



Child Protection Policy

Signed: _____

Jill Carey
Chief Executive Officer
June 2011

Signed: _____

John Green
Chairperson of the Board of Directors
June 2011

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1. Introduction

Festina Lente is committed to safeguarding the rights of children, particularly those for whom we provide services. Festina Lente's duty of care is to provide a safe place for children and in ensuring they are protected from any form of abuse. The welfare of the child is paramount in our decisions, activities and programmes that are provided to children at Festina Lente. We also apply the same level of care to children on work experience placements or on other external outings or placements.

2. Child Protection Policy Statement

It is the Policy of Festina Lente to provide all activities and programmes in such a way that the protection, safety and welfare of children is respected and maintained at all times. Festina Lente recognises that the welfare of children is paramount, regardless of all other considerations. Festina Lente acknowledges the rights of children to be protected, treated with respect, listened to and have their own views taken into consideration.

2.1. Definition of a Child

Child refers to children, young people but also includes venerable adults in terms of this policy. A child means a person under the age of 18 years other than a person who is or has been married.

3. Definitions of Abuse:

As per Children First (1999) there are four types of abuse; physical abuse, emotional abuse, sexual abuse and neglect. Festina Lente has a separate policy which addresses bullying & harassment. (SEE HUMAN RESOURCE POLICY DOCUMENT) If an incident of bullying amounts to abuse or raises a concern regarding child protection issues, it will be treated as such and reported to the statutory authorities if reasonable grounds for concern are established".

A child can be subject to several forms of abuse at one time. Specific indicators of child abuse are available in the Appendices (section 17.4 of this document).

3.1. Neglect

Neglect can be defined as an *omission*, where the child suffers significant harm or impairment of development by being deprived of food, clothing, warmth, hygiene,

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intellectual stimulation, supervision and safety, attachment to and affection from adults, medical care.

3.2. Emotional Abuse

Emotional abuse occurs when a child's need for affection, approval, consistency and security are not met. Examples of emotional abuse include;

- The imposition of negative attributes on children, expressed by persistent criticism, sarcasm, hostility or blaming;
- Conditional parenting in which the level of care shown to a child is made contingent on his or her behaviours or actions;
- Emotional unavailability by the child's parent/carer;
- Unresponsiveness, inconsistent, or inappropriate expectations of the child;
- Premature imposition of responsibility on the child;
- Unrealistic or inappropriate expectations of the child's capacity to understand something or to behave and control himself in a certain way;
- Under or over-protection of the child;
- Failure to show interest in, or provide age-appropriate opportunities for, the child's cognitive and emotional development;
- Use of unreasonable or over-harsh disciplinary measures;
- Exposure to domestic violence.

3.3. 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 of physical injury include the following:

- shaking
- use of excessive force in handling
- deliberate poisoning suffocation
- Munchausen's Syndrome by Proxy
- allowing or creating a substantial risk of significant harm to a child

3.4. Sexual Abuse

Sexual Abuse occurs when a child is exploited by another person for his or her gratification or sexual arousal or for that of others. Examples of child sexual abuse include;

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- exposure of the sexual organs or any sexual act intentionally performed in the presence of the child;
- intentional touching or molesting of the body of a child whether by a person or object for the purpose of the sexual arousal or gratification;
- masturbation in the presence of the child or the involvement of the child in an act of masturbation;
- sexual intercourse with the child whether oral, vaginal, or anal;

4. Reporting Procedures

4.1. Guidelines on Dealing with Disclosures of Abuse

If a child hints at or tells a staff member that he or she is being abused, it must be handled very sensitively, and in the following way:

- Stay calm and listen – give the child time to say what she or he wants
- Don't ask leading questions or details, or make suggestions
- Don't stop the child recalling significant events, but don't make him or her repeat the story unnecessarily
- Reassure the child, but don't promise to keep it a secret
- Explain what needs to be done next
- Record the discussion as carefully as possible

The information should then be passed on as per the reporting procedures described below.

4.2. Guidelines for Recognition of Abuse

There are commonly three stages in the identification of child abuse. These are:

- 1) *Considering the Possibility:* The possibility of child abuse should be considered if a child appears to have suffered a suspicious injury for which no reasonable explanation can be offered. It should also be considered if the child seems distressed without obvious reason or displays persistent or new behavioural problems. The possibility of child abuse should also be considered if the child displays unusual or fearful responses to parents/ carers.
- 2) *Looking out for Signs of Abuse:* Signs of abuse can be physical, behavioural or developmental. A cluster or pattern of sign is likely to be more indicative of abuse.
Disclosures should always be believed.
- 3) *Recording of Information:* If abuse is suspected it is important to obtain as much information as possible. Observations should be accurately recorded and should include

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dates, times, names, locations, context and any other information which may be relevant.

4.3. Responsibilities for Reporting & Investigating Child Abuse

All staff must be alert to the possibility that the children with whom they are in contact may be being abused.

