Tusla. This is because the person against whom there is an allegation may pose a current risk to children. You may wish to seek guidance from your organisation in discussing your legal obligations with your client. While Tusla will make every effort to examine these cases, it is a very complex area. It involves the accused's rights to their good name, privacy and the right to earn a living, as well as the requirements of natural justice.

When the alleged victim can cooperate with Tusla, it can greatly help Tusla to examine the potential future risk to children. In cases of retrospective abuse, where there are no identified children, you should complete a Retrospective Abuse Form and send it to Tusla. This form can be found on the Tusla website: www.tusla.ie/children-first/publications-and-forms/.

4. RECRUITMENT & SELECTION OF STAFF & VOLUNTEERS

All staff are carefully selected, trained and supervised to provide a safe environment for all children and young people, by observing the following principles:

Roles and responsibilities will be clearly defined for every job (paid or voluntary). We will endeavour to select the most suitably qualified personnel.

- Candidates will be required to complete a declaration form.
- At least two written references that are recent, relevant, independent and verbally confirmed will be necessary for any new Staff or volunteers.
- Staff will be selected by a panel of at least two (or more) representatives. No person who would be deemed to constitute a 'risk' will be employed.
- Some of the exclusions would include: any child-related convictions; refusal to sign a declaration form; insufficient documentary evidence of identification; concealing information on one's suitability to working with children; There will be a relevant probationary period;
- All staff will be required to consent to Garda clearance, and where available, this will be sought.
- Induction and completion of the Tusla e-learning module will be completed.

4.1 Safe Management of Staff & Volunteers:

In addition to the obligations on Staff & Volunteers as set out above, any event being held by the Company that facilitates a Child under 18 should be recorded in the file.

Parents or supervisors should be offered a copy of the Child Safeguarding Statement.

Details of the child, including address, family contact numbers and emergency numbers, should be accessible where appropriate. In a classroom or school setting, the teacher contact should be retained.

Attendance, accidents, incidents, any complaints or grievances should also be recorded.

Health & Safety responsibilities should be checked: all equipment and materials are safe; all necessary protective equipment is available; fire precautions are in place; first aid facilities are adequate.; insurance cover is in place.

4.2 Dealing with a concern about another worker/volunteer

It is important that, if a worker or volunteer has a concern about the behaviour of another worker / volunteer, they report it to the Designated Liaison Person. Where the concern relates to the DLP, reports should be made to another senior manager within the organisation or the Deputy DLP.

The organisation should create an open and supportive environment where workers feel comfortable and safe to pass on these types of concerns.

Concerns about colleagues' behaviour may relate to:

- Breaches of the organisation's code of behaviour;
- Conduct which may breach professional standards or codes of ethics;
- Suspected or witnessed abuse.

In dealing with an allegation against staff, two separate procedures must be followed:

- In respect of the child/young person The DLP will deal with issues related to the child/young person.
- In respect of the person against whom the allegation is made, Deputy DLP will deal with issues related to the staff member.

The first priority is to ensure that no child or young person is exposed to unnecessary risk. If allegations are made against the Designated Person, the Deputy Designated Person should be contacted.

Both the primary carers and the child/young person should be informed of actions planned and taken:

- The child/young person should be dealt with in an age-appropriate manner;
- The staff member will be informed as soon as possible of the nature of the allegation;
- The staff member should be given the opportunity to respond;
- The chairperson/head of the organisation should be informed as soon as possible;
- Any action following an allegation of abuse against an employee should be taken in consultation with Health Service Executive and Gardaí;
- After consultation, the chairperson/head of organisation should advise the person accused and agreed procedures will be followed.

4.3 Staff Designations & Appointments

GSD have made the following appointments:

Designated Liaison Person: Robert Russell, Studio Director

Deputy Designated Liaison Officer: Laura Garbataviciute, Executive Director

4.4 Mandated Persons:

Under the Children First Act 2015, Mandated Persons are people who have 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.

GSD employs no mandated persons.

5. COMPLAINTS & CONFIDENTIALITY

5.1 Complaints procedure:

Many issues that arise can be resolved informally between the complainant and the organisation; it is important to have a process to respond to complaints that cannot be resolved informally.

Complaints may arise in response to:

- An alleged breach of the code of behaviour by a worker/volunteer;
- A particular practice issue;
- Perceived poor attitude of a worker/volunteer;
- A child/young person feeling unhappy about an incident or an event;
- A parent/guardian feeling unhappy about an incident or event involving their child;
- Dissatisfaction in relation to an aspect of the service being provided.

