

Policy Name: ICE Safeguarding Policy

Policy Statement:

ICE is committed to our duty of care to safeguard, protect and promote the welfare of children and is committed to ensuring safeguarding practice reflects statutory responsibilities, government guidance and complies with best practice and QQI requirements.

Person Responsible – General Manager Susan Mc Elhinney

DLP and Manager of Safeguarding :

Susan Mc Elhinney

Deputy DLP:

Deirdre Rochford

Garda Vetting Officer:

Orla Cowan

Contact for DLP Officers: info@iceireland.com or 01 8453744

1. Introduction

These guidelines apply to all employees and host families connected with the services offered by The Irish College of English (henceforth ICE).

The Children First: National Guidance for the Protection and Welfare of Children 2017, was set up to assist people in identifying and reporting child abuse and neglect. It highlights the roles and responsibilities of the HSE and An Garda Síochána, which are the two agencies with statutory responsibility for child protection. It also offers guidance to agencies and community and voluntary organisations that have contact with or provide services to children.

Society has a duty of care towards children and everyone should be alert to the possibility that children with whom they are in contact may be being abused or at risk of being abused. This national guidance is designed to encourage people to report concerns or suspicions to the HSE Children and Family Services.

Procedures

- A child protection policy with policies and procedures to ensure child protection.
- Risk Assessment of junior programmes and mitigation measures in place.
- All staff members working directly with our junior students have taken Tusla's Children's First e-learning programme or similar safe guarding courses.
- Our year round DLP Susan Mc Elhinney has attended a DLP Training Course run by Barnardos.
- All junior centres have a child protection officer and student welfare officer.
- Garda Vetting Policy and Garda Vetting Officer responsible for to ensure that all staff who have direct contact with children and all host household members over 16 years of age have complete our garda vetting process and that we have acceptable garda vetting disclosures on file. We also have a system in place to ensure all disclosures are dated within the last 3 years.
- Additional Centres and boarding accommodation providers confirmation of garda vetting and child protection measures being in place.
- All hosts and homes are inspected and go through an onboarding process, and regular inspections incur as well as a quality assurance process.
- Every centre operated by ICE has a Child Protection Officer.
- The Designated Liaison Persons, DLP and Deputy DLP, with responsibility for the implementation of these guidelines.

2. Definition of a Child

Children: People under 18 years of age.

3. Mission Statement

ICE recognises the rights of children to protection from abuse, violence and exploitation. ICE is committed to providing a safe environment for children.

The Management is committed to ensuring that the organisation follows effective safeguarding protection procedures which comply with all statutory requirements and meet best practise standards.

We are committed to ensuring our people are fully aware of our policies and procedures in relation to the protection of children and vulnerable adults. By developing appropriate skills to make reasoned, informed choices, judgements and decisions.

- To ensure that we practise safer recruitment in checking the suitability of staff and host families.
- To protect each student from any form of abuse, whether from an adult or another student.
- To be alert to signs of abuse both in the school and from outside.
- To deal appropriately with every suspicion or complaint of abuse.
- To design and operate procedures which, so far as possible, ensure that teachers and others who are innocent are not prejudiced by false allegations.

- To be alert to the medical needs of children with medical conditions.
- To operate robust and sensible health & safety procedures.
- To take all practicable steps to ensure that school premises are as secure as circumstances permit.
- To operate clear and supportive policies on drugs, alcohol and substance misuse.
- To ensure there is a whole-centre policy against bullying through recognition of the abuse of power between adults, between adults and children, and between children.
- To ensure staff/hosts are well informed about Child Protection issues.
- To ensure that staff/hosts are well informed about ICE procedures for reporting concerns as outlined in these guidelines.
- To promote co-operation with statutory agencies in the multi-agency response to Child Protection.