The primary responsibility of the person who first suspects or is told of the abuse, is to report it and to ensure that their concern is taken seriously. The guiding principles in regards to reporting abuse are as follows:

- the safety and well-being of the child or young person must take priority
- reports should be made without delay
- the principle of natural justice should apply, which means that a person is innocent until proven otherwise

Any reasonable concern or suspicion of abuse must elicit a response. The following constitute reasonable grounds for concern:

- a specific indication from the child that (s)he was abused;
- an account by a person who saw the child being abused;
- evidence, such as *an injury or behaviour* which is consistent with abuse and unlikely to be caused another way;
- An injury or behaviour which is consistent both with abuse and with an innocent explanation but where there are corroborative indicators supporting the concern that it may be a case of abuse. An example of this would be a pattern of injuries, an implausible explanation, other indications of abuse, dysfunctional behaviour;
- Consistent indication, over a period of time, that a child is suffering from emotional or physical neglect.

Staff have a supportive, not an investigative role and while the basis for concern must be established as comprehensively as possible, children or parents should not be interviewed in detail about the suspected abuse.

4.4. Reporting Procedure

4.4.1. *Steps To Be Taken By Employees*

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The following procedures are to be followed by employees if they suspect or are aware of child abuse:

- The concern should be reported without delay to the Designated Person, Jacqueline Joynt. In the case that the Designated Person is not available the report should be made to the Deputy Designated Person, Jill Carey. In the absence of either person a report should be made immediately to the available manager.
- The standard reporting form for Reporting Child Protection and/or Welfare Concerns should be completed by the reporting person (Appendix A).
- It is important that everyone in the organisation is aware that the person who first encounters a case of alleged or suspected abuse is not responsible for deciding whether or not abuse has occurred. That is a task for the HSE or An Garda Síochána. Under no circumstances should any individual member of staff or volunteer or the organisation itself attempt to deal with the problem of abuse alone.

4.4.2. Steps To Be Taken By the Designated Person

- The designated person will ensure the concern is documented and will consider whether there are reasonable grounds for reporting it to the health board. The Designated Person may informally consult the Duty Social Worker, who can assist in determining whether or not to formally report their concerns to the HSE. There may be a need to clarify or get more information about the matter.
- A suspicion, which is not supported by any objective indication of abuse or neglect, would not constitute a reasonable suspicion or reasonable grounds for concern. However, these suspicions should be recorded or noted internally by the organisation as future suspicions may lead to the decision to make a report and earlier suspicions may provide important information for the statutory child protection agency or An Garda Síochána

4.4.3. Where reasonable grounds exist for the reporting of suspected or actual child abuse:

- A report should be made to the HSE in person, by phone or in writing. Each HSE area has a social worker on duty for a certain number of hours each day. The HSE area to which the report is made is determined by the address of the child. The duty social worker is available to meet with, or talk on the telephone, to persons wishing to report child protection concerns. The contact details for the duty social worker in Dublin Mid Leinster are included in appendices A.
- Persons wishing to report child abuse concerns should make personal contact with the duty social worker. This will facilitate the social worker in gathering as much information as possible about the child and his or her situation. If a third person,

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such as a designated person, makes the report, it is likely that the social worker will wish to speak to the person who first witnessed the incident, received the disclosure, or experienced the concern.

- In the event of an emergency or the non availability of health board staff the report should be made to An Garda Síochána. This may be done at any Garda Station.
- In the event that the alleged victim has sustained an injury or has been harmed physically, medical attention should be sought as soon as possible.
- It is good practice for the families/carers to be informed if a report is to be submitted to the health board or An Garda Síochána unless doing so is likely to endanger the child or undermine an investigation. Guidance may be obtained from the health board or An Garda Síochána on how this might be undertaken.
- In cases of emergency, where a child appears to be at immediate and serious risk, An Garda Síochána should be contacted. **Under no circumstances should a person be left in a dangerous situation pending an investigation.**
- The Chairperson of the Board of Directors will be kept apprised at all stages

4.4.4. *If the basis for the report does not constitute reasonable grounds of concern:*

- If the Designated Person (Jacqueline Joynt), decides (in consultation with the local HSE if required) that reasonable grounds for reporting the incident or suspicion to the HSE or An Garda Síochána do not exist, the individual worker who referred the matter should be given a clear written statement of the reasons why the organisation is not taking action.
- The employee should be advised that, if they remain concerned about the situation, they are free to consult with, or report to, the health board or An Garda Síochána themselves. The provisions of the Protections for Persons Reporting Child Abuse Act, 1998 apply once they report “reasonably and in good faith”.

4.5. Responding to Retrospective Disclosures by Adults

- Where an adult make a retrospective disclosure of abuse, it is essential that consideration is given to the current risk to any child who may be in contact with the alleged abuser. If any risk is deemed to exist a report of the allegation should be made to the HSE without delay.
- Support for adults who have experienced childhood abuse is available from *The National Counselling Service*. Free-phone: 1800 235 234.

5. Designated Person

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The Designated Person is responsible for reporting allegations or suspicions of child abuse to the HSE or An Garda Síochána. The Designated Person is also a resource for any staff member or volunteer who has child protection concerns.

Designated Person	Jacqueline Joynt
Job Title	Programme Manager
Contact Details	01 272 0704 (ext. 207) 087 3293686 saolanois@festinalente.ie

Deputy Designated Person	Jill Carey
Job Title	Chief Executive Officer
Contact Details	01 272 0704 (ext. 204) 086 354 9755 jill@festinalente.ie

6. Confidentiality Statement

- All information regarding concern or assessment of child abuse will be forwarded on a *need to know* basis.
- Giving information is not considered a breach of confidentiality if such information is for the protection of a child. Festina Lente cannot guarantee complete confidentiality if the welfare of the child is at risk.
- Parents and children have a right to know if personal information is being shared, unless doing so could put the child at further risk.

