



St. Patrick's College Maynooth

Child Protection Guidelines

25 June 2010

CONTENTS

1. Introduction
2. Definitions
3. General Principles of Good Practice
4. Code of Best Practice in Working with Children
5. Keeping Records
6. Responsibilities of the Child Protection Coordinator
7. Recognition of Child Abuse
8. Encountering Allegations or Suspicions of Child Abuse
9. Initial Response on Receiving an Allegation of Child Abuse
10. Role of the Child Protection Coordinator
11. Allegations of Child Abuse Against a Member of the University
12. Outcome of Investigations
13. Outcome Unclear as to Whether Child Abuse Occurred
14. False and Mistaken Allegations

APPENDICES

- Appendix 1* Relevant Legislation and Key Publications
- Appendix 2* Key Contacts List
- Appendix 3* Information required when a report is
being made to the HSE or Gardaí
- Appendix 4* Signs and Symptoms of Child Abuse

Child Protection Guidelines

1. Introduction

This document offers guidance on the promotion of child welfare and the development of safe practices in work with children. It offers a practical guide to “*Members of the College*” who work with children by outlining the fundamental principles of good practice. It also gives information on how to recognise signs of child abuse and the correct steps to take within the College if it is suspected, witnessed or disclosed.

When an allegation of child abuse arises in relation to a member of the College the College holds a dual responsibility in;

- *Safeguarding children*; This must at all times take priority. The College will ensure that all appropriate procedures are followed in relation to reporting suspected child abuse to the civil authorities and will do all within its power to ensure that no child continues to be exposed to risk of being abused.
- *Dealing with the person accused*; The College must ensure that proper procedures are followed in relation to the person against whom the complaint has been made, in line with fair procedures, natural justice and a presumption of innocence until the contrary is established.

The document has been adapted from the Department of Health & Children’s publications of September 1999 “*Children First – National Guidelines for the Protection and Welfare of Children*” and incorporates those principles, with a view to reflecting a common approach to child protection within the College community. The College will appoint a Child Protection Coordinator to implement and administer these Guidelines.

2. Definitions

The definitions set out below are relevant to the implementation of these guidelines. Most of them are as outlined in “*Children First*”. They are not intended to be a description of a criminal offence.

Member of the College; may be a member of faculty, staff or student of the College and those working on a voluntary/unpaid basis on behalf of the College.

Child; means a person under the age of 18 years, excluding a person who is or has been married.

Child Abuse; can be categorised into four different types; neglect, emotional abuse, physical abuse and sexual abuse.

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

Harm; can be defined as the ill-treatment or the impairment of the health or development of a child. *Significant harm*; is determined by the state of the child's health and development as compared to that which could reasonably be expected of a child of similar age.

Emotional Abuse; is the persistent emotional ill-treatment of a child such as to cause persistent adverse effects on the child's emotional development. It occurs when a child's need for affection, approval, consistency and security needs are not met. It is rarely manifested in terms of physical signs or symptoms.

Emotional abuse is normally to be found in the relationship between the care giver and the child rather than in a specific event or pattern of events.

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 a child;
- Using excessive force in handling;
- Deliberate poisoning;
- Suffocation;
- Munchausen's Syndrome by Proxy;
- Allowing or creating a substantial risk of significant harm to a child.

Sexual Abuse; occurs when a child is used by another person for his or her gratification or sexual arousal or for that of others. Any form of sexual behaviour engaged in by an adult with a child is sexual abuse and includes "indirect abuse" such as photographing, videotaping, and filming for pornographic purposes or subjecting a child to gross obscene or abusive language.

Children with Special Vulnerabilities; These are children who for one reason or another are more vulnerable to abuse than others and may include children with disabilities, those who are separated from parents or other family members and who depend on others for their care and protection. The categories of abuse outlined above are applicable to them but may take slightly different forms, e.g. abuse may take the form of deprivation of basic rights, harsh disciplinary regimes or the inappropriate use of medications or physical restraints.

Peer Abuse; In some instances of abuse the abuser may be another child. In such situations there is important protection issues in relation to both children and the needs of both should be considered separately.