Complaints or comments will be responded to within 4 weeks;

The designated Liaison Officer has responsibility for dealing with complaints;

Verbal complaints will be logged and responded to.

5.2 Confidentiality statement

GSD are committed to ensuring peoples' rights to confidentiality. However, in relation to child protection and welfare we undertake that:

- Information will only be forwarded on a 'need to know' basis in order to safeguard the child/young person;
- Giving such information to others for the protection of a child or young person is not a breach of confidentiality;
- We cannot guarantee total confidentiality where the best interests of the child or young person are at risk;
- Primary carers, children and young people have a right to know if personal information is being shared and/or a report is being made to the Health Service Executive, unless doing so could put the child/young person at further risk;
- Images of a child/young person will not be used for any reason without the consent of the parent/carer (however, we cannot guarantee that cameras/videos will not be used at public performances);
- Procedures will be put in place in relation to the use of images of children/ young people;
- Procedures will also be put in place for the recording and storing of information in line with our confidentiality policy.

6. SAFE SUPERVISION OF CHILDREN & YOUNG PEOPLE

Children/young people are less likely to experience accidents or incidents if they are supervised properly. Activities should be organised to maximise participation, fun and learning in a way that minimises risk.

Ensure that:

- A work schedule is displayed so that everyone knows who is on duty or volunteering in an activity;
- Children/young people are not left unattended;
- Adequate numbers of workers/volunteers are available to supervise the activities (best practice would indicate that there are male and female workers/volunteers present to supervise coeducational activities);
- Workers/volunteers know at all times where children/young people are and what they are doing;
- Any activity using potentially dangerous equipment has constant adult supervision;
- Dangerous behaviour is never allowed.

6.1 Outreach- Using External Facilities- Collaborations

When using facilities or services provided by another organisation, GSD must clarify and agree which organisation's reporting procedures for child protection or welfare concerns will be followed. There will be occasions when two or more organisations come together to collaborate or work in partnership.

This may take many forms, including:

- Work on a one-off basis around a particular event, project or initiative;
- Work on a medium to long-term basis;
- Accessing the services of workers/volunteers from another organisation;
- Use or rental of premises.

It is important that there is a clear understanding as to which organisation's guiding principles and child safeguarding procedures will be followed. This may necessitate developing a protocol, agreed by the various parties, which will operate for the duration of the collaborative work. Everyone involved should be aware of their roles and responsibilities in relation to the safety and wellbeing of children and young people and of any changes to their usual practice as a result of partnership working.

6.2 Use of Photography, Video and/or Social/Digital Media:

Taking pictures and video footage and transmitting these to friends and family members has become a feature of everyday life. Social media sites are now commonly used to display images and videos and

provide personal information. Information and communication technology (ICT) forms an important platform for communication, which is commonly used by adults and children/young people alike. It is important when working with children and young people to ensure that the use of digital media and ICT is consensual, ethical and that it is not misused to cause harm to an individual.

Organisations should establish a code of conduct for the use of digital media and ICT that sets out guidelines in respect of:

- Consent for filming and photography and use of same;
- Use of the organisation's information, including information about children, on social media sites;
- Expectations around the conduct of staff and service users when using social media sites such as Facebook, Twitter, etc.;
- Use of mobile phones, i.e. calling, photographing, filming, texting while in the service.

7.0 PRIMARY CARERS

We are committed to being open with all primary carers.

We undertake to:

- Advise primary carers of our child protection policy;
- Inform primary carers and schools of all activities and potential activities;
- Issue contact/consent forms where relevant;
- Comply with health and safety practices;
- Operate child-centred policies in accordance with best practice;
- Adhere to our recruitment guidelines;
- Ensure as far as possible that the activities are age-appropriate;
- Encourage and facilitate the involvement of parent(s), carer(s) or responsible adult(s), where appropriate.

If we have concerns about the welfare of the child/young person, we will:

- Respond to the needs of the child or young person;
- Inform the primary carers on an ongoing basis unless this action puts the child or young person at further risk;
- Where there are child protection and welfare concerns, we are obliged to pass these on to the Duty Social Worker and, in an emergency, the Gardaí;
- In the event of a complaint against a member of staff, we will immediately ensure the safety of the child/young person and inform primary carers as appropriate. As a child-centred organisation, we are committed to putting the interest of the child/young person first.