7. Data Protection

- All records are kept in a safe and confidential manner, in line with The Data Protection Acts, 1988/2003. Records relating to Child Protection are retained by the Designated Person. The Designated Person and Deputy Designated Person have access to these records.

8. Safe Recruitment and selection of staff

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Festina Lente acknowledges that people with a tendency to abuse can be attracted to the type of work which gives them the opportunity to be with children, and this always has to be borne in mind when recruiting new workers.

Festina Lente is committed to applying safe recruitment and selection procedures, including the following key processes:

- Advertising/publicising prospective positions as widely as possible
- Providing clear definitions of roles and responsibilities for staff and volunteers
- Providing applicants with information about the organisation and its activities
- Providing an application form
- Seeking Garda Vetting and the completion of a Declaration Form from all staff and volunteers
- Convictions against children or adults exclude any applicant
- Interviews are undertaken by at least two representatives of the organisation
- A minimum of two recent references must be provided by applicants but these shall not be from relatives or family members. References should be followed up by a phone call.
- Identification being made available, which includes name, addresses together with a signature or photograph.
- All appointments are subject to a probationary period
- Contracts are issued specifying that staff will comply with the organisation's child protection policy.

9. Safe Management of Workers

9.1. Supervision & Support

All employees have an opportunity to meet with their manager as part of regular team meetings (once weekly in most departments) and have an opportunity to raise any questions, concerns or suggestions for change. Written minutes of these meetings are recorded.

In the event that a staff member is involved in the detection or reporting of a child protection concern or disclosure, full support will be available from the Designated Person and the Deputy Designated Person.

9.2. Training & Induction

- Staff will receive induction in the organisations Child Protection Policy

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- All staff working with children or vulnerable adults will receive Child Protection and Welfare Training
- All staff will be required to sign up to the Child Protection Policy

10. Procedures for Allegations of Abuse against Staff & Volunteers

Festina Lente has a dual responsibility to the children who attend here, and to those employed by Festina Lente. Festina Lente will treat any allegation against a staff member or volunteer with sensitivity & support will be provided for those affected. It is the goal of Festina Lente to treat any staff or volunteer involved in an allegation of abuse with fairness while protecting the child involved.

There are two procedures to be followed under the circumstances that there is an allegation of abuse made against a staff member or volunteer;

- 1) The reporting procedure in respect of the child
- 2) The procedure for dealing with the employee

Where possible the two processes should be conducted by two different people.

The following reporting procedures should be followed in the situation where there is an allegation of abuse made against a staff member.

- The concern should be reported without delay to the Designated Person, Jacqueline Joynt. In the case that the Designated Person is not available the report should be made to the Deputy Designated Person, Jill Carey. In the absence of either person a report should be made immediately to the available manager.
- The standard reporting form *Reporting Child Protection and/or Welfare Concerns* should be completed by the reporting person (Appendix A).
- The standard procedure as described above should be followed without delay. The welfare of the child is paramount and there should be no delay in making a report to the health board and An Garda Síochána where there are reasonable grounds for concern.
- The CEO will privately inform the employee that an allegation has been made against him/her and will explain the nature of the allegation.
- The employee should be allowed an opportunity to respond and this response should be noted by the CEO with the employee's knowledge and communicated to the HSE when a formal report is being made.
- The CEO must immediately ensure that no child is exposed to unnecessary risk. The CEO as a matter of urgency will take any protective measures necessary. These measures should be proportionate to the level of risk and should not unreasonably penalise the employee, financially or otherwise, unless necessary to protect children.

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It may be appropriate for that individual to be suspended with pay, pending an investigation of the allegation. This is at the discretion of the CEO. If suspension is not appropriate, increased supervision may be introduced or re-deployment where there is no contact with children

- It is good practice for the families/carers to be informed if a report is to be submitted to the HSE or An Garda Síochána unless doing so is likely to endanger the child or undermine an investigation. Guidance may be obtained from the HSE or An Garda Síochána on how this might be undertaken.
- The CEO will arrange a meeting in consultation with the relevant external bodies, the HSE and An Garda Síochána to follow up on the allegation of abuse & determine the appropriate course of action. The CEO will liaise closely with the investigating bodies; HSE and/or An Garda Síochána, to ensure that actions taken by the organisation do not undermine or frustrate any investigations.
- The Chairperson of the Board of Directors will be informed of the allegation as soon as possible and will be kept apprised at all stages

10.1. Protection for persons reporting child abuse concerns

The Protections for Persons Reporting Child Abuse Act, 1998 provides that once reasonable grounds for concern are established and a report is made in good faith which is later found to be without grounds, any person taking an action against the person making the report must prove that the report was made maliciously. This legislation also protects a worker who makes a report in good faith which is later found to be groundless from any action taken by an employer. This Act also creates an offence of making a false or malicious report.

11. Code of Behaviour for staff and volunteers

The first priority for all staff and volunteers is the child's protection, safety and enjoyment of the equestrian activity.

Staff and volunteers are responsible for setting and maintaining the boundaries between a working relationship and friendship with the child and promoting enjoyment, equality, fair play and the welfare of the child.