Reasonable Grounds for Concern; The basis for reporting alleged or suspected complaints of child abuse is based on the principle that there are reasonable grounds for concern to support the claim. The following would constitute reasonable grounds for concern;

- Specific indication from a 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 is unlikely to be caused in another way;
- An injury or behaviour which is consistent 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 indications over a period of time that a child is suffering from emotional or physical neglect.

A suspicion which is not supported by an objective indication of abuse or neglect would not constitute reasonable grounds for concern.

Protection from Civil Liability of Persons who have reported Child Abuse; Section 3 of the Protection for Persons Reporting Child Abuse Act 1998 provides that a person shall not be liable in damages in respect of a communication by him or her to the appropriate person of his opinion that;

- a child has been or is being assaulted, ill-treated, neglected or sexually abused, or
- a child's health, development or welfare has been or is being avoidably impaired or neglected,

unless it is proved that he or she has not acted reasonably and in good faith in forming that opinion and communicating it to the appropriate person.

False Reports; Section 5 of the Act also introduced a new offence for anyone who knowingly makes a false report of child abuse to an appropriate person. This new offence is designed to protect innocent persons from malicious reports.

Confidentiality; When someone confides in a “*Member of the College*” information which indicates that child abuse may have occurred, or that the safety of a child is at risk and ask that the matter be treated as totally confidential they should be assured that the matter will be treated with sensitivity, but they cannot give an assurance of complete confidentiality as the HSE will need to be advised so that action may be taken to protect the child from potential harm.

The “*Children First*” publication highlights the following points in regard to confidentiality;

- All information regarding concerns or assessments of child abuse should be shared on a “need to know” basis in the interests of the child;
- No undertakings regarding secrecy can be given. This should be made clear to all parties involved;
- Ethical and statutory codes concerned with confidentiality and data protection provide general guidance. They are not intended to limit or prevent the exchange of information between professional staff that has responsibility for ensuring the protection of children. Giving information to others for the protection of a child is not a breach of confidentiality
- Information which is gathered for one purpose must not be used for another without consulting the person who provided that information.

3. General Principles of Good Practice

Adopting the following principles will help to create an environment in which children are listened to, given a sense of belonging and kept safe while at the same time members of the College are supported and protected;

- All children have a fundamental right to be respected, nurtured, cared for and protected from all forms of sexual exploitation and sexual abuse and from any other kind of exploitation and abuse;

- Parents of children have a right to respect and will be consulted and involved in matters which concern their family;
- All complaints/concerns expressed by children and their families and staff will be taken seriously and investigated immediately;
- All adults have an obligation to report allegations or suspicions of child abuse and neglect, where reasonable grounds for concern exist, irrespective of the status of the person suspected or their relationship to them or the child;
- Due regard will be given to the criminal dimensions on every complaint; It is the duty of the statutory authorities, not individuals or organisations, to investigate reports of child abuse;
- A proper balance will be maintained between protecting children and respecting the needs and rights of staff; but, where there is a conflict, the welfare of the child will have primacy;
- The College will operate effective and safe systems to assure the protection of children and will also apply defined methods of recruiting, selecting, training and clarifying the responsibilities of person working with children;
- The College will work cooperatively with all agencies and disciplines concerned with the protection and welfare of children;

4. Code of Best Practice in Working with Children

Adults interacting with children are in a position of trust and influence. They are responsible for setting and monitoring the boundaries between a working relationship and friendship with children. In doing so they should recognise the imbalance in power inherent in adult-child relationships. They should always ensure that children are treated with integrity and respect and that the self-esteem of the child is enhanced. They should always strive to enhance the child's involvement and enjoyment of the activity undertaken while ensuring their welfare and safety.

This Code of Best Practice is a general guide and may need to be adapted for particular situations; however, the general principles will be adhered to. The Code can help to protect personnel in their various roles by providing a framework for the promotion of good practice. It will also reassure parents/guardians and the children themselves that there is a commitment to best practice.

