

PACT CHILD PROTECTION POLICY

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1. Pact Child Protection Policy Statement

Pact aims to deliver the highest standard of service to its service users. Our agency offers several adoption related services which are unequivocally child centered. Through policy development, staff recruitment and vetting procedures, we always work to promote the welfare of children and young people as of first and paramount importance. This policy aims to protect all service users and staff of Pact. For the purposes of this policy, 'staff' includes paid staff, foster carers, students and volunteers of Pact.

This policy is drawn up in line with Children First: National Guidance for the Protection and Welfare of children, 2011, and reflects the principles of best practice as outlined in Children First (1.1 including that the welfare of the child is of paramount importance. Under the Guidelines "child" means a person under the age of 18 years, excluding a person who is or has been married (2.1.2).) *(For other relevant legislation please see Appendix One)*

All Pact staff are required to report to the designated liaison person, or in their absence the deputy designated liaison person, any concerns about child abuse or neglect according to Pact procedures. *(See also Mandatory Reporting....)*

Pact is committed to ensuring the welfare of all children is safe guarded by protecting them from Neglect, Physical, Sexual and Emotional harm. We do this by having procedures which address the following:

- Definition and Recognition of Abuse
- Pact Code of Behaviour
- Pact Safe Organisational Practice and Code of Practice
- Mandatory Reporting.
- Pact Procedures for Recording and Reporting Abuse
- Information required when a Report is being made to the relevant statutory authorities, i.e. the Child and Family Agency (Tusla) and Gardaí
- Confidentiality statement
- Record Keeping and Data Protection
- Dealing with complaints and allegations against staff
- Pact Recruitment and Vetting Procedures
- Pact Procedures in relation to Child Protection Training, Support and Supervision of Staff
- Complaints Procedures.

1.1 Who Must Observe this Policy

- Pact Executive Committee

- Managers
- All Staff
- Ad Hoc social workers.
- Volunteers
- Students
- Members of a training panel
- Members of groups/committees established to implement Pact objectives.

There are no exclusions or exceptions from this policy.

As part of the implementation of this policy, all staff are required to read and sign off on acceptance of this policy. All staff must be willing to undertake training regarding same as requested by their line manager.

The Pact Child Protection policy, and the procedures and practice outlined therein, will be reviewed on an annual basis.

2. Definition and Recognition of Abuse

For the purpose of this policy, there are four categories of child abuse:

- Neglect
- Emotional abuse
- Physical Abuse
- Sexual Abuse.

A child may be subjected to more than one form of abuse at any given time. The definitions of abuse used in this policy are based on definitions arising from The Children First National Guidance for the Protection and Welfare of Children (2011). For further information please refer to the Child Protection and Welfare Handbook 2011. Throughout the rest of this policy the term child abuse is inclusive of these four categories.

2.1 Neglect (Children First Section 2.2 page 8)

Neglect can be defined in terms of *omission*, where the 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/or medical care.

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

Neglect generally becomes apparent in different ways *over a period of time* rather than at one specific point.

For examples of signs and symptoms of neglect which staff need to be aware of, please refer to *Appendix Two*.

2.2 Emotional Abuse (Children First Section 2.3 page 8)

Emotional abuse is normally to be found in the *relationship* between a parent/carer and a child rather than in a specific event or pattern of events. It occurs when a child's developmental need for affection, approval, consistency and security are not met. Unless other forms of abuse are present, it is rarely manifested in terms of physical signs or symptoms. Examples may include:

- (i) The imposition of negative attributes on a child, expressed by persistent criticism, sarcasm, hostility or blaming.
- (ii) Conditional parenting in which the level of care shown to a child is made contingent on his or her behaviours or actions.
- (iii) Emotional unavailability of the child's parent/carer.
- (iv) The unresponsiveness of the parent/carer and/or inconsistent or inappropriate expectations of the child.
- (v) Premature imposition of responsibility on the child;
- (vi) The unrealistic or inappropriate expectations of the child's capacity to understand something or to behave and control himself or herself in a certain way;
- (vii) Under or over-protection of the child;
- (viii) Failure to show interest in, or provide age-appropriate opportunities for, the child's cognitive and emotional development;
- (ix) Use of unreasonable or over-harsh disciplinary measures;
- (x) Exposure to domestic violence;
- (xi) Exposure to inappropriate or abusive material through new technology.

2.2.1 Emotional abuse can be manifested in terms of the child's behavioural, cognitive, affective or physical functioning. Examples of these include insecure attachment, unhappiness, low self-esteem, educational and developmental underachievement, and oppositional behaviour. The *threshold of significant harm* is reached when abusive interactions dominate and become *typical* of the relationship between the child and the parent/carer.

For examples of signs and symptoms of emotional abuse, please refer to *Appendix Two*.

2.3 Physical abuse (Children First Section 2.4 page 9)

Physical abuse of a child is that which results in actual or potential physical harm from an interaction, or lack of interaction, which is reasonably within the control of a parent or person in a position of responsibility, power or trust. There may be single or repeated incidents.

Physical abuse can involve:

- (i) Severe physical punishment;
- (ii) Beating, slapping, hitting or kicking;
- (iii) Pushing, shaking or throwing;
- (iv) Pinching, biting, choking or hair-pulling;
- (v) Terrorising with threats;
- (vi) Observing violence;
- (vii) Use of excessive force in handling;
- (viii) Deliberate poisoning;
- (ix) Suffocation;
- (x) Fabricated/induced illness;
- (xi) Allowing or creating a substantial risk of significant harm to a child.

For examples of signs and symptoms of physical abuse, please refer to *Appendix Two*.

2.4 Sexual abuse (Children First Section 2.5 page 9)

Sexual abuse occurs when a child is used by another person for his or her gratification or sexual arousal,

or for that of others. Examples of child sexual abuse include:

- (i) Exposure of the sexual organs or any sexual act intentionally performed in the presence of the child;
- (ii) Intentional touching or molesting of the body of a child whether by a person or object for the purpose of sexual arousal or gratification;
- (iii) Masturbation in the presence of the child or the involvement of the child in an act of masturbation;
- (iv) Sexual intercourse with the child, whether oral, vaginal or anal;
- (v) Sexual exploitation of a child, which includes inciting, encouraging, propositioning, requiring or permitting a child to solicit for, or to engage in, prostitution or other sexual acts. Sexual exploitation also occurs when a child is involved in the exhibition, modeling or posing for the purpose of sexual arousal, gratification or sexual act, including its recording (on film, video tape or other media) or the manipulation, for those purposes, of the image by computer or other means. It may also include showing sexually explicit material to children, which is often a feature of the 'grooming' process by perpetrators of abuse;
- (vi) Consensual sexual activity involving an adult and an underage person. In relation to child sexual abuse, it should be noted that, for the purposes of the criminal law, the age of consent to sexual intercourse is 17 years for both boys and girls. An Garda Síochána will deal with the criminal aspects of the case under the relevant legislation.

Although it is not obligatory for a mandated person to make a report to Tusla where it is known or believed that a child aged between 17 – 17 years is engaged in sexual activity with a person who is not more than 2 years older and there is no material difference in maturity or capacity, there is no intimidation or exploitation and the child concerned does not want a report made to Tusla, it is an offence under the Criminal Offence (Withholding of Information Act) 2012 to withhold information from An Garda Síochána about certain offences including sexual offences. The reporting obligations under the 2012 Act are in addition to the obligations under the Children First Act 2015.

It should be noted that the definition of child sexual abuse presented in this section *Sexual abuse* occurs when a child is used by another person for his or her gratification or sexual arousal, or for that of others.

For examples of signs and symptoms of sexual abuse, please refer to *Appendix Two*.

3. The Designated Liaison Person (DLP)

The Designated Liaison Person is the Principal Social Worker.

The Designated Liaison Person is responsible for coordinating action within Pact and responsible for liaising and working with the Child and Family Agency, (Tusla), An Garda Síochána and other agencies about suspected or actual cases of child abuse when necessary.

Pact's Designated Liaison Person is a source of advice on all child protection matters arising.

The Designated Liaison Person's role is to:

- Ensure adherence to this child protection policy, the practice guidelines and practice standards within their area of responsibility.
- Act as a liaison with statutory services in matters relating to child protection.
- Act as a resource person to staff, providing support and guidance in matters of child protection.

- If she/he is unsure whether reasonable grounds exist or not s/he should informally consult with the local duty social worker. She/he will be advised whether the matter requires a formal report or not.
- Take the lead role in ensuring the reporting and follow up of referrals to Tusla/Gardaí and ensuring that Pact procedures are followed systematically and thoroughly.
- To ensure that staff receive ongoing practice discussion in relation to child protection practice.
- Ensure proper records are kept on any interventions/decisions made during the process seek appropriate line management support and supervision during the process.

The Designated Liaison Person has a responsibility to ensure all reports regarding child protection and welfare must initially be discussed with them before being referred.

4. Pact Procedures for Recording and Reporting Abuse

4.1 Dealing with Concerns and Disclosures

Child protection and welfare concerns could present to staff in several ways. They may receive a direct disclosure from an adult or child, or they could become aware of a situation that gives rise to a concern about a child's welfare. It is important that a person who discloses feels supported and facilitated in what may be a frightening and traumatic experience. Staff must recognise that such situations could evoke an array of emotional responses including anger, fear and guilt. It is important that the staff member responds in a sensitive manner. In responding it is essential that staff remain calm; listen to and reassure the person; and record and report the details relayed appropriately and without delay. It is important that staff do not panic; do not promise to keep secrets; do not ask leading questions; do not start to investigate the report or, especially, in situations of direct disclosure, make the child or adult repeat their story unnecessarily. It is essential that the staff member does not delay in speaking to the designated liaison person immediately and making the report. If the designated liaison person or the designated deputy liaison person is not available/contactable, the staff member should link in with his/her respective line manager who may contact Tusla Duty Social Worker for guidance if necessary. Staff should recognise that dealing with child protection can be personally distressing. It is important to know one's own limitations and be able to source support, supervision or assistance as necessary. When considering the Signs and Symptoms, remember that no one indicator is conclusive; there are usually a range of factors and it is important for staff to consider what knowledge they have of the particular family and child's home situation.

The importance of detailing a written record of concerns cannot be over-emphasised. Staff should consider:

- The Behaviour - Who, what, when, where and how
- The Injuries - Describe and/or sketch
- All Comments - By child or adult – verbatim
- Record - Notes made at time should be held.

Under national guidelines Pact, as a non-statutory agency, is responsible for the recognition and reporting of abuse. However, it is not the agency's role to carry out an investigation or assessment of the abuse which is the responsibility of Tusla and An Garda Síochána. It is vital that all staff are aware of

their role and responsibility in this process. Staff must ensure that their interventions with service users do not interfere in Tusla/Gardaí's investigation of cases of child abuse. Staff are advised to refer to guidance given above in relation to responding to disclosures of abuse. Dealing with disclosures will form part of their training in child protection and welfare and staff can consult with their line manager re same.

As outlined in Children First (2011; Section 2.7. page 10), the following are guidelines for recognition of abuse:

The ability to recognise child abuse can depend as much on a person's willingness to accept the possibility of its existence as it does on their knowledge and information. There are commonly three stages in the identification of child neglect or abuse:

- (i) Considering the possibility;
- (ii) Looking out for signs of neglect or abuse;
- (iii) Recording of information.

Stage 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 or older children. A pattern of ongoing neglect should also be considered even when there are short periods of improvement.