In order to promote the safety of staff and volunteers and that of the child, staff and volunteers should:

- Be positive by giving praise and encourage effort as well as results.
- Listen to and demonstrate respect for the children they are working with.

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- Encourage children to get involved in decision making where appropriate and to input into how things are run.
- Encourage fair play and treat all children equally regardless of gender, race, culture or disability.
- Be sensitive to the possibility of developing favouritism, or becoming over-involved or spending a great deal of time with any one child.
- Be aware that while physical contact is a valid way of comforting, reassuring and showing concern for children, it should only take place when it is acceptable to all persons concerned.
- Be sensitive to the risks involved in participating in activities which may involve physical contact with children.
- Put the welfare of the child first, striking a balance between this and improving performance.
- Have the relevant knowledge and experience to work with children.
- Respect the personal space, safety and privacy of others.
- Encourage children to report cases of bullying to either a designated person or a staff member of their choice. Complaints must be brought to the attention of management.

Staff and volunteers should not:

- Spend excessive amounts of time with children away from others
- Facilitate sessions alone with children
- Convey children alone in their car

Staff or volunteers should never:

- Physically punish or be in any way verbally abusive to a child
- Tell jokes of a sexual nature in the presence of children
- Take children to their home
- Exert undue influence over a child in order to obtain personal benefit or reward
- Engage in rough physical games, sexually provocative games or allow or engage in inappropriate touching of any kid and/or make sexually suggestive comments about, or to, a child.

11.1. Physical Contact

- Physical contact during horse riding or other equine related activity should always be intended to meet the child's needs and not the needs of the staff member or volunteer. The staff or volunteer should use appropriate contact only when the aim is to assist in the development of the skill or activity or for safety reasons.

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- Examples of when appropriate physical contact may be necessary include assisting a rider to mount a horse, repositioning of the rider, demonstrating rein contact, or grooming.
- If physical contact is necessary it should take place in an open environment and the staff member or volunteer should explain what s/he is going to do and seek an indication of consent.
- Contact should be determined by the age and developmental stage of the participant – staff or volunteers should not do something that a child can do for themselves. Examples of this can include –adjusting stirrups, mounting, dismounting, and tightening girths.
- Staff members or volunteers should never engage in inappropriate touching such as touching of the groin, genital areas, buttocks, breasts or any other part of the body that might cause a child distress or embarrassment.

11.2. General Supervision

- Children will not be left unattended. Children who are accessing riding lessons will be supervised by their coach for the duration of the session with Festina Lente Riding School
- Children who are accessing riding lessons will be told to go straight from their Stable Management session to the Coaching Session.
- Children will be supervised during lunch breaks during pony camps. For other services, all breaks are supervised in the canteen.
- Children will not be brought to the bathroom by staff. If a child has additional toileting needs that s/he cannot manage independently, arrangements should be made with the parent or guardian to bring the child to the bathroom.

11.3. Ratio of Staff to Children

- For equestrian activities the ratio of coach to child will be informed by the needs of the person. However, as a rule the following will apply:
 - Children who ride independently in a group lesson 1:8
 - Beginner riders needing a leader 1:6
 - Therapeutic Riding, whilst this can vary, at a minimum will be 2:1 but can be 3 or 4: 1
 - Equine Assisted Learning
 - Individual session is 1:1

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- Group session will be 2:3 or 4 (depending on number in group)
 - Special Needs Helpers programme 1:2
 - Helpers Programme 1:8
 - Pony Camps 1:8 (with leaders as necessary)
 - Equestrian Yard: 1 : 8 Maximum
- The ratio of supervision to children accessing non-equestrian activities will be informed by the needs of the person and the particular services being accessed. However, as a rule the following will apply:
 - Walled Garden : The Walled Garden is a 2.5 acre area and consequently support and supervision for children will be in this context rather than staff ratio to child
 - Training and Day Services : 1 : 8 Maximum

12. Parental Involvement / Information Sharing

- Festina Lente promotes an open relationship with parents, which involves consulting them about everything that concerns their children, and encouraging them to get involved with the organisation whenever possible.
- On initial contact with Festina Lente parents and children will be made aware of this policy through an information leaflet.
- Parents of children accessing the services of Festina Lente will be asked to complete a consent form for all activities as standard practice.
- Parents of children accessing the services of Festina Lente will be asked to complete and sign a consent form for photographs to be taken of their children while participating in activities.
- Parents will also be advised of the complaints policy and will be further reminded of the procedures for making a complaint should the need arise. Please see the complaints procedures detailed below.
- All efforts will be made to keep parents informed of all aspects of their child's participation in the service. This will be done through ongoing communication between instructors, the riding school manager and the parent/guardian.
- The welfare of children is of paramount importance. A proper balance must be struck between protecting children and respecting the rights and needs of parents/carers and families. Where there is conflict, the child's welfare must come first.
- Parents/carers have a right to respect and should be consulted and involved in matters that concern their family.
- Parents and/or guardians are entitled to be made aware of information being forwarded to the HSE unless in so doing, a child is placed at further risk.
- All actions in response to concerns about child abuse should be taken in a manner that supports the possibility of families providing safe and nurturing care for their

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children, now or in the future. For parents/carers, being asked to participate in, or cooperate with, an investigation into suspected child abuse can provoke powerful emotions, such as anger, fear, shame, guilt or powerlessness. Moreover, parents/carers are usually unaware of the complexity of what is likely to be involved and are unsure of the appropriate rules of behaviour.