General guidance to staff

- Ensure that any member of staff whose normal duties will include regularly caring for, looking after or supervising a young person under the age of 18 is garda vetted.
- Situations where there is only one staff member present with a child should be avoided. On the occasions when a confidential interview or one to one meeting is necessary, these should be conducted in a room where the exit is clearly visible and, where possible, the door to the room is left open.
- Meetings with any student under the age of 18 outside the normal teaching environment/institution should be avoided. Where such meetings cannot be avoided, you should inform another staff member that they are taking place.
- Intimate or sexual relationships between staff and students under the age of 18 are an abuse of trust which may constitute a criminal offence.
- In situations where young students may be providing information of a particularly sensitive nature, for example to staff with pastoral responsibility, staff should be careful not to probe for details which could be construed as unjustified intrusion.
- Unnecessary physical contact with young people/children should be avoided, for example, gestures such as regularly putting a hand on the shoulder or arm. Whilst these gestures may be well intentioned, such acts could be misinterpreted.
 - In situations where it is necessary for staff to restrain a young person/child in order to prevent self-injury, injury to others or damage to property, only the minimum force necessary must be used and any action taken must be only to restrain.
 - Staff required to administer first aid (normally a trained first aider) should ensure, wherever possible, that another member of staff is present if they are in any doubt as to whether necessary physical contact could be misconstrued.
 - Staff should be careful in their use of language/terminology and must not make unnecessary comments which could be interpreted as having a sexual connotation.
 - The personal telephone number, personal email or home address of any staff member should not be given to young students except where this number is in connection with safety on activities.
 - In the case of any student making a disclosure or where there is cause for concern, you should explain to the student that this information will have to be referred on and follow the guidance in the following section. Do not attempt to resolve any complaints alone and report all allegations or suspicions of abuse.

- If a member of staff feels that they or other members of the Irish College of English, may be at risk from being the subject of or exposed to unwarranted accusations in connection with younger students, they should alert the Centre Manager.

4. Definition of Abuse

Abuse of a child can constitute the physical, psychological, emotional, financial or sexual maltreatment or neglect of a child by another person. The abuse may be a single act or repeated over a period of time, it may take one form or a multiple of forms. The lack of appropriate action can also be a form of abuse.

Recognise five categories of child abuse:

1. **Physical Abuse:** physical abuse is any form of non-accidental injury or injury which results from wilful or neglectful failure to protect a child. Examples include hurting or injuring a child, inflicting pain, poisoning, shaking or otherwise causing physical harm to the child.
2. **Sexual Abuse:** sexual abuse occurs when a child is used by another person for his or her gratification or sexual arousal, or for that of others. This includes direct or indirect sexual exploitation or corruption of children by involving them (or threatening to involve them) in inappropriate sexual activities.
3. **Emotional Abuse:** emotional abuse is normally to be found in the relationship between a caregiver and a child rather than a specific event or pattern of events. It occurs when a child's need for affection, approval, consistency and security are not met, for example repeatedly rejecting children, humiliating them, frightening them or denying their worth and rights as human beings.
4. **Neglect:** neglect is defined as the persistent failure to meet a child's basic physical and physiological needs. This can be defined in terms of an omission, where a child's health, safety, development or welfare is being avoidably impaired by being deprived of food, clothing, warmth, hygiene, intellectual stimulation, supervision and safety, attachment to and affection from adults or medical care.
5. **Bullying:** Bullying may be defined as deliberately hurtful behaviour, usually repeated over a period of time, where it is difficult for those bullied to defend themselves. It can take many forms, but the three main types are physical (e.g. hitting, kicking, theft) verbal (e.g. racist or homophobic remarks, threats, name calling) and emotional (e.g. isolating an individual from the activities and social acceptance of their peer group).

The damage inflicted by bullying can frequently be underestimated. It can cause considerable distress to children to the extent that it affects their health and development or, at the extreme, cause them significant harm.

5. Recognising Abuse

Detection of abuse is seldom straightforward and rarely clear cut. It is important therefore, to share concerns with the DLP as detailed in this policy document. Below are some of the physical and behavioural indicators of abuse. No one indicator should be seen as conclusive in itself of abuse. It

may indicate conditions other than child abuse. All signs and symptoms must be examined in the context of the child's situation and family circumstances.

Guidelines for recognition:

- Considering the possibility;
- Look out for signs of neglect or abuse;
- Recording of information.