Stage 2: Looking out for signs of neglect or abuse

Signs of neglect or abuse can be physical, behavioural or developmental. They can exist in the relationships between children and parents/carers or between children and other family members/other persons. A cluster or pattern of signs is more likely to be indicative of neglect or abuse. Children who are being abused may hint that they are being harmed and sometimes make direct disclosures. Disclosures should always be taken very seriously and should be acted upon, for example, by informing the services of Tusla, Children and Family Agency. The child should not be interviewed in detail about the alleged abuse without first consulting with Tusla's, Children and Family Agency Services. This may be more appropriately carried out by a social worker or An Garda Síochána. Less obvious signs could be gently explored with the child, *without direct questioning*. Play situations, such as drawing or storytelling, may reveal information.

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

- (i) Disclosure of abuse by a child or young person;
- (ii) Age-inappropriate or abnormal sexual play or knowledge;
- (iii) Specific injuries or patterns of injuries;
- (iv) Absconding from home or a care situation;
- (v) Attempted suicide;
- (vi) Underage pregnancy or sexually transmitted disease;
- (vii) Signs in one or more categories at the same time. For example, signs of developmental delay, physical injury and behavioural signs may together indicate a pattern of abuse.

Many signs of abuse are non-specific and must be considered in the child's social and family context. It is important to be open to alternative explanations for physical or behavioural signs of abuse.

4.2 Pact's procedures for the reporting of concerns or suspicions of abuse and child protection and welfare concerns.

The following are considered reasonable grounds for concern (Child protection and welfare practice handbook, P30, Sec 2.2)

- An injury or behaviour that is consistent both with abuse and an innocent explanation, but where there are corroborative indicators supporting the concern that it may be a case of abuse.
- Consistent indication over a period of time that a child is suffering from emotional or physical neglect.
- Admission or indication by someone of an alleged abuse.
- A specific indication from a child that he or she/he was abused.
- An account from a person who saw the child being abused.
- Evidence (e.g. injury or behaviour) that is consistent with abuse and unlikely to have been caused in any other way.

Where the above-mentioned reasonable grounds for concern exist the following steps should be taken:

- Any staff member who has concerns around the welfare or protection of a child will discuss their concerns with the Designated Liaison Person (role of DP defined below).
- Where the Designated Liaison Person is not available, staff should link in with Tusla's Duty social work team that covers the area in which the child resides.
- Where a decision is made to report, it is considered best practice that the child's primary carer and/or, where assessed as appropriate, the birth or adoptive parents of the child be made aware of the report unless there is a fear of a risk of flight or danger to the child or staff member.
- Where a child or family is in contact with more than one staff member, the report will be made in consultation with the appropriate personnel.
- Consultation with the Designated Liaison Person and the follow up reporting of the suspected abuse must be made without delay. No child should ever be left in a dangerous situation pending Tusla's intervention.
- An informal consultation can be made in advance of a report being submitted to clarify that reasonable grounds for reporting have been established, where there is a lack of clarity.
- An initial report via the telephone can be made first to Tusla, followed immediately by a follow up written report on the Standard Report Form to the relevant area/social worker. The person to whom it is being disclosed/witnesses the abuse will complete the standard report form in consultation with the Designated Liaison Person. The social worker in Tusla will also possibly need to link back with the original referrer, who reported the suspected abuse to the Social Worker.
- The standard Tusla report form should be used (See *Appendix Three*).

- In cases of emergency where the concern arises, or the disclosure is made outside of the social work hours of 9am to 5pm, the Gardaí must be contacted immediately.
- Staff are responsible to recognise that dealing with child protection can be distressing, knowing one's own limitations in dealing with it and having the awareness to be able to source support, supervision or assistance as necessary.

4.3 Pact Procedures for Sharing Information

- As members of Pact's workforce, all staff, in consultation with the Designated Liaison Person, have a duty to report all child welfare and protection concerns. This includes concerns that arise in relation to children that staff are working with in any of the agency's following services: Intercountry, Domestic and Step Adoption Assessment Service; Pre- Adoption Foster Care Service.
- At the commencement of their relationship with the service all service users will be advised that Pact, as outlined in the Child Protection policy, have a duty of care to children and are obliged to consult with Tusla where there may be concerns in relation to the welfare and protection of a child.
- In doing so, the worker at Pact will endeavor to work in partnership with parents or the primary care giver. This involves consultation with them in relation to any child welfare or protection concerns that may arise. The exception to this is where this sharing of information would place the child at further risk or prejudice an investigation.
- Where the parents or primary care giver is also a service user of Pact, staff will continue to provide support to them during any Tusla social work assessment and/or Garda investigation.
- Staff will ensure that the needs of the child have primacy in their work with parents and/or the primary carer. Social workers will ensure that parents have informed children, at an age appropriate level, about the purpose of the social workers visit and that they are invited to share any issues they may have.
- In certain situations, staff may not be aware of who the child's parents are or may not have a relationship with the child's parents. In such instances, staff will endeavour to relate their concerns to Tusla in consultation with the Designated Liaison Person in the school where the child attends.

4.4 Information required when a Report is being made

The ability of Tusla and the Gardaí to assess allegations or suspicion of child abuse will depend on the quality of the information provided by the person making the report. The following information, where available, concerns should be conveyed by telephone if necessary or on the Standard Report form. (*See Appendix Three*)

- Accurate identifying information (as much as is known). This should include the name, address and age of the child and all children in the family, as well as parents' or carers' names and addresses.
- Name and address of person alleged to be causing harm to the child.

- A full account of what constitutes the grounds for concern about the welfare and protection of the child or children.
- The source of any information that is being discussed with Tusla.
- Dates when the concern arose, or a particular incident occurred.
- Any explanation offered to account for the risk, injury or concern.
- The child's own statement (if concern is raised by a child)
- Any other information regarding difficulties that the family may be experiencing. These may include addiction, separation, financial situation, recent bereavement, illness, mental health or disability issues.
- Any factors which may be considered protective or supportive to the family.
- Name of child or children's school.
- Name of child and/or family's GP.
- The reporter's own involvement with the child and parents or carers.
- Details of any actions taken already about the risks or concerns.
- Names and addresses of any agencies or key persons involved with the parents or carers.
- Identity of reporters including name, address, telephone number, occupation, and relationship with the family.

4.5 Protection for Persons Reporting Abuse Act (1998)

This Act came into operation on 23 January 1999. The main provisions of the Act are:

- (i) the provision of immunity from civil liability to any person who reports child abuse 'reasonably and in good faith' to designated officers of the HSE or to any member of An Garda Síochána;
- (ii) the provision of significant protections for employees who report child abuse. These protections cover all employees and all forms of discrimination up to, and including, dismissal;
- (iii) the creation of a new offence of false reporting of child abuse, where a person makes a report of child abuse to the appropriate authorities 'knowing that statement to be false'. This is a new criminal offence, designed to protect innocent persons from malicious reports.

4.6 Special/Additional Considerations as specific to Pact's Services:

Failure to make a mandatory report.

The Act does not impose criminal sanctions if an individual fails to make a mandatory report in the required circumstances. However, Tusla may make a complaint to the professional regulatory body and it may also make a report to the National Garda Vetting Bureau which could be disclosed when you are

next vetted.

Pact takes its child protection responsibilities seriously and any omission to make a mandatory report or bring information to the DLO that would lead to the submission of a mandatory report will be considered a serious breach of the agency responsibility and may lead to dismissal.

4.7 Retrospective Disclosures

This policy also applies to disclosures by adults of abuse that took place in their childhood. If it is deemed that there is a risk that the person alleged to have carried out the abuse is in contact with children, it is pertinent that a report be made Tusla/Gardaí, whether the child at risk is identified or not. Such is the practice in all cases of retrospective disclosure made by adults and children. (See Children First National Guidance for the protection of Children. P15 sec 3.6)

5. Working with Children and Families

In accordance with national guidelines in this area Pact has drawn up a policy on Safe Organisational Practice and a Code of Practice.

5.1 Pact Safe Organisational Practice

Under this policy, Pact will adopt and deliver the following organisational practices directed at ensuring the safety of children using our services and with whom our workers may come into contact.

Pact ensures that only qualified and vetted social workers are employed to deliver our social work service.

Social Work Students on placement in Pact must be Garda Vetted and will be under the supervision of a qualified social worker. They are required to discuss any child protection concerns with their practice teacher in the first instance. The practice teacher must then notify the DLO or Deputy DLO.

Pact's Designated Liaison Person is responsible for reporting all concerns, in consultation with the respective staff member, to Tusla's Social Work Department.

5.2 Pact Code of Practice

- In accordance with the 1991 Child Care Act, Pact deems anyone under the age of 18 to be a child (unless already married). It is the responsibility of every staff member, ad hoc social worker, students and volunteers, to promote the welfare of children as the first and paramount consideration.
- All staff should be cognisant of the fact that the welfare of children is of first and paramount importance and that children should be treated with dignity, sensitivity and respect always.
- Interaction with children must be respectful, considering their overall needs and not cause unnecessary distress.
- Children have a right to be heard and taken seriously.
- Children's welfare and safety must always come first while giving due consideration to the needs and rights of parents and carers, but where they are in conflict, the rights of the child take precedence.

- Due to the nature of Pact's work, staff, ad hoc social workers, foster carers, students and volunteers work directly with children and as such must be alert and open to and accepting of the possibility of abuse or neglect.
- Training to include recognizing the signs of abuse is provided to all foster carers who completed the on-line HSE child protection training.
- When assessing prospective adoptive parents, children presently residing with the family will be interviewed by a Pact social worker. Depending on the age and developmental stage of the child, a parent maybe within eye contact of the child or in another room. A second worker may be present also.
- Staff should never let allegations a child makes go without being addressed and recorded.
- Babies may be transferred by car as part of Pact's Pre-Adoption Foster Care Service. In such cases, only Pact staff travel in the car with the baby. For all journeys the worker and child must be accompanied by another member of agency staff or adult foster carer.
- With the aim of facilitating open adoption, in relation to photography that is received by Pact from adoptive parents to be forwarded to birth parents, Pact will vet these images and determine whether they are suitable for passing on. Unsuitable photographs will be returned to the adoptive parents.

Staff should not meet with children outside organised activities/appointments unless consent has been gained.

- Staff should be sensitive of the possibility of developing favouritism or becoming over involved or spending a great deal of time with any one child/family.
- Staff must understand that whilst all children need to receive and show affection, (for example give and receive a hug, or put or have an arm around the shoulder, or hold an adult's hand) that any physical contact must be initiated by the child or if initiated by a staff member is done to respond to child's needs i.e. child falls and comes looking to staff for a hug; is safe for both the child and the staff member and is age appropriate. **Ideally another staff member should be present at such times.**

5.3 Confidentiality (Children First Section 3.9 page 16)

All of those who must observe this policy will be informed of their responsibilities around confidentiality.

All information regarding concern or assessment of child abuse or neglect should be shared on 'a need to know' basis in the interests of the child with the relevant statutory authorities. Any information provided to Tusla or the Garda Síochána will remain confidential. Such information will only be disclosed where the welfare, protection and safety of the child requires it. The provision of information to the statutory agencies for the protection of a child is not a breach of confidentiality or data protection.

In meeting with service users for the first time, the boundaries of confidentiality with respect to child protection are made explicitly clear. The social worker can refer to Pact's Confidentiality Policy in doing so.

No undertakings regarding secrecy can be given. Those working with a child and family should make this clear to all parties involved, although they can be assured that all information will be handled taking full account of legal requirements.

Information gathered for one purpose must not be used for another without consulting the person who provided that information.