Guidelines on General Behaviour

- *Equality*; All children must be treated with equal respect, favouritism is not acceptable;
- The *physical integrity*; of children must be respected at all times. Never engage in inappropriate physical contact such as touching of groin, genital areas, buttocks, breasts or any other part of the body that might cause a child distress or embarrassment – including tough physical play, physical reprimand, and horse-play. This should not prevent appropriate contact in situations where it is

necessary to ensure the well-being and safety of a child e.g. when a child is distressed or in need of first aid treatment;

- *The right to privacy*; of children must be respected at all times. Particular care regarding privacy must be taken when they are in locations such as changing areas, swimming pools, showers and toilets. Photographs of children must never be taken when they are in changing areas. Tasks of a personal nature (washing, toileting or changing clothes) should never be done for children. Don't do something that a child can do themselves;
- *Corporal punishment*; or the use of physical force of any form on a child is not permissible under any circumstances;
- *Verbal abuse*; of children, telling jokes of a sexual nature in the presence of children, or making any sexually suggestive comments about, or to, a child is not acceptable; Great care must be taken if it is necessary to have a conversation regarding sexual matters with a child;
- *Bullying*; behaviour – verbal, psychological or physical should not be engaged in or tolerated by personnel;
- *Lone working*; Children will not be allowed to work or remain in buildings unless there are at least two adults present;
- *Alcohol, tobacco or drugs*; must not be used by personnel who are supervising or working with children. Under no circumstances should personnel give alcohol, tobacco or drugs to a child;
- *Computer and computing facilities*; may be authorised for certain visitors to campus. Usernames and passwords are assigned. Where children are given access to computers on campus they must comply with the College's Code of Conduct for Computing Facilities. Computers used by children will be monitored regularly to ensure that they are being used in accordance with the stated policy;
- *Special needs children*; or those with a disability may depend on adults more than other children for their care and safety, so the tasks must be undertaken with the utmost discretion and sensitivity. Where it is necessary to carry out tasks of a personal nature for a child with special needs, this should be done with the full understanding and consent of the parent/guardian. In an emergency situation where this type of help is required, parents should be informed as soon as is reasonably possible;
- *Vulnerable children*; may depend on adults more than other children for their care and safety. It is important that they are carefully listened to, in recognition of the fact that they may have difficulty in expressing their concerns and in order that the importance of what they say is not underestimated. They are more likely than other children to be bullied or subjected to other forms of abuse and may be less clear about physical and emotional boundaries;
- *Challenging or disruptive behaviour*; of a child should be dealt with by more than one person. A record will be made describing what happened, the circumstances giving rise to the incident, who was involved, whether any injury

was sustained or property damaged and how the situation was resolved. Consideration will be given to the involvement of the parents;

- *A Code of Behaviour for Children*; should be developed using age-appropriate language as it is essential that children can understand what is and what is not acceptable with regard to their behaviour and that of others. This Code of Behaviour should be given to all children participating in activities, and to their parents/guardians. Personnel will also be conversant with it and its application;
- *Record Keeping*; the organisers of activities should ensure that signed consent from parents, guardians is obtained in advance of the event. Parents, guardians should be asked to provide details of emergency contact numbers and also indicate if their children have any dietary, medical or special needs.
- An accurate record of all relevant personal details will be kept for each child participating in activities. A written record will be kept of attendance, organisers, and supervisors in attendance at events. An Incident Report Form will be completed in the event of an accident or incident relating to a child;
- *A Complaints Procedure*; should be developed by organisations for use by children and their parents/guardians who are dissatisfied with any aspect of the activities or services provided. Interested parties should be given a copy of the Complaints Procedure and should be made aware of the processes for making a complaint. Personnel will also be briefed on the procedure and children should be encouraged to report incidents of concern to either a designated person or worker of their choice;
- *General Supervision*; Good practice dictates that organisers should try to ensure that more than one adult is present with a child and that there should be at least one of each gender with mixed groups. This will help to ensure the safety of the children as well as protect adults. Ensure adequate Adult : Child ratios. This will depend on the nature of the activity, the age of the participants and any special needs of the group, a general guide might be 1:8 for less than 12 years of age and 1:10 for 12 years and over;

Where possible and for their own safety personnel should avoid being alone with a child. If a situation arises where it is necessary to be alone with a child such a meeting should not be held in an isolated environment but should allow for transparency by being held in a room with a glass panel or with the door open and where other people are present. Another responsible adult should be informed, if necessary by phone, and a diary note made that the meeting took place with the child and the reasons for it should be recorded;

Personnel should avoid spending disproportionate amounts of time with any particular child, groups of children, with children away from others or take children to their home.