Bullying - Bullying is not always easy to recognise as it can take a number of forms. A child may encounter bullying attacks that are:

- Physical: pushing, kicking, hitting, pinching and other forms of violence or threats.
- Verbal: name-calling, sarcasm, spreading rumours, persistent teasing.
- Emotional: excluding, tormenting, ridiculing, humiliating.
- Persistent bullying can result in:
 1. Depression, low self-esteem, shyness.
 2. Poor academic achievement, isolation, threatened or attempted suicide.
 3. Signs that a child may be being bullied can be:
 4. Coming home with cuts and bruises, torn clothes, asking for stolen possessions to be replaced, losing dinner money.
 5. Falling out with previously good friends, being moody and bad tempered, wanting to avoid leaving their home, aggression with younger brothers and sisters
 6. Doing less well at school, sleep problems, anxiety, becoming quiet and withdrawn.

Physical Abuse

Bruises or injuries that are either unexplained or inconsistent with the explanation given or visible on the "soft" parts of the body where accidental injuries are unlikely, e.g. cheeks, abdomen, back and buttocks. A delay in seeking medical treatment when it is obviously necessary is also a cause for concern, although this can be more complicated with burns, as these are often delayed in presentation due to blistering taking place sometime later.

Physical Indicators: Unexplained bruising, marks or injuries on any part of the body, multiple bruises – in clusters, often on the upper arm, outside of the thigh. Cigarette burns Human bite marks Broken bones Scalds, with upward splash marks, Multiple burns with a clearly demarcated edge.

Behavioural Indicators: Fear of parents being approached for an explanation, aggressive behaviour or severe temper outbursts, flinching when approached or touched, reluctance to get changed, for example in hot weather, depression, withdrawn behaviour, running away from home.

Sexual Abuse:

Adults who use children to meet their own sexual needs abuse both girls and boys of all ages, including infants and toddlers. Usually, in cases of sexual abuse it is the child's behaviour that may cause you to become concerned, although physical signs can also be present. In all cases, children

who tell about sexual abuse do so because they want it to stop. It is important, therefore, that they are listened to and taken seriously.

Physical Indicators: Pain or itching in the genital area, bruising or bleeding near genital area, sexually transmitted disease, vaginal discharge or infection, stomach pains, discomfort when walking or sitting down, pregnancy.

Behavioural Indicators: Sudden or unexplained changes in behaviour e.g. becoming aggressive or withdrawn, fear of being left with a specific person or group of people, having nightmares, running away from home, sexual knowledge which is beyond their age, or developmental level, sexual drawings or language, bedwetting, eating problems such as overeating or anorexia, self-harm or mutilation, sometimes leading to suicide attempts, saying they have secrets they cannot tell anyone about, substance or drug abuse, suddenly having unexplained sources of money, not allowed to have friends (particularly in adolescence), acting in a sexually explicit way towards adults.

Emotional abuse

Emotional abuse can be difficult to measure, as there are often no outward physical signs. There may be a developmental delay due to failure to thrive and grow, although this will usually only be evident if the child puts on weight in other circumstances, for example hospitalised or away from their parents' care. Even so, children who appear well-cared for may nevertheless be emotionally abused by being taunted, put down or belittled. They may receive little or no love, affection or attention from their parents or carers. Emotional abuse can also take the form of children not being allowed to mix or play with other children.

Behavioural Indicators: Neurotic behaviour e.g. sucking, hair twisting, rocking, being unable to play, fear of making mistakes, sudden speech disorders, self-harm, fear of parent being approached regarding their behaviour, developmental delay in terms of emotional progress.

Neglect

Neglect can be a difficult form of abuse to recognise, yet have some of the most lasting and damaging effects on children.

Physical Indicators: Constant hunger, sometimes stealing food from other children, constantly dirty or "smelly", loss of weight, or being constantly underweight, inappropriate clothing for the conditions.

Behavioural Indicators: Complaining of being tired all the time, not requesting medical assistance and/or failing to attend appointments, having few friends, mentioning being left alone or unsupervised.

6. The Role of the Designated Liaison Persons (DLP/Deputy DLP)

If any members of staff have concerns, or are alarmed by a behaviour or incident, they should talk to the designated member of staff responsible. If a designated member of staff is not available, or cannot be contacted, then the incident should be reported to any senior member of staff available.

No matter how well you know these guidelines you may still be shocked and unprepared when something happens.