The limitations in relation to confidentiality also pertains to adults who disclose retrospective experiences of abuse. If it is disclosed to a staff member that the person alleged to have carried out the abuse is in contact with children, it is the responsibility of Pact to report this information to the relevant statutory agencies, i.e. to Tusla/Gardaí.

5.4 Record Keeping and Data Protection

All child protection reports are maintained in a confidential file which is kept by the Designated Liaison Person. The social work file will reference these reports rather than copies being retained. The confidential file facilitates the monitoring and review of child protection reports. This file is stored in the Designated Liaison Person's office. All reports made to Tusla are made in consultation with the Designated Liaison person who maintains a record of all reports sent to, or concerns discussed with, the social work duty team in Tusla. Pact has a responsibility under Children First to cooperate with Tusla on the sharing of their records where a child welfare or protection issue arises. (See Children First National Guidance for the protection of Children. P22 sec 4.7.5 *viii*)

The confidential file is kept in a locked cupboard in the Designated Liaison Person's office. Only the Designated Liaison Person has access to the file.

Pact's Record Management policy details the records which Pact retains how they are stored, and how relevant information should be shared with Tusla.

6. Procedures for Dealing with Allegations against Staff

In the event of allegations being made against a Pact staff member, the protection of the child/young person is the first and paramount consideration. It is important to note that two procedures are followed:

- The reporting procedure in respect of the child.
- The procedure for dealing with the employee.

The Designated Liaison Person is responsible for following up the reporting procedures to Tusla in respect of the child and will liaise with the complaints officer as appropriate.

In line with the procedures for reporting abuse described above, a report is made to the Designated Liaison Person or Deputy to address the needs of the child.

Staff also have a right to fair and just procedures in accordance with their contracts and the rules of natural justice. It is important that follow up is dealt with in an efficient way and does not result in unnecessary financial hardship for the staff member. The allegation against the worker will be assessed promptly and carefully. If reasonable grounds for concern exist a formal report to Tusla will be made.

The Complaints Officer, appointed by the Board, will lead out on the process in relation to the staff member and will inform the worker privately of the fact that an allegation has been made and the nature of that allegation. She/he will inform the worker of the procedures to be followed in investigating the allegation.

The person against whom the abuse is alleged will be afforded the right to respond. Pact will note the response and pass on this information when making the formal report to Tusla.

The Chairperson of the Board of Directors of Pact should be informed as soon as possible.

The follow up on an allegation of abuse against an employee will be made in consultation with Tusla

and the Gardaí. An immediate meeting will be arranged for this purpose.

Pact will ensure that actions taken by them do not undermine or frustrate any investigations being conducted by Tusla or the Gardaí.

After these consultations referred to above and when pursuing the question of the future position of the employee, the Chairperson should advise the staff member and the agreed procedures should be followed.

(See appendix 9 Children First page 93)

Depending on the employment contract and the nature of the allegation and assessed level of risk, the member of staff against whom the allegation has been made may be suspended until the investigation is complete. Any intervention taken should be proportionate to the level of risk and should not unduly affect the worker.

7. Pact Accidents Procedure (Short term Temporary Pre adoptive foster Care)

All foster carers are obliged to keep a record of day to day events. They must inform their link worker where there is an incident, who will then report the matter to the Designated Liaison Person.

Should an accident occur involving a child in the care of while under the supervision of Pact's social workers it should be reported to the Designated Liaison Person or Deputy. Once the child's immediate medical and emotional needs are met, Pact's Accident Record Form should be completed (See *Appendix Four*). These forms are held by the Designated Liaison Person.

8. Pact Recruitment, Selection and Vetting Procedures

8.1 Key elements of Pact's recruitment process in appointing quality staff:

A job vacancy is advertised, and job description made available to interested applicants. Application is made via submission of a Curriculum Vitae. The applicant's two most recent references are contacted. These must be relevant to the position applied for. All references are verified by email with the referee. Short listed individuals are interviewed by the Principal Social Worker, the HR Officer, and sometimes, another staff member, where relevant. A second interview may be required. All vetting is undertaken in line National Vetting Bureau (Children & Vulnerable Persons) Acts 2012 NS 2016, Schedule 1, parts 12 And 13.

Prior to engagement with the Agency prospective employees, volunteers, Board members will be required to sign a declaration stating the following:

- Have never been convicted of any criminal offence with reference to child protection convictions
- Have never been the subject of an allegation(s) of child abuse
- Know of no reason why they would be deemed unsuitable to work with children.

All new employees are subject to a minimum six months probationary period.

8.2 Recruiting Short Term Temporary Foster Carers

Pact complete Garda vetting and Child Protection Clearances on prospective short-term temporary foster carers along with any members of their household over 16 years of age.

Where applications for adoption assessments and Section 36 foster care assessments are allocated by

Tusla, that agency will process Garda Vetting and Child Protection clearances as necessary. Garda vetting is updated every three years or sooner if there has been a change of address likewise with child Protection clearances.

8.3 Students

Social Work Students on placement are required to sign a placement contract agreed between the college and Pact. This contract will include confirmation that the student has been Garda Vetted by the college before starting placement.

9. Pact Training, Support and Supervision

Pact is committed to ensuring that staff feel supported in implementing the Child Protection Policy and procedures to ensure best practice standards of service are provided. It is the policy of the organisation to provide comprehensive induction and ongoing training opportunities for staff to enhance skills and knowledge, and to promote professional development, particularly in child protection. These will be provided for staff as they become available and according to the individual needs of staff members.

All new staff will be given a copy of the Child Protection Policy and given the opportunity to discuss it during their induction. Social Work staff will be advised to seek Children First Training within a couple of months of their start date.

Pact is committed to the provision of ongoing support and staff supervision. This will be available to staff to enable them to deal with difficulties as they arise. Peer Support and debriefing sessions are also provided when necessary. Pact's policy on Supervision can be accessed under **Social Worker policies**. (See *Appendix Five* for details of The Supervision Process).

10. Pact Complaints Procedure

Any of Pact who is availing of any of the agency's services has a right to complain under The Health Act 2004 Section 48 (2) or make an allegation following due reason. Pact's complaints procedure, which has been agreed by the HSE, incorporates the three elements of issues resolution, investigation and appeal. It can be accessed via the Pact website, www.pact.ie . See *Appendix Six* for information on making a complaint.

Appendix One

RELEVANT LEGISLATION

Children First Act 2015

The [Children First Act 2015](#) was enacted on 19th November 2015 and commenced in full on December 11th 2017.

The Act places a number of statutory obligations on specific groups of professionals and on particular organisations providing services to children.

Through the provisions of the Act, it is intended to:

- Raise awareness of child abuse and neglect
- Provide for mandatory reporting by key professionals
- Improve child safeguarding arrangements in organisations providing services to children
- Provide for cooperation and information-sharing between agencies when Tusla – Child and Family Agency, is undertaking child protection

The legislation also contains a provision that removes the defence of reasonable chastisement in relation to corporal punishment as part of court proceedings.

The policy intent is that the legislation will operate side-by-side with the existing non-statutory obligations provided for in Children First: National Guidance for the Protection and Welfare of Children (2017).

Children Act 2001

The Children Act 2001 replaced provisions of the Children Act 1908 and associated legislation with a modern comprehensive statute.

The 2001 Act covers three main areas of the law. Firstly, and predominantly, it provides a framework for the development of the juvenile justice system. Secondly, it re-enacts and updates provisions in the 1908 Act protecting children against persons who have the custody, charge or care of them. Thirdly, it provides for family welfare conferences and other new provisions for dealing with children where there is a real and substantial risk to their life, health, safety, welfare and development.

Child Care Act 1991

The purpose of the Child Care Act 1991 is to ‘update the law in relation to the care of children who have been assaulted, ill-treated, neglected or sexually abused, or who are at risk’. The main provisions of the Act are:

- (i) the placing of a statutory duty on Tusla to promote the welfare of children who are not receiving adequate care and protection up to the age of 18;
- (ii) the strengthening of the powers of Tusla to provide child care and family support services;

- (iii) the improvement of the procedures to facilitate immediate intervention by Tusla and An Garda Síochána where children are in danger;
- (iv) the revision of provisions to enable the Courts to place children who have been assaulted, ill-treated, neglected or sexually abused, or who are at risk, in the care of or under the supervision of Tusla;
- (v) the introduction of arrangements for the supervision and inspection of pre-school services;
- (vi) the revision of provisions in relation to the registration and inspection of residential centres for children.

Criminal Justice Act 2006

Section 176 of the Criminal Justice Act 2006 introduced the criminal charge of 'reckless endangerment of children'. It states:

'A person, having authority or control over a child or abuser, who intentionally or recklessly endangers a child by –

- (a) 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
- (b) 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.'

The penalty for a person found guilty of this offence is a fine (no upper limit) and/or imprisonment for a term not exceeding 10 years.

Protections for Persons Reporting Child Abuse Act 1998

This Act came into operation on 23 January 1999. The main provisions of the Act are:

- (i) the provision of immunity from civil liability to any person who reports child abuse 'reasonably and in good faith' to designated officers of Tusla or to any member of An Garda Síochána;
- (ii) the provision of significant protections for employees who report child abuse. These protections cover all employees and all forms of discrimination up to, and including, dismissal;
- (iii) the creation of a new offence of false reporting of child abuse, where a person makes a report of child abuse to the appropriate authorities 'knowing that statement to be false'. This is a new criminal offence, designed to protect innocent persons from malicious reports.

A wide range of nursing, medical, paramedical and other staff has been appointed as designated officers for the purposes of this Act

(see Appendix 10 of the Children First: National Guidance). Section 6 of the Act is a saving provision, which specifies that the statutory immunity provided under the Act for persons reporting child abuse is additional to any defences already available under any other enactment or rule of law in force immediately before the passing of the Act.

Data Protection Acts 1988 and 2003

The Data Protection Act 1988 applies to the processing of personal data. It 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 or her, and to have inaccurate

data rectified or erased. It requires data controllers to make sure that the data they keep are collected fairly, are accurate and up-to-date, are kept for lawful purposes and are not used or disclosed in any manner incompatible with those purposes. It also requires both data controllers and data processors to protect the data they keep, and imposes on them a special duty of care in relation to the individuals about whom they keep such data.

Freedom of Information Acts 1997 and 2003

The Freedom of Information Acts 1997 and 2003 enable 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. The specific provisions of the Acts include:

- (i) to provide for a right of access to records held by such public bodies, for necessary exceptions to that right and for assistance to persons to enable them to exercise it;
- (ii) to enable persons to have corrected any personal information relating to them in the possession of such bodies;
- (iii) to provide for independent review by an Information Commissioner both of decisions of such bodies relating to that right and of the operation of the Acts generally;
- (iv) to provide for the publication by public bodies of guides to their functions and national guidelines, such as these, for the public.

Under the Acts, a person about whom a public body holds personal information has:

- (i) right of access to this information, subject to certain conditions;
- (ii) the right to correct this information if it is inaccurate.

Where a public body makes a decision that affects an individual, that individual has a right to relevant reasons and findings on the part of the body reaching that decision.

The Acts are also designed to protect the privacy of individuals and, in general, requires the prior consent of an individual before releasing personal information about them. Where the release of social work or medical records contains information that would be harmful to a person's well-being, the release may be made to a health professional who acts on the person's behalf. Under the Acts, there are regulations and guidelines relating to access by parents to their children's records; these emphasize that the overriding concern is the best interests of the child.