To that end, we will:

- Contact local Health Service Executive and Gardaí where there is a child protection welfare concern;
- Encourage primary carers to work in partnership with us under the guidelines set out by our organisation to ensure the safety of their children;
- Have a designated contact person available for consultation with primary carers in the case of any concern over a child or young person's welfare.

8.0 ACCIDENTS PROCEDURE / HEALTH & SAFETY

GSD have a Health and Safety Statement that includes a risk assessment of each area of operation.

Accidents procedure:

- GSD maintains an up-to-date register of the contact details of all children/young people involved in the organisation;
- GSD maintains an up-to-date accident/incident book within the Health & Safety File
- Children/young people's details should be cross-referenced between the incident book and file;
- First-aid boxes are available and regularly restocked;
- The location of the first-aid box(es) are made known to staff;
- Availability of first-aid should be in accordance with the organisation's Health and Safety guidelines.
- Details are recorded of risky equipment used and steps are taken to minimise risk;
- Children and young people are advised of risks of dangerous material;
- External organisations with whom our organisation has dealings must provide proof that they have public liability insurance;
- Take cognisance of responsibility for first-aid on off-site trips.

9.0 RELEVANT LEGISLATION

There are a number of key pieces of legislation that relate to child welfare and protection. The information here gives a brief overview of relevant legislation. It is not intended as legal opinion or advice and, if in doubt, you should consult the original legislation.

- CHILD CARE ACT 1991
- PROTECTIONS FOR PERSONS REPORTING CHILD ABUSE ACT 1998
- CRIMINAL JUSTICE ACT 2006
- CRIMINAL JUSTICE (WITHHOLDING OF INFORMATION ON OFFENCES AGAINST CHILDREN AND VULNERABLE PERSONS) ACT 2012
- NATIONAL VETTING BUREAU (CHILDREN AND VULNERABLE PERSONS) ACTS 2012–2016
- CHILDREN FIRST ACT 2015
- CRIMINAL LAW (SEXUAL OFFENCES) ACT 2017

Links:

- https://www.tusla.ie/uploads/content/Children_First_National_Guidance_2017.pdf
- https://www.tusla.ie/uploads/content/4214-TUSLA_Guidance_on_Developing_a_CSS_LR.PDF
- [Tusla, Child Safeguarding; Guide for Policy, Procedure and Practice](#)
- https://www.tusla.ie/uploads/content/4214-TUSLA_Guide_to_Reporters_Guide_A4_v3.pdf
- [Tusla, 'Best Practice Principles for Organisations in Developing Children First Training Programmes'](#)
- [Tusla, e-learning module, Introduction to Children First](#)
- [National Vetting Bureau \(Children and Vulnerable Persons\) Acts 2012 to 2016.](#)

Appendix: Child Safeguarding Reference Information

This appendix provides additional reference information to support the implementation of Graphic Studio Dublin's Child Protection & Welfare Policy and Child Safeguarding Statement, in line with the Children First Act 2015 and Children First: National Guidance for the Protection and Welfare of Children (2017).

A list of key relevant child safeguarding legislation and national guidance is set out in the preceding section of this policy.

1. Statutory Agency Contact Details

Tusla – Child and Family Agency

Child protection and welfare concerns should be reported to Tusla via the local Duty Social Work Team.

- Website: www.tusla.ie

An Garda Síochána

- Emergency: **999 or 112**
- Non-emergency and local station contact details are available at www.garda.ie

In situations where a child is considered to be at **immediate risk of harm**, An Garda Síochána should be contacted without delay.

2. Forms and Templates

Graphic Studio Dublin maintains internal **forms and templates** to ensure that child protection and welfare concerns are recorded accurately, consistently, and in line with data protection requirements. These include:

- Records of child safeguarding concerns or disclosures
- Incident and accident report forms
- Records of actions taken and referrals made

These forms are securely held by the organisation and used in accordance with this policy.

3. Best Practice Information and Guidance

Graphic Studio Dublin's safeguarding practice is informed by recognised best-practice guidance, including:

- Children First: National Guidance for the Protection and Welfare of Children (2017)
- Tusla – A Guide for the Reporting of Child Protection and Welfare Concerns
- Tusla – Guidance on Developing a Child Safeguarding Statement
- Tusla Children First eLearning Programme

Staff and volunteers are supported to engage with safeguarding information and training appropriate to their role.