13. Involving Children/ Information Sharing

- Festina Lente supports the rights of children to be protected, treated with respect, listened to and have their own views taken into consideration.
- Children are encouraged to approach a staff member of their choice if they would like to make a complaint about the service they are receiving or the actions of staff members or volunteers.
- Information about the organisation and its policies are provided to children in a manner that is reflective of their developmental and cognitive ability, age and current needs in this area.
- Festina Lente is aware of the need to tailor information to suit the communication needs of persons with disabilities and does so on a child centred basis.

14. Complaints Procedures

14.1. What is a complaint?

A complaint can be made about any action by Festina Lente or its employees/volunteers, that it is claimed, does not accord with fair or sound practice and adversely affects the person by whom or on whose behalf the complaint is made

14.2. Who can make a complaint?

Any person who is being or was provided with a service by Festina Lente or who is seeking or has sought provision of such service may complain.

14.3. How can a complaint be made?

A complaint can be made verbally, or by writing, email or fax to the complaints officer, Jacqueline Joynt. A child can approach a staff member of their choice to make a complaint and this should be communicated to management.

14.4. What happens when a complaint is made?

14.4.1. Management of a Verbal Complaint at the Point of Contact: Staff will resolve complaints at the point of contact wherever possible.

14.4.2. Informal Resolution: The CEO will consider whether it would be practicable, having regard to the nature and the circumstance of the complaint, to seek the consent of the person making the complaint and any other person to whom the complaint relates to finding an informal resolution of the complaint by the parties concerned.

14.4.3. Formal Investigation:

- The CEO will reply in writing to the person making the complaint within 5 working days, to advise them the complaint has been received and to outline the steps that he or she proposes to take in investigating the complaint and the time limits for the completion of the investigation.
- Staff have an obligation to participate and support the investigation of any complaint where requested.
- The CEO will endeavour to investigate and conclude the investigation of a complaint within 30 working days of it being acknowledged.
- If the investigation cannot be investigated and concluded within 30 working days then the CEO must communicate this to the complainant and the relevant service/staff member within 30 working days of acknowledging the complaint and give an indication of the time it will take to complete the investigation. Where the 30 working days time frame cannot be met despite every best effort, the CEO must endeavour to conclude the investigation of the complaint within 6 months of the receipt of the complaint.
- If this timeframe cannot be met, the complaints person must inform the complainant that the investigation is taking longer than 6 months, give an explanation why and outline the options open to the complainant.
- The CEO must update the complainant and the relevant staff/ service member every 20 working days.
- If the complainant is not satisfied with the outcome of the complaints management process he/she may seek a review of the complaint by the Ombudsman/ Ombudsman for Children.

14.5. What is the time frame for making a complaint?

A complaint must be made within 12 months of the date of the action giving rise to the complaint or within 12 months of the complainant becoming aware of the action giving rise to the complaint

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The CEO may extend the time limit for making a complaint if in the opinion of the CEO special circumstances make it appropriate to do so.

14.6. What is the outcome of the complaints procedure?

Festina Lente is aware that an effective complaints system which offers a range of timely and appropriate remedies will enhance the quality of service to the consumers of Festina Lente Foundation. It will have a positive effect on staff morale and improve the Festina Lente Foundation's relations with the public. It will also provide useful feedback to Festina Lente Foundation and enable it to review current procedures and systems which may be giving rise to complaints.

Redress should be consistent and fair for both the complainant and the service against which the complaint was made. Festina Lente Foundation should offer forms of redress or responses that are appropriate and reasonable where it has been established that a measurable loss, detriment or disadvantage was suffered or sustained by the claimant personally. This redress could include:

- Apology
- An explanation
- Refund
- Admission of fault
- Change of decision
- Replacement
- Repair /rework
- Correction of misleading or incorrect records
- Technical or financial assistance
- Recommendation to make a change to a relevant policy
- A waiver of debt

For the full text of the Festina Lente Complaints Procedure please contact the CEO. The Festina Lente complaints procedure is in line with the provisions of the Health Act 2004 (Part 9).

15. Trips Away

- Trips away from Festina Lente are organised so they maximise participation, fun and learning but also safety.
- Written permission of parents/guardians should be obtained for all overnight trips; this should include permission to travel, behaviour agreement and any

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medical/special needs of the group (including permission to treat the participant). The agreement should be signed by both parents and participants.

- The supervising staff are chosen carefully and the gender and ratios of staff members to children should be reflective of the child's developmental age, ability and gender.
- Adults should not share a room with a child. Where the presence of an adult is needed there should be more than one child in the room with the adult. If children are sharing a room it should be with those of the same groupings, age and gender.
- When planning overnight trips attention should be paid the suitability of the accommodation available and it's suitability with consideration to the developmental age, ability and gender groupings. Where possible a pre-visit should be carried out to determine suitability of accommodation.
- Details of the venue's Child Protection Policy should be obtained.
- Children are not permitted to drink alcohol, smoke or use other illegal substances. Staff members should act as role models in this respect.
- Children shall not be left unattended.
- Dangerous behaviour is not allowed.
- Staff members must know at all times where children are and what they are doing.
- Trip organisers should ensure that safe methods of transport are available at all times.
- A programme of events for the trip away should be documented and made available in advance of the trip.
- A first aid kit should be available during the trip away and supervising staff members should be aware of the proximity of medical services to their location. At least one supervisory staff should have completed first aid training.
- In the case of an accident or an emergency, the staff member should contact emergency or medical services as appropriate. The parents/guardians of the child should be informed at the soonest opportunity and the designated person should be advised without delay.