The exemptions and exclusions that are relevant to child protection include the following:

- (i) protecting records covered by legal professional privilege;
- (ii) protecting records that would facilitate the commission of a crime;
- (iii) protecting records that would reveal a confidential source of information.

Appendix Two

PHYSICAL AND BEHAVIOURAL INDICATORS OF ABUSE

When considering the Signs and Symptoms, remember that no one indicator is conclusive; there are usually a range of factors and it is important for staff to consider what knowledge they have of the particular family and child's home situation.

It should be noted that no one indicator is indicative of abuse and that this list is not exhaustive. Further information on the indicators of abuse can be found in Appendix 1 of The Children First National Guidance for the Protection and Welfare of Children (2011).

Some Physical and Behavioural Indicators of Neglect are:

- Constant Hunger
- Exposed to Danger / Lack of Supervision
- Inadequate / Inappropriate Clothing
- Poor Hygiene
- Untreated Illnesses
- Tiredness
- Listlessness
- Lack of Peer Relationships
- Low Self Esteem
- Compulsive Stealing
- Begging.

Some Physical and Behavioural Indicators of Emotional Abuse include:

- Sudden Speech Disorders
- Wetting and Soiling
- Signs of Mutilation
- Attention Seeking Behaviour
- Frequent Vomiting
- Rocking
- Thumb Sucking
- Fear of Change
- Frequent Absconding
- Poor Peer Relationships.

Physical and Behavioural Indicators of Physical Abuse include:

- Bite Marks or Welts
- Scratches
- Bruises in Places Difficult to Mark
- Burns especially by Cigarettes
- Untreated Injuries
- Self Mutilation
- Frequent Absconding
- Aggressive or Withdrawn
- Fear of Returning Home
- Undue Fear of Adults
- Fearful Watchfulness.

Some Physical and Behavioural Indicators if Sexual Abuse can be:

- Soreness/Bleeding/Itching in Genital or Anal areas
- Stained or Bloody Underwear

- Stomach Pains or Headaches
- Pain on Urination
- Difficulty Walking or Sitting
- Bruises on Inner Thigh / Buttocks
- Anorexic or Bulimic
- Pregnancy
- Chronic Depression
- Inappropriate Language
- Inappropriate Sexual Knowledge
- Sexual Advances to Adults or Children
- Low Self Esteem
- Afraid of Dark
- Wariness at Being Approached.

Child Protection and Welfare Report Form

MANDATED PERSONS AND NON MANDATED PERSONS
(Children First Act 2015 & Children First National Guidance)

Use block letters when filling out this form.
 Fields marked with an * are mandatory.

1. Tusla Area (this is where the child resides)*	
---	--

2. Date of Report*	
---------------------------	--

3. Details of Child

First Name*		Surname*	
Male*	<input type="checkbox"/>	Female*	<input type="checkbox"/>
Address*		Date of Birth*	
		Estimated Age*	
		School Name	
		School Address	
Eircode			

4. Details of Concerns*

Please complete the following section with as much detail about the specific child protection or welfare concern or allegation as possible. Include dates, times, incident details and names of anyone who observed any incident. Please include the parents and child's view, if known. Please attach additional sheets, if necessary

Please see *'Tusla Children First – A Guide for the Reporting of Child Protection and Welfare Concerns'* for additional assistance on the steps to consider in making a report to Tusla

5. Type of Concern

Child Welfare Concern	<input type="checkbox"/>		
Emotional Abuse	<input type="checkbox"/>	Physical Abuse	<input type="checkbox"/>
Neglect	<input type="checkbox"/>	Sexual Abuse	<input type="checkbox"/>

6. Details of Reporter

First Name		Surname	
Address If reporting in a professional capacity, please use your professional address		Organisation	
		Position Held	
		Mobile No.	
		Telephone No.	
Eircode		Email Address	

Child Protection and Welfare Report Form

MANDATED PERSONS AND NON MANDATED PERSONS
(Children First Act 2015 & Children First National Guidance)

Is this a Mandated Report made under Sec 14, Children First Act 2015?*	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Mandated Person's Type				

7. Details of Other Persons Where a Joint Report is Being Made

First Name		Surname	
Address If reporting in a professional capacity, please use your professional address		Organisation	
		Position Held	
		Mobile No.	
		Telephone No.	
Eircode		Email Address	

First Name		Surname	
Address If reporting in a professional capacity, please use your professional address		Organisation	
		Position Held	
		Mobile No.	
		Telephone No.	
Eircode		Email Address	

8. Parents Aware of Report

Are the child's parents/carers aware that this concern is being reported to Tusla?*	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If the parent/carer does not know, please indicate reasons:				

9. Relationships

Details of Mother			
First Name		Surname	
Address		Mobile No.	
		Telephone No.	
		Email Address	
		Eircode	

Is the Mother a Legal Guardian?*	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Details of Father			
First Name		Surname	
Address		Mobile No.	
		Telephone No.	
		Email Address	
		Eircode	

Child Protection and Welfare Report Form

MANDATED PERSONS AND NON MANDATED PERSONS
(Children First Act 2015 & Children First National Guidance)

Is the Father a Legal Guardian?*	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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10. Household Composition

First Name	Surname	Relationship	Date of Birth	Estimated Age	Additional Information e.g. school, occupation, other

11. Details of Person(s) Allegedly Causing Harm

First Name*		Surname*	
Male*	<input type="checkbox"/>	Female*	<input type="checkbox"/>
Address		Date of Birth	
		Estimated Age	
		Mobile No.	
		Telephone No.	
Eircode		Email Address	
Occupation		Organisation	
Position Held			

Relationship to Child	
Address at time of alleged incident	
If name unknown please indicate reason	

First Name*		Surname*	
Male*	<input type="checkbox"/>	Female*	<input type="checkbox"/>
Address		Date of Birth	
		Estimated Age	
		Mobile No.	
		Telephone No.	
Eircode		Email Address	
Occupation		Organisation	
Position Held			

Relationship to Child	
Address at time of alleged incident	
If name unknown please indicate reason	

Child Protection and Welfare Report Form

MANDATED PERSONS AND NON MANDATED PERSONS
(Children First Act 2015 & Children First National Guidance)

12. Name and Address of Other Organisations, Personnel or Agencies Known to be Involved Currently or Previously with the Family

Profession	First Name	Surname	Address	Contact Number	Recent Contact e.g. 3/6/9 months ago
Social Worker					
Public Health Nurse					
GP					
Hospital					
School					
Gardaí					
Pre-school/ crèche					
Other					

13. Any Other Relevant Information, Including any Previous Contact with the Child or Family

Please ensure you have indicated if this is a mandated report in section 6.

Thank you for completing the report form.

In completing this report form you are providing details on yourself and on others. Details such as name, address and date of birth fall under the definition of 'Personal Data' in the Data Protection Acts, 1988 & 2003. Tusla has a responsibility under these Acts in its capacity as a Data Controller to, amongst other things, obtain and process this data fairly; keep it safe and secure; and to keep it for a specified lawful purpose. That purpose is to fulfil our statutory responsibility under the Child Care Act 1991 to promote the protection and welfare of children. Tusla may, during the course of the assessment of this report disclose such Personal Data to other agencies including An Garda Síochána. Further details about Tusla's responsibilities as a Data Controller and your rights as a Data Subject can be found on our website, www.tusla.ie. As you are providing Personal Data on others, you are a Data Processor. We ask that you only provide those details that are necessary for the report and that you keep this report and the Personal Data contained in it secure from unauthorised access, disclosure, destruction or accidental loss.

14. For Completion by Tusla Authorised Person on Receipt of Report

Report Received by

First Name		Surname		Date	
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Mandated Report Acknowledgement by



An Ghnifonhaireacht um
Leanaí agus an Teaghlach
Child and Family Agency

Child Protection and Welfare Report Form

MANDATED PERSONS AND NON MANDATED PERSONS
*(Children First Act 2015 & Children First National
Guidance)*

First Name		Surname		Date Sent	
------------	--	---------	--	-----------	--

Authorised Person Signature*	
Date*	

Child Previously Known	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Allocated Case No				

Appendix Four

Pact Accident Record Form

Report Number (consecutive)
 Accident Record

1 About the person who had the accident

Name		
Address		
	Postcode	
Occupation		

2 About you, the individual filling in this record

If you did not have the accident write your address and occupation.		
Name		
Address		
	Postcode	
Occupation		

3 Details of the accident (Continue on the back of this form if you need to)

When it happened. Date ____/____/____ Time ____
Where it happened. State location. _____
How did the accident happen? Give the cause if possible. _____

If the person who had the accident suffered an injury, give details _____

Sign the record and date it.
Sign _____ Date ____/____/____

4 For the employer only

Complete this box if the accident is reportable under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR).	
How was it reported? _____	
Sign _____	Date ____/____/____

Appendix Five

PACT's SUPERVISION POLICY

This Supervision policy document was drawn up using the HSE/Public Sector Guidance Document on Supervision for Health Care and Social Care Professionals; Improving Performance and Supporting Employees. (2015). It also drew on Pact's previous Supervision and Mentoring policy, as well as on the guidelines issued by the IASW and CORU for the Continuous Professional Development of Social Workers.

1. Policy Statement

Supervision is a workforce development strategy that can contribute to higher quality service outcomes for service users/ service users, improve practitioner skills and inform and consolidate training and development. It contributes to employees having a positive employment experience through which they are appropriately engaged with their job, their team, their profession and their organisation. The supervision engagement also contributes to employee wellbeing and reduces incidents of burnout.

For supervision to be effective it needs to combine a performance management approach with a dynamic, empowering and enabling supervisory relationship. Supervision improves the quality of practice, supports the development of integrated working and ensures continuing professional development. Supervision contributes to the development of a learning culture by promoting an approach that develops the confidence and competence of all involved in the process. It is therefore at the core of individual and group continuing professional development. (Children's Workforce Development Council, Providing effective supervision 2007)

It is Pact policy that all registered/accredited social workers/counsellors should participate in regular, high quality, consistent and effective supervision that is appropriate to their profession, that is aligned with the stated governance standards and which meets the priorities, aims and principles described below.

The process of supervision should continue throughout the professional's career. A sustained engagement in the supervision process will identify compliance with statutory and professional ethical guidelines, ensure practitioners work within their scope of practice and meet regulatory requirements and contribute to Continuous Professional Development (CPD). See 4.0

It is envisaged that this engagement will ensure clarity of roles and responsibilities and create structured opportunities to discuss work, review practice and progress and plan for future development.

2. Purpose

This policy has been developed to provide a support, quality assurance, accountability and development mechanism for Social Workers in Pact. The supervision policy is part of a process to strengthen employee engagement as a support mechanism for employees, thereby enhancing performance, employee satisfaction, service quality and ultimately service user satisfaction. This policy therefore sets out to provide a framework for supervision.

3. Scope: Who must observe this policy?

This is a mandatory policy. It applies to all Social Workers who presently are employed in Pact, across all grades and all levels of experience. It is facilitated by service management and human resource functions.

4. Aims of Supervision

The aim of supervision is to ensure the provision of a safe, quality service, delivered by employees who are supported, engaged and participate in continuous professional development. The aims of supervision are often described using the four distinct but equally important functions of **Management, Support, Learning / Development and Engagement / Mediation**. (Adapted from Morrison.)

Management

- To provide a regular, structured, opportunity to discuss work, review practice and progress and plan for future development.
- To hold the professional accountable for performance and practice, to ensure safe, quality, care for service users.
- To improve /ensure service quality, safety and clinical practice.
- To provide oversight of the practitioners practice.
- To ensure good practice and to challenge and manage poor practice.