Personnel should engage in best practice in relation to travel with children. They should not undertake any car journey alone with a child. If, in certain circumstances, only one adult is available, there should be a minimum of two children present for the entire journey. In the event of an emergency where it is necessary to make a journey alone with a child, a record of this should be made and the child's parents/guardian informed at the earliest opportunity;

- *Departmental supervision and review* arrangements will be put in place by managers in charge of departments involving children to assess workers competence in performing their tasks and should be alert to any unusual incidents or activities that take place where workers may be putting themselves in vulnerable positions.

5. Record Keeping

Where child abuse is alleged or suspected, it is vital that the person who receives the allegation, or who suspects abuse, records in writing, as accurately as possible, what has been revealed. The written record should include all relevant details of abuse disclosed, including, names, dates, times, locations of abuse. The person making the notes should also record the context and circumstances leading to the disclosure of abuse along with details of the times and dates the contemporaneous notes were made.

The Coordinator shall keep all records related to his/her office in a locked filing cabinet and is responsible for maintaining the confidentiality of all matters pertinent to the Office. The Coordinator will keep a written record of complaints received, decisions taken, assessments or evaluations made and an explanation for its basis, details of their outcome and the outcome of all meetings, consultations, contacts with all parties involved with the Office.

All records should be factual, accurate and legible and should be dated and signed after each entry.

6. Responsibilities of Child Protection Coordinators

The College will appoint a Child Protection Coordinator, (The Coordinator). This person will act as a resource to all “*Members of the College*” who has child protection concerns and will be responsible for reporting allegations or suspicions of child abuse to the HSE or Gardaí. The designated persons must be accessible to everyone in the organisation and will have a clear job description setting out responsibilities to victims, members of the university, the organisation and the statutory authorities. S/he will fulfil the following functions;

- Oversee the implementation of the policies and procedures contained in this document;
- Be familiar with relevant legislation including Statutes and Rules of the College *Appendix 1*;
- Liaise regularly with relevant external agencies responsible for child protection with a view to ensuring awareness of developments in legislation, policy and practice;
- Consult with associated organisations on campus who provide services to children to ensure that they adopt appropriate guidelines safeguarding the best interests of children;
- Establish a code of behaviour between members of the College and children, to avoid the possibility of misunderstandings or the potential for allegations or misconduct;

- Promote awareness of these guidelines and ensure that “*Members of the College*” have ready access to the contact details of the Coordinator;
- Ensure that new employees and students are made aware of these guidelines and other policies relevant to dignity and respect during staff induction training and student orientation week;
- Establish reporting procedures to and from the Coordinator and ensure that they are made known to all;
- Receive and process reports of allegations and suspicions of child abuse without delay and decide on appropriate action, taking into account the immediate danger to children and the requirements of the Gardaí to secure material evidence;
- Inform the HSE and Gardaí of all incidents where reasonable grounds for concern exist that a child may have been abused, or is being abused, or is at risk of abuse to ensure that they are involved with appropriate speed;
- Liaise with the President, Director of Human Resources and Registrar of the College, as appropriate, regarding specific cases;
- Provide professional expertise and support in regard to decision making in individual cases. Additional professional resources may be called on as the need arises;
- Ensure that appropriate steps are taken in relation to an accused person while enquiries are underway;
- Review and evaluate these guidelines annually to determine their operational effectiveness and to ensure that contact details are up to date.

7. Recognition of Child Abuse

Everyone must be alert to the possibility that children with whom they are in contact may be victims of abuse. Child abuse can often be difficult to identify as it may present in many forms. 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 new behavioural problems.

Some signs are more indicative of abuse than others. These include;

- Direct observation;
- Disclosure of abuse and neglect by a child or third party;
- Age-inappropriate language, abnormal sexual play or knowledge;
- Specific injuries or patterns of injuries;
- Absconding from home or care situations;
- Self harm;
- Suicide/attempted suicide;
- Underage pregnancy or sexually transmitted disease;
- Non-verbal communication, unusual or fearful responses to certain persons;

- Signs of one or more categories at the same time, e.g. signs of developmental delay, physical injury and behavioural signs may together indicate a pattern of abuse.

A comprehensive list of child abuse indicators is contained at *Appendix 4*.