Should a young person disclose abuse to you the following important points should be taken into consideration:

- Take what the young person says earnestly.
- Be as calm and as 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 young person.
- Reassure the young person that it was right to tell somebody what happened and that they have done nothing wrong.
- Remember that the young person may initially be testing your reactions and may only fully open up over a period of time.
- Listen to what the young person has to say. Give them the time and opportunity to tell as much as they are able and wish to tell. Do not pressure the young person. Allow him / her to disclose at their own pace and in their own language.
- Be careful when asking questions. Your job is not to investigate but to support the young person. Avoid leading questions such as whether a specific person carried out the abuse, or whether the specific acts mentioned by the young person occurred. Such questions may complicate an official investigation.
- Do not express any opinion about the alleged abuser to the young person.
- It may be necessary to reassure the young person that your feelings towards him/ her have not been affected in a negative way as a result of what he/she has disclosed.
- Record the information and report to your manager and a DLP as soon as possible.

The role of the DLP is an important one and will include the following duties as part of their responsibilities:

- Bring these guidelines to the attention of all who work in with ICE.
- When a case of suspected child abuse occurs, contact the relevant HSE personnel about a case or suspected case of child abuse.
- Be thoroughly familiar with these guidelines.
- Be able to advise other members of staff and host families of the child protection policy in theory and practice.

Advice

If as the DLP or Deputy DLP, you would prefer to talk to someone before initiating the referral procedures, advice is available from:

Department of Children and Youth Affairs, 43 - 49 Mespil Road, Dublin 4.

Phone: 01 6473000, E-Mail: contact@dcya.gov.ie ; Web: www.dcya.gov.ie

7. Procedure for Reporting an Incident of Child Abuse

The HSE Children and Family Services 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.

- a. A disclosure is defined as a specific allegation of abuse. It may or may not be made against a named individual.
- b. A suspicion is when concern is expressed about abuse that may have taken place or concern that abuse may take place.
- c. An allegation or suspicion of child abuse may be made known to the Managing Directors of ICE.
- d. The DLP or Deputy DLP will be available to provide support and advice.
- e. The safety and protection of the child should be the paramount concern.
- f. It is not our responsibility to investigate, assess or determine if abuse has occurred. It is our responsibility to record the information or concern and communicate this to the Statutory Authority.
- g. All disclosures and suspicions must be reported to the Statutory Authorities, i.e. Health Service Executive staff and An Garda Siochana.
- h. In making a report on suspected or actual abuse, the individual should ensure that the first priority is always for the safety and welfare of the child. In emergency situations, the information should be communicated directly.

8. Reporting Procedures in the Case of Staff being reported for Abuse

The first priority is always for the safety and welfare of the child.

In the event of such a report being made contact should be made with the Designated Person i.e. the DLP/Deputy DLP. The Designated Person will assess and review the information that has been provided as quickly and effectively as possible. After a short period of consultation and advice from the appropriate external organisation such as the HSE, it should be decided whether the allegation is unfounded or whether it is warranted. It is essential in reporting any case of alleged/suspected abuse that the principle of confidentiality applies. The information should only be shared on a 'need to know' basis and the number of people that need to be informed should be kept to a minimum. If the worker is found to have been engaged in poor practice, the representative will be warned about the practice and it may constitute grounds for termination.

In an emergency, a report should be made directly to the Garda Siochana or The Health Service Executive.

9. Management Systems in Place to Enhance Child Protection

The DLP is responsible for keeping the records related to Child and Vulnerable Adult Safeguarding in secure storage, including:

- Any disclosures, concerns or allegations of abuse;

- The follow up to any complaints, disclosure, concerns or allegations, including informal advice from the relevant authorities or agencies, official reports and the minutes of any meetings in relation to reports.
- All Garda Vetting Forms and related correspondence.
- Following good recruitment and selection procedures minimises the risk of unsuitable people obtaining posts working with children and young people. However, It does not eliminate the possibility of abuse within the organisation and constant vigilance is important that:
 - All staff are familiar with the child protection policy and procedures and those working directly with children have completed a child protection course.
 - All staff are aware of what is expected of them in terms of behaviour.

Protecting of our staff

As we have staff and students on site who are over 18 there is a risk of allegations of abuse against children. We give guidance in our handbooks on how best to avoid allegations of abuse, e.g. with regards to hugging a child or showing affection, which could be misconstrued. We have a 'no touching' policy and for staff to be instructed not to be alone in a room with a child.

This policy has been made available to ICE personnel and is readily accessible to parents/agents on request. The policy is available on our web-site www.iceireland.com

This policy was last reviewed on June, 2023