Support

- For the individual in what is a demanding and potentially stressful working environment.
- To ensure that health and well-being at work issues are addressed.
- To ensure the supervisee meets the service objectives of Pact.
- The development of supportive and positive climate for evidence based practice and performance.

Learning and development of each individual

- To identify their knowledge-base, attitudes, learning style and skills.
- To identify learning needs and the strengths and areas for development.
- To plan and set targets for ongoing professional development. (CPD)
- To develop employees' skills in and capacity for reflective practice.

Engagement/Mediation

- To ensure healthy engagement with and communication between the practitioners and with the organisation.
- Supervision is an important working relationship.
- Supervision is about feeling and thinking as well as doing.
- Supervision is part of the intervention process.

5. Supervision framework

Definition & Functions

Supervision is acknowledged as a component of professional practice development and is an individual and organisational response to meeting the needs of service users for safe quality care at times of need. (O' Neill 2004).

Morrison (2001) defines supervision as 'a process in which one worker is given responsibility by the organisation to work with another worker(s) in order to meet certain organisational and professional objectives'.

'Professional Supervision is a partnership process of ongoing reflection and feedback between identified professionals to ensure and enhance effective practice in a supportive manner'.

(Eileen O'Neill, 2007)

The definition clarifies that supervision

- Is located within the context of a clearly defined line management relationship within the organisation.

Has both organisational and professional objectives.

- Is not confined to operating on a one-to-one basis, supervision may often enhanced in a group setting.
- Recognises the inter-dependence of accountability, competence, professional development and professional support.

- Both supervisor and supervisee have responsibility for the relationship.

Supervision operates alongside many other professional and management practices and processes. While these may over-lap and complement each other.

Supervision is not

- counselling
- formal appraisal
- mentoring or coaching
- consulting
- formal disciplinary or grievance processes.

During supervision issues may arise that require referral to or initiation of one or more of the above processes. It is the responsibility of the supervisor to ensure these processes are dealt with in a separate forum, notwithstanding the appropriate level of confidentiality surrounding the supervision process.

6. Principles and beliefs underpinning the supervision process

Service user focused: Supervision's primary focus must always be on the needs of the service user while supporting the professional development of employees.

Quality and safety: Supervision is critical to quality of service delivery and the experience of users.

Supporting performance: Managing performance in a supportive way, taking account of the social worker's professionalism and autonomy, with measurement of the service user and staff experience being central in performance measurement.

Is accountable: The practice of supervision is accountable to service users and to the employer. This means that the roles of all parties are explicitly identified, as are the boundaries of these roles.

Management of risk: Effective supervision contributes to the management of risk through the development of high standards of performance and professional practice.

Maintaining competent staff: Pact ensures that social workers have the competencies required to deliver high quality, safe and reliable services while identifying and addressing issues of under-performance.

Management support: A culture of supervision is developed and fostered within the organisation. Resources are provided to implement and sustain the process.

Individual responsibility: The individual practitioner is expected to seek and participate in supervision sessions and to engage in reflection on their practice.

Participation by all social workers: Supervision is appropriate and beneficial regardless of an employee's level of experience, or organisational role. It is as important for a new entrant, as it is for an advanced practitioner and a practitioner with managerial responsibilities.

Has clear and balanced purpose: The functions of supervision; management, development, support and engagement /mediation are each addressed in a balanced way.

Is flexible: The professional supervision process is sufficiently flexible to ensure that it meets the needs of the supervisee, regardless of the stage they are at in their development.

Principles of adult learning: Supervision should be based on the principles of adult learning. Knowles identified six principles of adult learning.

Those principles are that adults are:

- internally motivated and self-directed
- bring life experiences and knowledge to learning experiences
- goal oriented
- relevancy oriented

- practical
- and like to be respected.

Challenge and affirmation: The professional supervision process maintains an explicit, but delicate, balance between challenge and support or affirmation. Both are essential to further the supervisee's learning, and to help them gain new perspectives on their professional experience.

Regular and sustained: A regular time is scheduled for the supervisee to review their practice and role. The frequency will depend on the supervisee's stage of development, level of experience or experience in their current work area.

Confidential: While the supervision dialogue is bound by the necessary confidentiality appropriate to a professional engagement, confidentiality cannot be absolute as issues that emerge may require referral to processes or parties outside the supervision framework.

Appropriateness of the model: Pact's model of supervision takes into account the professional requirements, the roles/grades and the service delivery context.

7. Models of supervision

There are a number of different approaches to supervision used in Pact. The following are used

- Professional supervision
- Management supervision
- Peer supervision
- Group supervision
- External supervision.

The decision to use a particular model is based on the level of experience of the practitioner, the demands or requirements of the particular role, the models advocated by CORU and the resources or opportunities available. Sometimes more than one model may be used together depending on the needs.

Regardless of the model used, supervision should be properly set up, formally structured and managed with appropriate records kept.

Pact recognise that in certain management circumstances there may be a need for external supervision or consultation. This will be agreed with the line manager. In external supervision, a contracted relationship must be established to provide the necessary practice supervision that is specifically management focused. Case management and line management responsibilities remain with the line manager. See Appendix 1.

8. Roles and responsibilities

- Governance

The governance standards required by Pact/Here2Help ensures that employees:

- Are well informed
- Understand the management and clinical governance structures
- Are clear and confident in their roles and responsibilities
- Are appropriately trained and developed;
- Are involved in decision making;
- Receive feedback on their contribution and role in their team and
- Are constructively challenged.

The standard also requires all employees to:

- Keep themselves up to date with developments relevant to their role within the organisation; commit to continuous personal and professional development.
- Adhere to the professional standards set by regulatory bodies or professional associations; e.g. CORU.

- Maintain professional competence and registration with the relevant regulatory authority e.g. CORU.

- Be clinically responsible for their own practice.
- Adhere to the standards of conduct set by Pact.
- Actively participate in discussions on issues that affect them.
- Seek support and feedback on their operational and professional development.

Overall responsibility for the implementation and quality of social work supervision rests with Pact's Principal Social Worker. Supervision is a process not an event. It entails preparation, open discussion and the implementation of decisions. Both supervisors and supervisees have a responsibility to contribute positively to the process.

Supervisors should ensure adherence to the standards set out in this policy. They have a responsibility to ensure that the frequency and duration of supervision meets the needs of the supervisee, taking into account where the supervisee is in terms of experience and the needs of the agency. Supervisors must ensure that time is allocated for supervision and that the formal structure for recording are in place.

Supervisees will make a substantial contribution to the quality of their own supervision by:

- Being suitably prepared for supervision.
- Ensuring that actions agreed within supervision are carried out in a timely manner.
- Notifying the supervisor of any difficulty in implementing decisions of plans.
- Identifying development and support needs.
- Understanding and implementing Pact policy, procedures and protocols.
- Ensuring diversity is integrated into all work and records.
- Highlighting areas of learning in relation to his/her own professional development.

9. The Supervision Process

Both the supervisor and the supervisee have a responsibility to ensure that supervision is occurring on a regular basis. The frequency and duration of supervision will be determined by the experience of the social worker, the nature of their employment with the agency and the complexities of their caseload.

Supervision should include an opportunity for constructive feedback to both the supervisor and the supervisee. Emotive issues that arise should be handled in a sensitive manner to ensure that there are no blockages to good supervision practice guidelines.

Supervision sessions must be protected from workload constraints and interruptions and used as a structured space for the supervisee to be empowered to reflect on his/her practice.

10. Recording

Supervision must be recorded on Pact's Supervision Record Sheet (see Appendix 2) and copies of all records will be kept in 'Pact's Supervision File'. Supervisees may also choose to keep their own personal supervision file.

Details regarding responsibility for the recording of supervision will be agreed between the supervisor and the supervisee.

All notes of individual supervision sessions should be signed as agreed documents of each supervision sessions as soon as practically possible.

Where peer, group or joint supervision occurs, there should be clear arrangements for recording same and adding that record to the supervision file.

Personal information will only be recorded where it is causing concern regarding the individual's performance at work.

11. Training to support the supervision framework

The quality and impact of supervision is not only dependent on the mind-set of the parties

involved but also on the supervisor having appropriate competencies and experience. Supervisors can develop the relevant competence through avenues such as engagement in their own supervision, self-study and through training. This policy supports the provision of training and information for supervisors and supervisees, e.g. IASW, CORU, CIAA & the Wheel.

12. Student Supervision

Pact may offer professional social work students placement opportunities. All placements will be arranged together with the student's college practice tutor and will include a contract which identifies the students learning needs along with their supervision arrangements. It is the responsibility of the Pact Social Worker to ensure that supervision is provided for the student.

13. Confidentiality

Supervision sessions are in general confidential exchanges between supervisor and supervisee. However, the supervision record is an organisational document which may be seen by others eg audit, reviews of practice, inspection purposes, where there are grievances or disciplinary proceedings, without the consent of the persons involved.

Appendix 6



Complaints Policy & Procedure

Signed: *Claire Missen* Chairperson

Print Name: Claire Missen

Date: October 2023

Complaints Policy

Pursuant to Part 9, Child and Family Agency Act (2013)

For feedback and complaints regarding services provided as service provider for Tusla, and for all other feedback and complaints for services provided.

Overview

Pact is accredited by the Adoption Authority of Ireland under Section 4 (e., g., and f) of the Adoption Act 2010. Currently **Pact** is funded to undertake assessments for domestic and intercountry adoption allocated by Tusla Child and Family Agency.

Pact adopts as its policy and procedure, the "Tell Us" Feedback Policy and Procedure of Tusla and 'Your Service Your Say' Policy and Procedure of the HSE, with necessary changes which do not alter the meaning of the document. This is attached in full hereto and is the overarching policy document. This is to apply to all complaints, whether concerning **Pact** as a service provider to Tusla or otherwise and supersedes previous procedures. As regards any complaint concerning **Pact** as a service provider for Tusla, the Tusla policy has been in place since September 2016.

This policy is to apply to all complaints, whether concerning **Pact** as a service provider to Tusla or otherwise and supersedes previous procedures.

Below is a synopsis of the policy and procedure as approved by the Board of **Pact**, in line with Tusla policy, for complaints made to **Pact** as distinct to those made direct to Tusla.

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Introduction

Tusla - Child and Family Agency is the dedicated state agency responsible for improving wellbeing and outcomes for children. Consistent with its functions under the 'Child and Family Agency Act 2013' and national standards, the Agency has developed a national feedback and complaints policy called 'Tell Us'. This is an overarching policy and procedure which is supported by several guidance documents which are outlined in Appendix 1 to that policy.

Pact is a provider of services related to adoption and fostering, primarily assessment, both as a service provider within the meaning of the 2013 Act, and independently of Tusla.

This policy includes both feedback and complaints and deals with them separately as follows:

- Section 3 provides details on managing feedback about services provided by **Pact**
- Section 4 provides details on managing complaints from service users and non-service users negatively impacted by **Pact**.

All previous feedback and complaints policies and procedures operated by Tusla and **Pact** are replaced within **Pact** and Tusla by a new policy and procedure named 'Tell Us'.

Statutory Definitions:

Action means anything done or omitted to be done by:

- (a) the Agency or,
- (b) a service provider in connection with the provision of a service that is the subject of an arrangement under section 56 or 58 of the 2013 Act.

Close relative (in relation to another person,) means a person who is:

- (a) is a parent, guardian, son, daughter, spouse or civil partner within the meaning of the *Civil Partnership* and the *Certain Rights and Obligations of Cohabitants* 2010 Act of the other person or,
- (b) is cohabiting with the other person.