It is important to be always open to alternative explanations for physical or behavioural signs of abuse and if in doubt seek advice to clarify if particular concerns are reasonably founded. Early detection is important and immediate reporting will ensure that abuse does not continue, therefore, all concerns however unclear or inconclusive must be reported to The Coordinator.

8. Encountering Allegations or Suspicions of Child Abuse

It is imperative that those who have knowledge or suspicions that child abuse may have occurred should act promptly and sensitively in reporting it to The Coordinator. The primary consideration must be the protection and welfare of children.

If a person has misgivings about formally reporting concerns about the safety of a child they may find it helpful to discuss them with the Coordinator who will provide advice and guidance.

Child abuse may come to light in a number of different ways. It may be witnessed, alleged or suspected and may include the following circumstances;

- Direct observation of behaviour that is abusive or arouses suspicion of abuse;
- It may be direct, specific and supported by corroborative evidence such as when a person, either adult or child, alleges that they have been abused, reveal injuries and name the alleged perpetrator;
- A person may allege that they have been abused but are unable or unwilling to disclose the name of the perpetrator;
- A person may allege that they have been abused but the perpetrator has died;
- A person may reveal that another person has told them of being abused, or where they themselves have witnessed the abuse.

9. Initial Response on Receiving an Allegation of Child Abuse

Where a child discloses details of child abuse it is important that it is handled sensitively and with understanding. Under no circumstances should any individual or department itself attempt to deal with the problem of child abuse alone. It is important that everyone in the organisation is aware they are not responsible for determining if child abuse has occurred, that is the role of the HSE and/or Gardaí. The following general guidelines should be followed;

- The person receiving a complaint of child abuse should be mindful that a child is under emotional stress and that s/he has been chosen because of the trust placed on them. Great care should be taken not to damage this trust by offering reassurance and support that they have done the right thing. It is important the person remain calm, show no extreme reaction and *listen* to the child to facilitate them in telling their problem;
- The basis of a complaint must be established as comprehensively as possible to establish “*reasonable grounds for concern*”, however; the child or its parents should

not be interviewed in detail. Leading or suggestive questions should not be put to the child; this does not prevent clarifying ambiguities or misunderstandings about what was said;

- It should be made clear that the person receiving the information is not in a position to promise to keep it a secret. However, reassurance can be given that it will be treated as confidential and will be shared only with those who have a right to hear it;
- The person receiving the allegation should not be judgemental against the person about whom the allegation is being made;
- The follow up process likely to follow should be explained to the person making the complaint;
- Make a written record of what has been disclosed or observed. See item 5 Record Keeping;
- The Coordinator should be notified without delay of the allegations and his/her advice and guidance sought on how to proceed, particularly in relation to the following matters;
- In the case of a child, the parents/guardians should be informed, unless to do so would place the child at further risk;
- Where an incident is witnessed or reported shortly after the occurrence and there is a likelihood of material/forensic evidence being available the Gardaí should be advised with appropriate speed;
- If the circumstances presented indicate that a child is at immediate risk they should under no circumstance be left in a dangerous situation pending HSE intervention.

In the case of an adult disclosing child abuse it is equally important that the initial response is treated with compassion and sensitivity, applying the above guidelines. In such circumstances the person making the report should be encouraged to report them to the HSE/Gardaí and appropriate arrangement should be made to support them in doing so, if that is what they wish. Whether or not the adult making the allegation wishes to report it to the civil authorities, it should be explained to them that The Coordinator will be advised of the allegations.

If the Coordinator is not on campus when concerns are raised the Head of Security will arrange for providing contact details;

10. The Role of the Child Protection Coordinator

On receipt of an allegation of child abuse The Coordinator shall at the earliest opportunity within 24 hours convene appropriate resources and;

- Appoint a secretariat to ensure that all material issues are documented and followed through to a conclusion;
- Assess complaints, including retrospective disclosures, to determine if “*reasonable grounds for concern*” exist that child abuse may have occurred or is suspected;