16. Accidents/Incidents Procedure

- Designated first aid persons are trained in Occupational First Aid and a list of those staff members is displayed throughout the centre.
- Emergency numbers are displayed throughout the centre.
- First Aid Boxes are located throughout the centre.
- Accident and Incident recording books are available in the Riding School office and all staff members are aware of their location and must complete the relevant paperwork when an accident or an incident occurs.

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- There is a current Safety Statement document which has been distributed to all staff and is available. The health and safety committee meet regularly to monitor these matters.
- Appropriate insurance is in place to cover the activities of the centre.
- All parents/guardian are required to provide a current contact number when initially making contact with the centre and these are recorded with the child's personal details, in order to facilitate emergency contact if necessary.

17. Appendices

17.1. Overview of Services

Festina Lente provides a wide range of programmes to children – many of whom have a disability.

These include:

17.1.1. Pobal supported Community Services Programmes (Riding School) for employment of adults with a disability and equine related programmes for children and adults.

Equestrian activities include:

- Term Riding
- Private Lessons
- Therapeutic riding
- Equine Assisted Learning
- Pony Camps
- Individually designed equestrian programmes
- Volunteering Programmes
- Helpers Programmes
- Helpers with Special Needs Programmes

17.1.2. FAS funded Equestrian Vocational Training Programme for people with a disability

17.1.3. Pobal supported Community Services Programmes (Walled Garden Project) employment of adults with a disability and horticultural related programmes for the wider community.

These include:

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- Volunteering Programme
- Garden Shop
- Allotment
- Workshops
- Events

17.1.4. HSE funded Day Service (Saol Anois and Rehabilitation Training Programme (Transition Training Programme) for people with a disability

17.2. Key Legislative Provisions

There are various legislative provisions relevant to child protection work. All health board staff and the personnel of voluntary and statutory agencies working with children need to be aware of their principal obligations.

The main legislation governing the care and protection of children is the Child Care Act, 1991. The Domestic Violence Act, 1996 and the Protections for Persons Reporting Child Abuse Act, 1998 are also relevant to child protection and welfare.

The Child Care Act, 1991

The purpose of the Act is to "up-date the law in relation to the care of children who have been assaulted, ill-treated, neglected or sexually abused or who are at risk."

Domestic Violence Act, 1996

This Act introduced major changes in the legal remedies for domestic violence. There are two main types of remedies available: a safety order which prohibits a person from further violence or threats of violence and a barring order which requires the violent person to leave the family home.

2.4 Protections for Persons Reporting Child Abuse Act, 1998

This Act came into operation on 23rd January, 1999 and provides that once reasonable grounds for concern are established and a report is made in good faith which is later found to be without grounds, any person taking an action against the person making the report must prove that the report was made maliciously. This legislation also protects a worker who makes a report in good faith which is later found to be groundless from any action taken by an employer. This Act also creates an offence of making a false or malicious report.

The Data Protection Act, 1988

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The Act gives a right to every individual, irrespective of nationality or residence, to establish the existence of personal data, to have access to any such data relating to him and to have inaccurate data rectified or erased.

The Education Act, 1998

This Act places an obligation on those concerned with its implementation to give practical effect to the constitutional rights of children as they relate to education and, as far as practicable and having regard to the resources available, to make available to pupils a level and quality of education appropriate to meeting their individual needs and abilities.

The Non-Fatal Offences Against the Person Act, 1997

The two relevant provisions of this act are (i) it abolishes the rule of law under which teachers were immune from criminal liability in respect of physical chastisement of pupils; and (ii) it describes circumstances in which the use of reasonable force may be justifiable.

Freedom of Information Act, 1997

This Act enables members of the public to obtain access, to the greatest extent possible consistent with the public interest and the right to privacy, to information in the possession of public bodies.

Criminal Justice Act 2006

Reckless Endangerment of Children: This Act provides that a person, having authority or control over a child or abuser, who intentionally or recklessly endangers a child by causing or permitting any child to be placed or left in a situation which creates a substantial risk to the child of being a victim of serious harm or sexual abuse, or failing to take reasonable steps to protect a child from such a risk while knowing that the child is in such a situation, is guilty of an offence.

17.3. Principals for Best Practice in Child Protection

- The welfare of children is of paramount importance.
- A proper balance must be struck between protecting children and respecting the rights and needs of parents/carers and families; but where there is conflict, the child's welfare must come first.
- Children have a right to be heard, listened to and to be taken seriously. Taking account of their age and understanding, they should be consulted and involved in all matters and decisions which may affect their lives.