Complainant means a person who is entitled under section 61 to make a complaint under this Part on the person's own behalf or on behalf of another.

Complaint means a complaint made under this Part about any action of the Agency or a service provider in accordance with procedures established under section 64 (1)(a) that:

- (a) it is claimed does not accord with fair or sound administrative practice, and
- (b) adversely affects the person by whom or on whose behalf the complaint is made.

Complaints Officer means a person designated by:

- (a) **Pact** for the purpose of dealing with complaints made to it in accordance with procedures established under section 64 (1) (a) or,
- (b) a service provider for the purpose of dealing with complaints made to the service provider

in accordance with procedures established under section 64 (1)(a) or (2).

1.0 Policy Statement

It is important that **Pact** hears the experiences of those receiving **Pact** services and those who are affected by how **Pact** provides these services. Facilitating feedback and complaints allows **Pact** to hear these experiences.

Pact commits to learning from the information it receives through feedback and complaints and to use the learning to inform improvements in services. The emphasis of the policy is on resolution not blame.

Pact will:

- Give children, young people, and their families (and any other people affected by its services) the opportunity to express their views about such services in ways that are safe and inclusive
- facilitate children, young people, and their families (and any other people affected by its services) to express their views
- listen to these expressed views
- Act on these views as appropriate
- **Respond to those who give feedback or make complaints and keep them informed of action(s) taken by **Pact** in respect of their feedback or complaint.**

2.0 Roles and Responsibilities

The policy is for implementation by all staff and Board members in **Pact**.

Tusla Quality Assurance Directorate shall have oversight regarding the implementation and operation of this policy insofar as it relates to **Pact** acting as a service provider.

The **Pact** Complaints Officer shall be the person appointed by **Pact** from time to time. In the event of any conflict or other issue, the Chairperson, or a Director of the Board may take on that role, and the Board has overall oversight of the procedure.

3.0 Feedback

3.1 Definition

Feedback is information received by **Pact** from any person(s) about their experience of any aspect of services offered by **Pact**, or of how these services are provided. Feedback which is critical of **Pact** and requires a response is dealt with within the complaints section of this policy.

3.2 Principles

The following guiding principles underpin **Pact's** approach to receiving feedback:

- Feedback is as an essential part of **Pact's** ongoing learning and development
- Feedback will be used to inform decision-making and the planning, design, and delivery

of services as appropriate

- **Pact** will actively encourage feedback and take account, as appropriate, of any feedback received.
- **Pact** staff will actively support and assist people who wish to give feedback
- All individuals who provide feedback will be treated with dignity and respect.

3.3 Approach

Feedback will be accepted by **Pact** in the following ways:

- By phone: (01) 296 22 00
- In writing to: **Pact**, Arabella House, Unit 18. Block d, Nutgrove Office Park. D14.
- By email to: info@pact.ie.
- The Initial response to feedback received, will be provided by the point of contact who will forward it to the appropriate person(s)
- Feedback will be formally acknowledged within 10 working days where possible
- Feedback received in writing will be responded to in writing
- All feedback received, by whatever means, will be collated, analyzed, and used to inform service delivery as appropriate by **Pact**
- Local reports providing an analysis of feedback received will be forwarded to Quality Assurance Directorate as required.
- Publishing feedback submitted to Tusla is a matter for Tusla within its statutory framework.
- **Pact**, as a service provider to Tusla and in line with the requirements of its Service Level Agreement, will report to this agency as and when required.

4.0 Advocacy

All complainants have a right to appoint an advocate who, if a person is unable to make a complaint themselves, can assist them in making the complaint. The Citizen Information (Comhairle 2005) defines advocacy as a means of empowering people by supporting them to assert their views and claim their entitlements and where necessary, representing and negotiating on their behalf.

5.0 Complaints

5.1 Definition

A complaint is an expression of dissatisfaction by one or more members of the public about an organisation's action or lack of action, or about the standard of service provided by or on behalf of the organisation.

The 'Child and Family Agency Act 2013' established the right to make a complaint about any action or inaction on the part of Tusla (or a service provider acting on behalf of Tusla) that it is claimed does not accord with fair or sound administrative practice, and adversely affects the person making the complaint or on whose behalf the complaint is made.

Pact applies the same standards across all its services, whether to Tusla or otherwise.

An action by Tusla or **Pact**, does not represent fair or sound administrative practice if it is:

- Taken without proper permission or authority
- Taken for unnecessary reasons
- The result of negligence or carelessness
- Based on incorrect or incomplete information
- Discriminatory
- Based on undesirable administrative practices or in any other respect contrary to fair or sound administration.

5.2 Principles

The following principles underpin **Pact's** approach to receiving complaints:

- **Pact** will adhere to the legislative requirements under the 'Child and Family Agency Act 2013' and will also be guided by the Health Information and Quality Authority's national standards and the Office of the Ombudsman's 'Guide to Standards of Best Practice'
- Complaints are essential to the Agency's learning and development
- Complaints will be used to inform decision-making and the planning, design, and delivery of services as appropriate
- People who use **Pact's** services and those impacted by **Pact's** services are routinely reminded of this complaint process, and how to avail of it
- Staff will advise, actively support, and assist, as appropriate, those who wish to make a complaint to **Pact**
- **Pact** will resolve complaints as expeditiously as practicable and possible
- The complaints officer will receive adequate training to undertake the role
- All individuals making complaints will be treated with dignity and respect
- Making a complaint will not, in any way, adversely affect the service provided to the complainant.

5.3 Approach

Pact aims to resolve complaints promptly at local level without having to escalate the matter to a complaints officer.

Pact staff are expected to deal with complaints by either:

- Resolving the complaint, or
- Referring the complaint to the most appropriate person, or
- Forwarding the complaint to the complaints officer.

An initial acknowledgement of receipt of a complaint received verbally or by email, will be issued at the point of contact. Receipt of a written complaint will be acknowledged promptly.

All complaints will be notified to the complaints officer.

Any staff member(s) named in a complaint will be advised of the details of the complaint such as

they relate to her/him.

Formal acknowledgement of a complainant will be issued within 10 working days, subject to annual/other leave, and or other relevant factors which may present. Where complaints are provided in writing the acknowledgement will be issued in writing.

Where a complaint received by **Pact** cannot be resolved informally, (locally), it will be referred to the complaints officer for further action.

Complaints pertaining to child welfare and protection will be dealt with under *Pact's* Child Protection Policy and Procedure and Safeguarding Procedure.

Where a complaint indicates that the dignity of a **Pact** service user has been compromised by the behaviour of a staff member, the concern must be screened in accordance with the 'Trust in Care Policy', insofar as same relates to **Pact**.

5.4 Who may Complain?

Any child, young person, or adult, who is or has received a service, or who has sought a service from **Pact**, or persons, other than the above categories, who claim to be or to have been adversely affected by action or lack of action by **Pact**.

Pact cannot investigate third-party complaints without the consent of the person who it is claimed has been adversely affected.

If a person who is entitled to make a complaint lacks the capacity to do so or is unable to do so because of age, illness or disability, the complaint may be made on that person's behalf by:

- A close relative or carer of the person
- Any individual who, by law or by appointment of a court, has the care of the affairs of the person
- Any legal representative of the person
- Any other individual with the consent of the person.

Finally, if a person who would otherwise have been entitled to make a complaint is deceased, a complaint may be made on their behalf by any of the above categories of people.

Before acting upon a complaint, **Pact** must satisfy itself that the person making the complaint has the authority to do so.

5.5 How is a Complaint made?

A complaint can be made to **Pact** in the following ways:

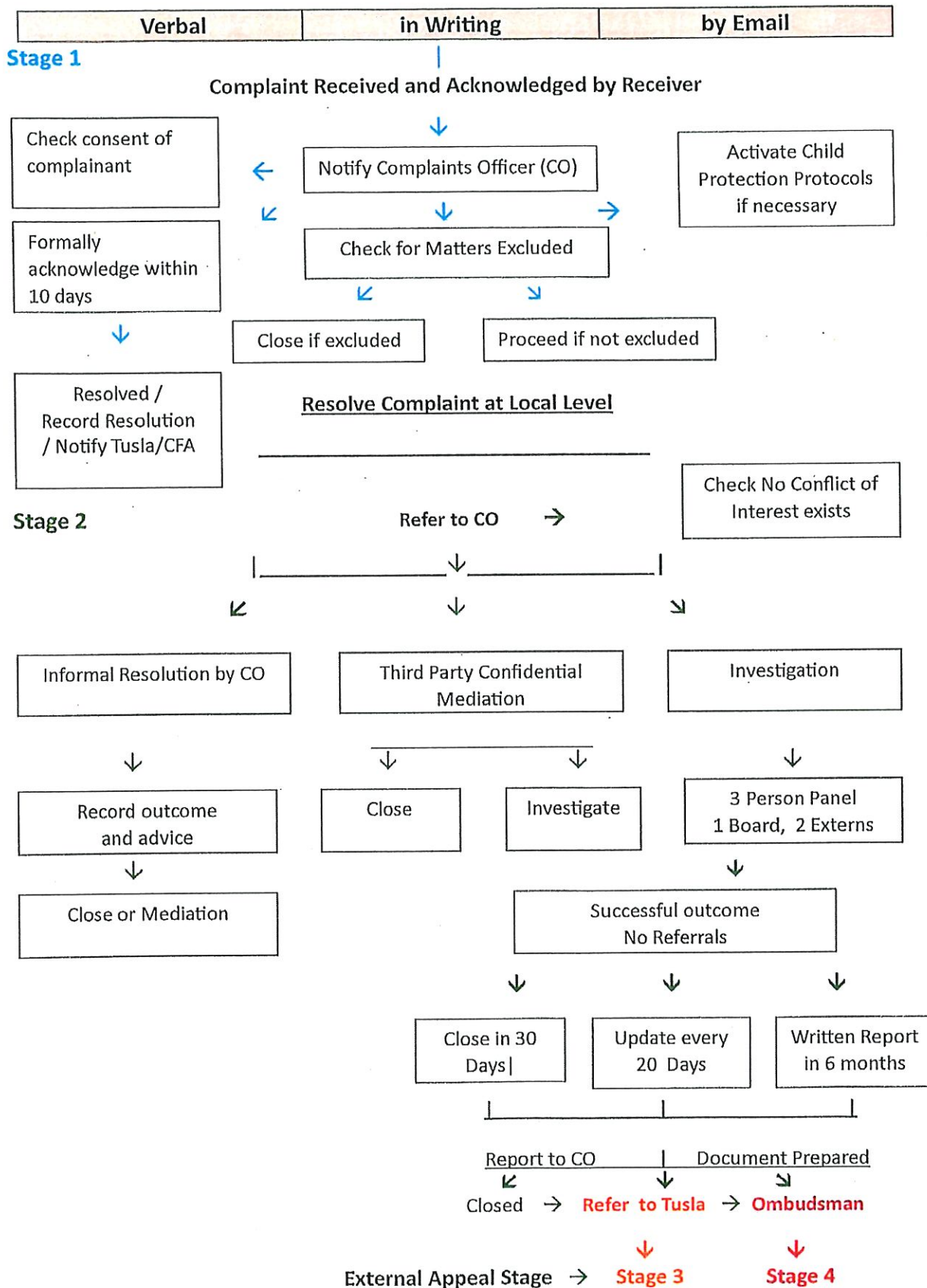
- Verbally, in person or by phone or,
- In writing to Arabella House, Unit 18, Block D, Nutgrove Office Pk. D14.
- By e-mail to info@pact.ie.