- Seek greater clarification and information when not satisfied that the information available constitutes “*reasonable grounds for concern*”;
- Consult without delay the HSE/Gardaí where there is a doubt or uncertainty as to the weight of the available evidence constituting “*reasonable grounds for concern*” but concerns remain on the appropriate steps to be taken;
- If it is decided, following consultation, that there are no grounds for the Coordinator to formally report the matter to the HSE, give the person who referred the matter a written explanation outlining the reasons why no further action is being taken, indicating that if they remain concerned about the situation, they are free to consult with, or report to the HSE/Gardaí;
- Where “*reasonable grounds for concern*” are established that child abuse occurred or is suspected details at *Appendix 3* will immediately be reported to the South Eastern HSE and copy sent to the Gardaí. In cases of emergency, where a child appears to be at immediate risk, and a Duty Social Worker from the HSE is unavailable the Gardaí should be contacted. ***Under no circumstances should a child be left in a dangerous situation pending HSE intervention;***
- Ensure the early involvement of the Gardaí where there may be opportunity to secure material or forensic evidence and where such evidence is available on campus preserve it pending the involvement of the Gardaí;
- Ensure that the parents/guardians of the child are informed by the most appropriate person, giving due regard to the implications of this action placing a child at further risk;
- Ensure that a “*member of the College*” is advised that an allegation of child abuse is made against him/her in the course of their duties. Prior to doing so liaise with the HSE/Gardaí to determine the timing of advising the person against whom a complaint is made. Where they ask for a delay in informing the accused person such a request should be recorded;
- Determine what feedback is to be given to the various parties i.e. the child, the parent’s/guardians of the child, the person who reported concerns of abuse and the person against whom the complaint is made;
- Ensure that responsibility for dealing with the reporting issues surrounding the child and the employment contractual issues surrounding a “*member of the College*” are managed independently. Liaison persons will be appointed, one to deal with the child, its parents/guardian and another to deal with the person against whom the allegation is made;
- Determine how best to provide access to appropriate support for all parties concerned;
- Ensure that the investigation of complaints against members of staff and students are carried out in-keeping with the principles of fair procedures and natural justice. “*Members of the College*” may be subject to erroneous or malicious allegations, therefore, an investigation must be dealt with sensitively and with a presumption of innocence until the contrary is proved;

- Inform the Director of Human Resources in the case of a member of staff or the Registrar in the case of a student and keep them updated of developments;
- Inform the President of the College of the complaint and what action is proposed;
- Carry out a risk assessment to determine and assess the wider implications which may have contributed to the situation and, where appropriate, make recommendations to prevent further happenings to the President of the College.

11. Allegations of Child Abuse against a “Member of the College”

Allegation of child abuse made against a “Member of the College” will be dealt with as follows;

- When the Coordinator becomes aware of an allegation of child abuse against a “Member of the College” during the course of their duties that person will be informed at the appropriate time of the fact that an allegation has been made against him/her and the nature of it. The person against whom the allegation is made should be given an opportunity to respond. Their response should be noted and, where possible, included in the formal report to the HSE;
- Where the allegation is against a member of staff the Director of Human Resources will carry out or cause to be carried out an independent investigation in keeping with the principles set out in the Statutes of the College;
- Where the allegation is against a student of the College the Registrar will carry out or cause to be carried out an independent investigation in keeping with the principles set out in the SPCM Kalendarium under General Rules of the College;
- Where it is determined that child abuse did occur, the policies and procedures in place for protecting against future risk will be applied.

12. Outcomes of Investigations

Complaints of child abuse will give rise to investigation by the HSE and the Gardaí to determine if a child has been abused.

The findings of the HSE investigation can be;

- *Confirmed*; - child abuse occurred;
- *Inconclusive*; - unable to determine whether or not child abuse occurred;
- *Confirmed non-abuse*; child abuse did not occur.

Following a Garda investigation the Director of Public Prosecutions may decide;

- To proceed with a criminal prosecution before the Courts or
- Not to prosecute. Such a decision may indicate that the evidence would not meet the standard of proof required by a Criminal Court, but it does not necessarily imply innocence.

The outcomes of a criminal prosecution may be;

- A conviction where the accused person is found guilty and a sentence is imposed;
- An acquittal of the accused person;
- A miss-trial, with no determination of the charges;
- A nolle prosequie, where the Director of Public Prosecutions withdraws the charges before the Court, with no determination of the charges.