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- Early intervention and support should be available to promote the welfare of children and families, particularly where they are vulnerable or at risk of not receiving adequate care or protection.
- Parents/carers have a right to respect and should be consulted and involved in matters which concern their family.
- Actions taken to protect a child, including assessment, should not in themselves be abusive or cause the child unnecessary distress. Every action and procedure should consider the overall needs of the child.
- Intervention should not deal with the child in isolation; the child must be seen in a family setting.
- The criminal dimension of any action cannot be ignored.
- Children should only be separated from parents/carers when all alternative means of protecting them have been exhausted. Re-union should always be considered.
- Agencies or individuals taking protective action should consider factors such as the child's gender, age, stage of development, religion, culture or race.
- Effective prevention, detection and treatment of child abuse or neglect requires a co-ordinated multi-disciplinary approach to child care work and effective inter-agency management of individual cases.
- All agencies and disciplines concerned with the protection and welfare of children must work co-operatively in the best interests of children and their families. In practice, effective child protection requires compulsory training and clarity of responsibility for personnel involved in organisations working with children.

17.4. Indicators of Abuse:

The purpose of this section is to provide indicators of the various types of abuse in order that staff can recognise when abuse may be occurring. A child may be subject to more than one type of abuse at one time and may display many different indicators of abuse.

It is important to note that the list of indicators below are only a guidelines and the signs described may be indicative of many other conditions.

17.4.1. Signs and Symptoms of Child Neglect

Child neglect should be suspected in cases of:

- Abandonment or desertion
- Children persistently being left alone without adequate care and supervision
- Malnourishment, lacking food, inappropriate food or erratic feeding
- Lack of warmth
- Lack of adequate clothing

- 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
- Non-organic failure to thrive i.e. child not gaining weight not alone due to malnutrition but also due to emotional deprivation
- Failure to provide adequate care for the child's medical problems
- Exploited, overworked.

17.4.2. Signs and Symptoms of Emotional Abuse

Emotional abuse can be defined in reference to the following indices. However, it should be noted that no one indicator is conclusive of emotional abuse.

- Rejection
- Lack of praise and encouragement
- 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)
- Serious over-protectiveness
- Inappropriate non-physical punishment (e.g. locking in bedrooms)
- Family conflicts and/or violence
- Every child who is abused sexually, physically or neglected is also emotionally abused
- Inappropriate expectations of a child's behaviour - relative to his/her age and stage of development.

17.4.3. Signs and Symptoms of Physical Abuse:

Unsatisfactory explanations or varying explanations for the following events are highly suspicious:

- Bruises (see below for more detail)
- Fractures
- Swollen joints
- Burns/Scalds (see below for more detail)
- Abrasions/Lacerations
- Haemorrhages (retinal, subdural)
- Damage to body organs
- Poisonings - repeated (prescribed drugs, alcohol)
- Failure to thrive
- Coma/Unconsciousness
- Death.

17.4.4. *Signs and Symptoms of Sexual Abuse:*

Carers and professionals should be alert to the following physical and behavioural signs:-

- Bleeding from the vagina/anus
- Difficulty/pain in passing urine/faeces
- An infection may occur secondary to sexual abuse, which may or may not be a definitive sexually transmitted disease. Professionals should be informed if a child has a persistent vaginal discharge or has warts/rash in genital area.
- Noticeable and uncharacteristic change of behaviour
- Hints about sexual activity
- Age - inappropriate understanding of sexual behaviour
- Inappropriate seductive behaviour
- Sexually aggressive behaviour with others
- Uncharacteristic sexual play with peers/toys
- Unusual reluctance to join in normal activities which involve undressing, e.g. games/swimming.

17.5. Copy of Standard Reporting Form

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Health Service Executive – Dublin Mid-Leinster

PRIVATE AND CONFIDENTIAL
STANDARD FORM FOR REPORTING CHILD PROTECTION AND/OR WELFARE CONCERNS

In Case of Emergency or outside HSE hours, contact should be made with An Garda Síochána

A. To Principal Social Worker / Designate:

1. Details of Child:
 Name: _____ Male: Female:
 Address: _____

 Age/DOB: _____
 School: _____
- 1a. Name of Mother: _____ Name of Father: _____
 Address of Mother if different to Child: _____ Address of Father if different to Child: _____

 Telephone Number: _____ Telephone Number: _____
- 1b. Care and Custody arrangements regarding child, if known: _____

1c. Household Composition:

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

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

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

3. Details of person(s) allegedly causing concern in relation to the child:
 Name: _____ Age: _____ Male: Female:
 Address: _____
 Relationship to Child: _____
 Occupation: _____

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4. Name and Address of other personnel or agencies involved with this child:
- Social Workers: _____ School: _____
- Public Health Nurse: _____ Gardai: _____
- GP: _____ Pre-School/Crèche/Youth Club: _____
- Hospital: _____ Other, Specify e.g. Youth Groups, After School Clubs: _____
5. Are Parents/Legal Guardians aware of this referral to the Social Work Department? Yes No
If Yes, what is their attitude? _____
6. Details of Person reporting concerns: (Please see Guidance Notes re Limitations of Confidentiality)
- Name: _____ Occupation: _____
- Address: _____
- Telephone Number: _____
- Nature and extent of contact with Child/Family: _____
7. Details of Person completing form:
- Name: _____ Occupation: _____
- Address: _____ Tel No: _____
- Signed: _____ Date: _____

Guidance Notes:

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

This reporting form is for use by:

- HSE Personnel
- Professionals and individuals in the provision of child care services in the community who have service contracts with the HSE
- Designated person in a voluntary or community agency
- Any professional, individual or group involved in services to children

-who becomes aware of a child protection or welfare concern, or to whom a child protection or child welfare concern is reported. Please fill in as much information and detail as is known to you. (HSE personnel should do this in consultation with their line manager). This will assist the Social Work Department in assessing the level of risk to the child, or support services required. If the information requested is not known to you, please indicate by putting a line through the question. It is likely that a social worker will contact you to discuss your report.