As regards services provided to Tusla, a complaint may be made to Tusla, via the Tusla feedback form, which is available online at:

www.tusla.ie/about/feedback-and-complaints or by email to: tellus@tusla.ie.

Any person who enquires about making a complaint to **Pact** or Tusla will be advised and assisted by staff, as appropriate.

Flow Chart - *Pact* Complaints' Policy 2023



D3 09/2023

5.6 Time Limits

A complaint must be made within 12 months of:

- The date of the action or inaction giving rise to the complaint or,
- The date of the complainant becoming aware of the action or inaction giving rise to the complaint.

A complaints officer may extend the time limit for making a complaint in special circumstances or if they deem it to be in the public interest to do so. Special circumstances include, but are not limited to, where the complainant is or has been unwell or bereaved, or where new information becomes available over time.

5.7 Matters Excluded

The 'Tell Us' Complaints policy/the 2013 Act excludes *Pact* from dealing with the following complaints:

- A matter that is or has been subject of legal proceedings before a court or tribunal
- A matter relating solely to the exercise of clinical judgement
- An action taken by *Pact* solely on the advice of a person exercising clinical judgement; (Clinical judgment means a decision made or opinion formed in connection with the diagnosis, care, or treatment of a patient ('Health Act 2004')).
- A matter relating to recruitment or appointments
- A matter relating to or affecting the terms or condition of a contract of employment
- A matter relating to the 'Social Welfare Act'.
- A matter that could be the subject of an appeal under Section 60 of the Civil Registration Act 2004
- A matter that could prejudice an investigation being undertaken by An Garda Síochána
- A matter that has been brought before any other complaint's procedure established by law
- A matter that gives rise to child protection or welfare concerns (these concerns must be referred to the area duty social work team).
- Anything affecting the rights, health, and finance of the public at large.

5.8 Anonymous complaints

In general *Pact* will not investigate anonymous complaints against a member of staff. However, such complaints will be passed on to the Complaints Officer who will consider whether a risk assessment is required.

Table 1

Detailed in this table are other complaints that do not fall within the remit of 'Tell Us' and must be referred to the appropriate personnel to be addressed using the relevant policy/procedure/guidelines/legislation.

Details of Complaint/Allegation	Policy, Procedure, Guidelines or
---------------------------------	----------------------------------

	Legislation to be followed.
Concerns in relation to the protection or welfare of a child	These concerns must be referred to the 'area-duty social work team,' to be dealt with in accordance with 'Children First' guidance.
<p>Allegations of abuse made against staff member(s)</p> <p>Professional misconduct and fitness to practice issues</p> <p>Complaints by staff of any inappropriate behaviour of other staff at work</p>	<p>Refer to line manager/head of discipline to deal with the complaint in line with some or, all of the following:</p> <p>'Trust in Care, Policy for Health Service Employers on Upholding the Dignity and Welfare of Patients/Clients and the Procedure for Managing Allegations of Abuse against Staff Members' (May 2005).</p> <p>Grievance and Disciplinary Procedures for the Health Service' (2004).</p> <ul style="list-style-type: none"> • 'Dignity at Work Policy for Health Services' (2004) • 'Health and Social Care Professionals Act 2005' • 'Nurses Act 1985'.
Complaints against the HR/recruitment process	<p>Refer to line manager / head of discipline / human resources to deal with the complaint in line with some or all the following:</p> <ul style="list-style-type: none"> • Dignity at Work Policy for Health Services' (2004) • 'Grievance and Disciplinary Procedures for the Health Service' (2004) • 'Code of Practice: Appointment to Positions in the Civil Service and Public Service' (2007).
Complaints about bullying and harassment against staff.	<p>Refer to line manager/head of discipline/human resources to deal with the complaint in line with some or all the following:</p> <ul style="list-style-type: none"> • 'Trust in Care, Policy for Health Service Employers on Upholding the Dignity and Welfare of Patients/ Clients • Procedure for Managing Allegations of Abuse against Staff Members' (May 2005); • 'Dignity at Work Policy for Health Services' (2004); • 'Grievance and Disciplinary Procedures for the Health Service' (2004).
Complaints in relation to requests made	'Freedom of Information Act 2014'

under the 'Freedom of Information Act 2014'	
Complaints in relation to breaches of data protection rights	Data Protection Acts 1988 and 2003

If a complaint falls into one of the categories outlined in Table 1, Tusla will, where appropriate, advise the complainant of the most appropriate authority to refer the issue to.

5.9 Unreasonable Complaint Behaviour

It is noted that in a minority of cases where **Pact** will take all reasonable measures to try to resolve a complaint through the complaint's procedure, the complainant does not accept these efforts. Where a complainant's behavior could be considered abusive, unreasonable, or vexatious, **Pact** will use the HSE Policy for Dealing with Vexatious Complaints.

<https://hse.ie/eng/about/qavd/complaints/ncglt/toolkit/reviewtolkit/vexatious.pdf>

The complainant must be notified of their right of Review to the National Advocacy Unit if they are not happy with the outcome of the complaint.

5.10: Stages of the Complaints Process

There are four stages to the complaints process:

Stage 1 - Local or point of contact resolution.

Stage 2 - Formal investigation process.

Stage 3 - Internal Review (Tusla only).

Stage 4 - External review. (Ombudsman).

A complaint may be resolved at any of the above stages. When a complainant is dissatisfied with the resolution being offered, it is the choice of the complainant whether he / she wishes to have their complaint processed to the next stage of the complaints process.

Stage 1: Local or Point of Contact Resolution

These are straightforward complaints which may be suitable for prompt management and to the service users' satisfaction at the point of contact. They may be dealt with by the Staff member or the appropriate person. Local resolution is the most proactive method way of dealing with complaints.

Pact staff must use this policy to try to resolve the issues raised by the complainant.

Individuals who make complaints should be advised that they have the right to have their complaint referred to the complaints officer for the service if they are not satisfied with the local resolution offered.

Some complainants may not choose to seek local resolution and may choose referral to the complaints officer. This will be supported.

The complaint and the proposed resolution will be recorded. If it involves **Pact** as a service provider, it will be notified to Tusla as appropriate.

Stage 2: Formal Investigation Process

Unresolved complaints at Stage 1 may need to be referred to a Complaints Officer. More serious or complex matters may need to be addressed immediately under Stage 2. There may be a need for investigation and action(s) as appropriate.

- The complaints officer will examine a complaint to decide if the matter complained about can be dealt with under this policy and procedure.
- Some complaints cannot be dealt with (see Section 4.7). In such cases the complaints officer will advise the complainant if there is an alternative process available to deal with the complaint matter.
- The complaints officer should advise the relevant manager of a complaint received and the nature of the complaint.
- The Complaints officer must consider his or her proximity to an issue complained about before starting an investigation. A complaints officer should not be involved in managing a complaint about a matter in which they have had either a direct or indirect involvement (in such circumstance the complaint must be passed on as provided for herein)
- All participants in the complaints process will be treated fairly
- The complaints officer will acknowledge receipt of the complaint to the complainant within ten (10), working days
- The complaints officer, if necessary, will clarify the exact nature of the complaint with the complainant. If the complaints officer identifies that the complainant needs support or assistance they will advise the complainant how this will be provided
- The complaints officer will maintain a record of all complaints received.

A complaints officer has several options for dealing with a complaint:

- Referral for local resolution (provided that this option has not been availed of previously)
- Informal resolution of the complaint
- Mediation
- Investigation.

The Complaints Officer must consider whether it would be practicable, having regard to the nature and the circumstance of the complaint, to seek the consent of the complainant and any other person to whom the complaint relates to finding an informal resolution of the complaint by the parties concerned.

Informal Resolution

Where local resolution is not an appropriate option to explore or has been unsuccessful, the complaints officer, with consent of the parties involved, may consider whether it would be practicable to proceed with an informal resolution of the complaint. Informal resolution is where the complaints officer engages actively with the complainant and or relevant staff, with a view to achieving an agreed resolution to the complaint issue(s).

The complaints officer will record the form of informal resolution offered, record the outcome and advise the appropriate line managers of same.

Where informal resolution was not successful, the complaints officer will either:

- Close the complaint and record the reason for doing so, or
- Initiate an alternative means of resolving the complaint such as mediation or investigation.

Mediation

The complaints officer may consider mediation as a means of achieving resolution, where both parties agree to the process. The decision to offer mediation is made by the complaints officer on a case-by-case basis.

Mediation is a process in which the parties to the complaint, with the assistance of a neutral and agreed third party (the mediator) to:

- Identify the issues
- Develop options
- Consider alternatives, and,
- Endeavour to reach an agreement.

The complaints officer will record the attempt at mediation, record the outcome and advise the appropriate line manager. However, the details of the mediation sessions remain confidential to the participants.

Where mediation is not successful, the complaints officer will either:

- close the complaint and record the reason for doing so, or
- initiate an investigation of the complaint.

Investigation

In situations where an investigation is required, it will be carried out within Thirty (30) working days of the decision to investigate. If this timeframe cannot be met, the complainant and staff members named in the complaint will be informed promptly, and provided with an update every 20 working days thereafter until the investigation is completed.

To facilitate any investigation, the complaints officer may seek reports, files or documents from the service involved. They may choose to interview staff members named in the complaint. The complaints officer may also interview or request reports from other employees or witnesses, as appropriate. They may request former staff to be interviewed when it is

considered appropriate to the investigation. The complaints officer may establish a Panel if, in the opinion of the complaints officer, such a team is warranted. The Panel will have three members, one appointed by the Board and two external members with appropriate expertise and skills.

The Complaints Officer/ Panel may also interview or request reports from other employees or witnesses, as appropriate. They may request former staff to be interviewed when it is considered appropriate to the investigation.

The Panel will report their findings to the Complaints Officer.

The investigation should be completed in a timely manner, which shall not normally exceed thirty (30), days. Where circumstances require an extended period to complete the investigation, the complainants will be advised of this within the 30-day period by the Complaints Officer.

The complaints officer must complete the investigation into a complaint as soon as practicable. If the investigation is not completed within six months of receipt of the complaint, the complaints officer must provide the complainant and the staff concerned with an explanation for the delay and outline a plan of action for completing the complaint investigation.

Following any investigation, the complaints officer will prepare a report which will include:

- Details of the complaint.
- Description of the complaint investigation process
- Response of the service and or staff members concerned
- Findings of the investigation:
 - Uphold the complaint, or
 - Uphold the complaint in part, or
 - Not uphold the complaint.
- Reasons for the findings
- Recommendations and the reasons for same.

All reports shall be compliant with data protection legislation.

When the investigation has been completed, either by the Complaints Officer or the Team, the Complaints Officer will inform, in writing, the complainants, the relevant Manager and staff members named in the complaint.

Copies of the recommendations will be sent by the complaints officer to the persons responsible for their implementation.

- The Complaints Officer will advise the complainant in writing of their right to have the recommendations of the complaint reviewed by the HSE or Tusla (in cases referable to the HSE or Tusla), and
- their right to refer the complaint to the Ombudsman or Ombudsman for Children.

If managers decide not to implement the recommendations of a complaint officer's report, they must advise the complainant and the complaints officer within thirty (30), working days of the reason for this decision. The complaints officer will keep a record of the findings and recommendations of all investigations.

The Complaints Officer is responsible for carrying out the formal investigation of the complaint at Stage 2. Staff have an obligation to participate and support the investigation of any complaint where requested.