13. Outcome Unclear as to Whether Child Abuse Occurred

If the outcome of an investigation by the HSE and/or the Gardaí is unclear as to whether child abuse did occur, The Coordinator will convene an appropriate professional team to assess the situation having due regard for the safety and protection of children and shall inform the President of their assessment.

14. False and Mistaken Allegations

Few allegations of child abuse are found to be false; however, those that are unfounded cause profound distress to those who are wrongly accused. It is important that when an allegation is found to be false or mistaken that all appropriate steps are taken to restore the good name of the person wrongly accused. The Coordinator shall decide on how they are to be supported and facilitated in resuming their functions.

When The Coordinator is satisfied immediately that it would have been impossible for the person complained of to have committed the offence, for instance, it can be clearly established that they were elsewhere at the time of the alleged complaint s/he will;

- Advise the complainant in writing of the action being taken and its outcome, including information on other avenues to pursue the matter if they remain dissatisfied;
- Advise the person against whom the complaint has been made, providing details and confirming that it is without substance and that no further action is being taken;
- Consider if the complainant has been abused by someone else and report the matter to the HSE/Gardaí;
- Keep a comprehensive record of the incident, including the reason for no further action;
- Consider initiating a complaint of knowingly making a false report of child abuse under the provisions of Section 5 of the Protection of Persons Reporting Child Abuse Act 1998.

Appendix “1”

Relevant Legislation and Key Publications

- Safety Health and Welfare at Work Act 2005;
- Child Care Act 1991;
- Protection of Persons Reporting Child Abuse Act 1998;
- Non Fatal Offences Against the Person Act 1997;
- Freedom of Information Act, 1997;
- Data Protection Act, 1998;
- Statutes of the Pontifical University, St. Patrick’s College and National University of Ireland Maynooth;
- General Rules of the University - NUI Maynooth Calendar 2008-2009;
- Code of Conduct for Users of Computing Facilities – NUI Maynooth Calendar 2008-2009;
- Children *first*; National Guidelines for the Protection and Welfare of Children (1999) Department of Health and Children;
- Our Children, Our Church – Child Protection Policies and Procedures for the Catholic Church in Ireland;
- Our Duty to Care; The Principles of Good Practice for the Protection of Children & Young People (2004) Department of Health and Children;
- Child Protection Guidelines for Post Primary Schools (2001) Department of Education and Science;
- Safety Statement of St. Patrick’s College Maynooth.

Appendix “2”

Key Contacts List

Title	Phone	Mobile/Fax No.
Coordinator: Vice-President, Reverend Michael Mullaney	01 7083988	01 7083959
Deputy Coordinator: Reverend Dean of the Faculty	01 7083600	01 7083441
Acting Director of Human Resources Mary Kelly, Human Resources, National University of Ireland Maynooth	01 7083800	01 7083940
Registrar: Vice-President Reverend Michael Mullaney	01 7083988	01 7083959
Bursar: Ms Fidelma Madden	01 7084750	01 7084748
Security Department	01 7083929	
Mr John Hayes, Head of Security	01 7083589	086 8130639
Mr Brendan Ashe , Health and Safety Officer	01-7084720	087 2995611
South Western Area HSE Oak House, Limetree Avenue, Millennium Park, Naas, Co Kildare.	045-880400 (24/7 response)	Fax 1890 200841
Garda Station Maynooth	01 6291413	Fax 01-6291416
Garda Station, Lexlip	01 666 7800. (24/7 response)	01 666 7840

Appendix “3”

Information required when a Report is being made to the HSE

The ability of the HSE and/or the Gardaí to assess suspicions or allegations of child abuse will depend on the amount and quality of information conveyed to them by persons reporting their concerns. As much as possible of the following detail should be given in the report or by telephone.

1. Accurate identifying information as far as it is known. This should include the names, addresses and ages of the child and all children in the family as well as the parents/carers names and addresses;
2. Name and address of the person alleged to be causing harm to the child;
3. A full account of what constitutes the grounds for concern about the welfare and protection of the child or children;
4. Source of any information which is being discussed with the HSE;
5. Dates when the concern arose, or a particular incident occurred;
6. Circumstances in which the concern arose, or the incident occurred;
7. Any explanation offered to account for the risk, injury or concern;
8. The child’s own statement if relevant;
9. Any other information regarding difficulties which the family may be experiencing. These may include illness, recent bereavement or separation, financial situation, addiction, disability, mental health problems;
10. Any factor which may be considered supportive or protective of the family. These may include helpful family members, neighbours, useful services or projects with whom they have contact;
11. Name of child or children’s school;
12. Name of child and or family’s practitioner;
13. The reporter’s own involvement with the child and parents or carers;
14. Details of any action already taken about the risk or concern;
15. Names and addresses of any agencies or key persons involved with parents/carers;
16. Identity of reporters including names, address, telephone number, occupation, and relationship with the family.