The HSE aims to work in partnership with parents. If you are making this report in confidence you should note that the HSE cannot guarantee absolute confidentiality as:

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

You should also note that in making a 'bona fide report' you are protected under the Protection for Persons Reporting Child Abuse Act, 1998. If you are unsure if you should report your concerns, please telephone the duty social worker and discuss your concerns with him/her.

Duty Social Work office and referral intake points for the HSE Dublin Mid-Leinster

Dún Laoghaire: Our Lady's Clinic, Patrick St, Dún Laoghaire 01 2808403 Fax: 01 2844955

Dublin South East: Vergemouni Hall, Clonskeagh, Dublin 6 01 2680320/2680333 Fax: 01 2680406

Wicklow: Bray Area: Bray Health Centre: 01 2744100 Fax: 01 2744136
Wicklow/Arklow Area: Glenside Rd HC 0404 60800 /0404 68400 Fax: 0404 60888

Separated Children Seeking Asylum: Sir Patrick Dun's Hospital, Dublin 2
01 6477000/6477015 Fax 01: 6477008

17.6. HSE Duty Social Work Numbers

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Dublin Child Protection Social Work Services

Dublin North Child Protection Services

Health Centre, Cromcastle Road, Coolock, Dublin 5. Tel: (01) 816 4200 / 44

Social Work Office, 22 Mountjoy Square, Dublin 1. Tel: (01) 855 6871

Social Work Office, Ballymun Health Centre, Dublin 11. Tel: (01) 842 0011

Office Hours 9.30am to 5pm

Dublin North West Child Protection Services

Health Centre, Wellmount Park, Finglas, Dublin 11. Tel: (01) 856 7704

Rathdown Road, Dublin 7. Tel: (01) 882 5000

Office Hours 9.30am to 5pm

Dublin South East Child Protection Services

Vergemount Hall, Clonskeagh, Dublin 6. Tel: (01) 268 0320

Office Hours 9.00am to 1pm and 2.15-5pm

Dublin South City Child Protection Services

Duty Social Work Carnegie Centre, 21-25 Lord Edward Street, Dublin 2. Tel: (01) 648 6555

Public Health Nursing, 21-25 Lord Edward Street, Dublin 2. Tel: (01) 648 6500

Family Support Service, Donore Avenue Tel: (01) 416 4441

Office Hours 9.00am to 1pm and 2.15-5pm

Dublin South West Child Protection Services

Millbrook Lawn, Tallaght, Dublin 24. Tel: (01) 452 0666

Office Hours: 9.00am - 1.00pm 2.15pm - 5.00pm

Dublin West Child Protection Services

Social Work Department, Cherry Orchard Hospital, Ballyfermot, Dublin 10. Tel: (01) 620 6387

Office Hours: 9.00 - 1.00 2.15 - 5.00

Dun Laoghaire Child Protection Services

Tivoli Road, Dun Laoghaire, Co. Dublin. Tel: (01) 284 3579

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102 Patrick Street, Dun Laoghaire, Co. Dublin Tel: (01) 236 5120

Office Hours: 9.00am - 1.00pm 2.15pm - 5.00pm

Outside office hours all child protection concerns should be referred to the Gardaí. The HSE operates an out-of hours Crisis Intervention Service in the Dublin area, which can be accessed by emergency services like Hospitals and the Garda Síochána outside of office hours. Crisis Intervention Service: Office Hours Tel (01) 838 7122

Wicklow Child Protection Social Work Services

Wicklow Town, Social Work Department, Seafront, Wicklow Town, Co. Wicklow. Tel: (0404) 60800

Bray, Social Work Department, The Civic Centre, Main Street, Bray, Co. Wicklow. Tel: (01) 274 4180 / 4100

Delgany, Social Work Department, Delgany Health Centre, Delgany, Co. Wicklow. Tel: (01) 287 1482

Kildare/West Wicklow, Child Protection Social Work Team, St Mary's, Craddockstown Road, Naas,
Co Kildare Tel: (045) 882 400

Office hours for all locations are 9am - 5pm Monday – Friday. Outside office hours all child protection concerns should be referred to the Gardaí

17.7. Local Garda Telephone Numbers

Bray Garda Station,
Bray,
Co. Wicklow.

Tel: +353 1 6665300

Wicklow Garda Station,
Wicklow,
Co. Wicklow.

Tel: +353 404 60140

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Enniskerry Garda Station,
Enniskerry,
Co. Wicklow.

Tel: +353 1 6665750

Greystones Garda Station,
Greystones,
Co. Wicklow.

Tel: +353 1 6665800

Shankill Garda Station,
Dorney Court,
Shankill,
Co. Dublin.

Tel: +353 1 666 5900

Cabinteely Garda Station,
Old Bray Road,
Cabinteely,
Dublin 18

Tel: +353 1 666 5400

Dun Laoghaire Garda Station,
34/35, Corrig Avenue,
Dun Laoghaire,
Co. Dublin.

Tel: +353 1 666 5000

Stepaside Garda Station,
Enniskerry Road,
Stepaside Village,
Stepaside,
Dublin 18.

Tel: +353 1 666 5700