Appendix “4”

Signs and Symptoms of Child Abuse

Taken from Children first; National Guidelines for the Protection and Welfare of Children 1999.

1 Signs and Symptoms of Child Neglect

This category of abuse is the most common. A distinction can be made between “wilful” neglect and “circumstantial” neglect. For instance “wilful” neglect would generally incorporate a direct and deliberate deprivation by a parent/carer of the child’s most basic needs e.g. withdrawal of food, shelter, warmth, clothing, contact with others, whereas “circumstantial” neglect more often may be due to stress/inability to cope by parents or carers. Neglect is closely correlated with low socio-economic factors and corresponding physical deprivations. It is also related to parental incapacity due to learning disability or psychological disturbance.

The neglect of children is “usually a passive form of abuse involving omission rather than acts of commission”. It comprises “both a lack of physical caretaking and supervision and a failure to fulfil the developmental needs of the child, in terms of cognitive stimulation”.

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.

2. Signs and Symptoms of Emotional Child Abuse

Emotional abuse occurs when adults responsible for taking care of children are unable to be aware of and meet their children’s emotional and developmental needs. Emotional abuse is not easy to recognise because its effects are not easily observable. “Emotional abuse refers to the habitual verbal harassment of a child by disparagement, criticism, threat and ridicule and the inversion of love; whereby verbal and non-verbal means of rejection and withdrawal are substituted”.

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

- 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 conflict or violence;
- Every child who is abused sexually, physically or neglected is also emotionally abused.

3 Signs and Symptoms of Physical Abuse

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

- Bruises;
- Fractures;
- Swollen joints;
- Burns/scalds;
- Abrasions/lacerations;
- Haemorrhages (retinal, subdural)
- Damage to body organs;
- Poisonings – repeated (prescribed drugs, alcohol);
- Failure to thrive;
- Coma/Unconsciousness;
- Death.

There are many different forms of physical abuse but skin, mouth and bone injuries are the most common.

4. Signs and Symptoms of Child Sexual Abuse

Child sexual abuse often covers a wide spectrum of abusive activities. It rarely just involves just a single incident and usually occurs over a number of years. Child sexual abuse frequently happens within the family.

Cases of sexual abuse principally come to light through;

- Disclosure by the child or its siblings/friends;
- The suspicions of an adult; and,
- Due to physical symptoms.

Descriptions of the wide spectrum of activities by adults which can constitute child sexual abuse include;

Non Contact Sexual Abuse

- “Offensive sexual remarks” including statements the offender makes to the child regarding the child’s sexual attributes, what he or she would like to do to the child and other sexual comments;
- Obscene phone calls;
- Independent “exposure” involving the offender showing the victim his/her private parts and/or masturbating in front of the victim;
- “Voyeurism” involving instances when the offender observes the victim in a state of undress or in activities that provide the offender with sexual gratification. These may include activities that others do not regard as even remotely sexually stimulating.

Sexual Contact

- Involving any touching of the intimate body parts.

Penetrative Sexual Abuse

- Any penetrative act or attempt to penetrate.

Sexual Exploitation

- Involves situations of sexual victimisation where the person who is responsible for the exploitation may not have direct sexual contact with the child. Two types of this abuse are child pornography and child prostitution;
- “Child pornography” includes still photography, videos and movies and, more recently computer generated pornography;
- “Child Prostitution” for the most part involves children of latency age or in adolescence. However, children as young as four and five are known to be abused in this way;
- Sexual abuse in combination with other abusers.

It is important to note that physical signs may not be evident in cases of sexual abuse due to the nature of the abuse and or the fact that the disclosure was made some time after the abuse took place.

“*Members of the College*” should be alert to the following physical and behavioural signs;

- 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 games/swimming.