At the end of the investigation, the Complaints Officer must draft a report of their investigation and give a copy of the report to the complainant, to the manager of the relevant service (Accountable Officer) and / or staff member that was the subject of the complaint.

The final report will include any recommendations needed to resolve the matter.

The complaints officer will invite everyone involved to contact them with questions about any issues and will advise the complainant of their right to a review of the recommendations made by the complaints officer.

Implementation of Recommendations made by Complaints Officers

- Within **30 working days** the relevant Head of Service will write to the Complainant and Complaints Officer detailing their *Recommendation Action Plan*.
- Where a recommendation the implementation of which would require or cause Tusla to make a material amendment to its approved service plan, the relevant Head of Service may amend or reject the recommendation.
- Where the recommendation is being amended or rejected or where alternative measures are being taken, the relevant Head of Service must give the reasons for their decisions.
- The relevant Head of Service must put an action plan in place for the implementation of the recommendations of the investigation. The action plan, persons responsible and timeframes are to be identified and recorded.
- Where a Complainant has requested a review of the outcome of the investigation, the relevant Head of Service will suspend the implementation of a recommendation and will notify the Complainant of this suspension.
- If after a period, recommendations made are not implemented and the Complainant is dissatisfied, they should be advised to contact the relevant HSE or Tusla office.
- Where no **Recommendation Action Plan** is forthcoming from the relevant Head of Service, the Complaints Officer must follow up.

Where the investigation at Stage 2 fails to resolve, the complainant may seek a review of their complaint from the Review at Stage 3 or the complainant may seek an independent review of their complaint from, for example, the Ombudsman/Ombudsman for Children.

Stage 3: Review

These are complaints where the Complainant is dissatisfied with the outcome of the complaint investigation at Stage 2. A request for a review must be made within 30 days of the investigation report being sent.

As a small agency, **Pact** does not have the capacity to undertake their own reviews. The Complaints manager will link with Tusla to identify an appropriate person. Clear details as to whom a complainant may apply to for a complaint review will be outlined within the complaint letter being sent out by the Complaints Officer.

The complainant may also choose to go directly to the Office of the Ombudsman, Ombudsman for Children, or other professional bodies to whom the complainant could make an application for review.

The Review Officer's function is to:

- Determine the appropriateness of a recommendation made by the Complaints Officer, having regard to the two elements:
- All aspects of the complaint
- The investigation of the complaint

Having determined the appropriateness of the recommendation to uphold it, vary it, or make a new recommendation if he/she considers it appropriate to do so.

Implementation of Recommendations made by Review Officers

Within **30 working days** the Review Officer will write to the Complainant and the Relevant person in **Pact**, detailing recommendation.

- Where a recommendation, the implementation of which would require or cause the Executive to make a material amendment to its approved service plan, the relevant Head of Service may amend or reject the recommendation.
- Where the recommendation is being amended or rejected or where alternative measures are being taken, the relevant Head of Service must give the reasons for their decisions.
- The relevant Head of Service must put an action plan in place for the implementation of the recommendations of the investigation. The action plan, persons responsible and timeframes are to be identified and recorded.

Stage 4: Independent Review

If the complainant is not satisfied with the outcome of the complaint's management process, he/she may seek a review of the complaint by the Ombudsman/ Ombudsman for Children.

The complainant must be informed of their right to seek an independent review from the Ombudsman/Ombudsman for Children at any stage of the complaint management process.

Apologies and Redress

Apologies

Where a complaints officer (or a review officer as appropriate) recommends that Tusla or **Pact** considers offering an apology to the complainant, the decision about this apology will be made by a person at service director level or equivalent or above.

Redress

Where a complaints officer (or a review officer as appropriate) recommends that **Pact** or Tusla considers offering redress to a complainant, decisions regarding the nature and extent of the redress can only be made by a person at Board level or equivalent or above.

Complaints made against Tusla Staff Members

All complaints against Tusla Staff members are dealt with through the process outlined in this Tusla 'Feedback and Complaints Policy'.

Complaints made against non-Staff Members

Complaints can be made to Tusla against persons who currently provide, or who have provided, services on behalf of Tusla, whose members of staff who are not; for example, students, foster carers agency staff, former staff, etc.

All complaints are dealt with through the process outlined in the Tusla 'Feedback and Complaints Policy'.

Funded Agencies

A service provider (**Pact**) funded by Tusla to provide services on its behalf may, with the agreement of Tusla, establish procedures for dealing with complaints against the service provider, in place of the procedures established under this policy. The complaints policies of all such agencies providing services on behalf of Tusla must be agreed by Tusla. The manager responsible for commissioning the service is responsible for ensuring that the funded agency's policy is in line with that of Tusla. All funded agencies must report annually as per the 'Child and Family Agency Act 2013' regarding their complaints concerning services provided on behalf of Tusla.

Staff Training

Pact will identify and provide appropriate training with Tusla.

Publishing Complaints Information

Pact will report as required by Tusla. The current requirement for reporting complaints information is annually.

Appendices

As per Tusla Policy document attached.

Appendix: Tusla "Tell Us" "Feedback and Complaints: Policy and Procedure"

Appendix Seven

NATIONAL CONTACTS FOR CHILD AND FAMILY AGENCY, TUSLA

These contacts are listed on <http://www.tusla.ie/services/child-protection-welfare/contact-a-social-worker>.

These contact numbers may be updated from time to time. Please check www.tusla.ie for latest information.

Dublin Duty Social Work Teams

Swords

Address	Duty Social Work Department, 180-189 Lakeshore Drive, Airside Business Park, Swords, Co. Dublin.
Phone	01 8708000
Office Hours	9am - 5pm
Local Area Office	Dublin North

Blanchardstown

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Address	Duty Social Work Department, Roselawn Health Centre, Roselawn Rd, Blanchardstown, Dublin 15.
Phone	01 6464518
Office Hours	9am - 5pm

Local Area Office	Dublin North
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Coolock

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Address	Duty Social Work Department , Health Centre, Cromcastle Rd, Coolock, Dublin 5.
Phone	01 8164200 01 8160314
Office Hours	9am - 5pm
Local Area Office	Dublin North

Finglas

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Address	Duty Social Work Department, Health Centre, Wellmount Park, Finglas, Dublin 11.
Phone	01 8567704
Office Hours	9am - 5pm
Local Area Office	Dublin North City

North Inner City

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Address	Duty Social Work Department, 492 North Circular Rd, Parkview, Dublin 1.
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Phone	01 8566856
Office Hours	9am - 5pm
Local Area Office	Dublin North City

Tallaght

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Address	Duty Social Work Department, Chamber House, Chamber Square, Tallaght, Dublin 24.
Phone	01 4686289
Office Hours	9am - 5pm
Local Area Office	Dublin South West, Kildare, West Wicklow

Lord Edward Street

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Address	Duty Social Work Department, Carnegie Centre, 21-25 Lord Edward Street, Dublin 2
Phone	01 6486500
Office Hours	9am - 5pm
Local Area Office	Dublin South Central

Ballyfermot

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Address	Duty Social Work Department, Bridge House, Cherry Orchard Hospital, Ballyfermot, Dublin 10.
Phone	01 6206387
Office Hours	9am - 5pm
Local Area Office	Dublin South Central

Dun Laoghaire

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Address	Duty Social Work Department, Our Ladys Clinic, Patrick Street, Dun Laoghaire, Co. Dublin.
Phone	01 6637300
Office Hours	9am - 5pm
Local Area Office	Dublin South East

Wicklow Duty Social Work Team

Address	Child and Family Protection Service, Glenside Health Centre, Glenside Rd, Wicklow Town,
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	Co. Wicklow.
Phone	0404 60800
Office Hours	9am - 5pm

Kildare Duty Social Work Team

Address	Child and Family Agency, Social Work Department, St. Marys, Craddockstown Rd, Naas, Co. Kildare.
Phone	045 882400
Office Hours	9am - 5pm

Cavan Duty Social Work Team

Address	Child and Family Agency , Drumalee Cross, Co. Cavan.
Phone	049 4377305 049 4377306

Office Hours

9:30am - 5pm

Appendix Eight
GARDA STATIONS, DUBLIN

<p><u>Ballyfermot Garda Station</u> Phone number: 01 – 6667200 District: Ballyfermot:</p>	<ul style="list-style-type: none"> • <u>Coolock Garda Station</u> Phone number: 01 - 6664200 District: Coolock
<ul style="list-style-type: none"> • <u>Ballymun Garda Station</u> Phone number: 01 - 6664400 District: Santry 	<ul style="list-style-type: none"> • <u>Crumlin Garda Station</u> Phone number: 01 - 6666200 District: Crumlin
<ul style="list-style-type: none"> • <u>Blackrock Garda Station</u> Phone number: 01 - 6665200 District: Blackrock 	<ul style="list-style-type: none"> • <u>Dalkey Garda Station</u> Phone number: 01 - 6665450 District: Dun Laoghaire
<ul style="list-style-type: none"> • <u>Blanchardstown Garda Station</u> Phone number: 01 - 6667000 District: Blanchardstown 	<ul style="list-style-type: none"> • <u>Donnybrook Garda Station</u> Phone number: 01 - 6669200 District: Donnybrook
<ul style="list-style-type: none"> • <u>Bray Garda Station</u> Phone number: 01 - 6665300 District: Bray 	<ul style="list-style-type: none"> • <u>Dublin Airport Garda Station</u> Phone number: 01 - 6664950 District: Santry
<ul style="list-style-type: none"> • <u>Bridewell Garda Station</u> Phone number: 01 - 6668200 District: Bridewell 	<ul style="list-style-type: none"> • <u>Dun Laoghaire Garda Station</u> Phone number: 01 - 6665000 District: Dun Laoghaire
<ul style="list-style-type: none"> • <u>Cabinteely Garda Station</u> Phone number: 01 - 6665400 District: Dun Laoghaire 	<ul style="list-style-type: none"> • <u>Dundrum Garda Station</u> Phone number: 01 - 6665600 District: Blackrock
<ul style="list-style-type: none"> • <u>Cabra Garda Station</u> Phone number: 01 - 6667400 District: Blanchardstown 	<ul style="list-style-type: none"> • <u>Enniskerry Garda Station</u> Phone number: 01 - 6665750 District: Bray
<ul style="list-style-type: none"> • <u>Clondalkin Garda Station</u> Phone number: 01 - 6667600 District: Ballyfermot 	<ul style="list-style-type: none"> • <u>Finglas Garda Station</u> Phone number: 01 - 6667500 District: Blanchardstown
<ul style="list-style-type: none"> • <u>Clontarf Garda Station</u> Phone number: 01 - 6664800 District: Raheny 	<ul style="list-style-type: none"> • <u>Greystones Garda Station</u> Phone number: 01 - 6665800 District: Bray
<ul style="list-style-type: none"> • <u>Harcourt Terrace Garda Station</u> Phone number: 01 - 6669500 District: Pearse Street 	<ul style="list-style-type: none"> • <u>Rathcoole Garda Station</u> Phone number: 01 - 6667900 District: Ballyfermot
<ul style="list-style-type: none"> • <u>Howth Garda Station</u> Phone number: 01 - 6664900 	<ul style="list-style-type: none"> • <u>Rathfarnham Garda Station</u> Phone number: 01 - 6666500

District: Raheny	District: Tallaght
<ul style="list-style-type: none"> • <u>Irishtown Garda Station</u> Phone number: 01 - 6669600 District: Donnybrook 	<ul style="list-style-type: none"> • <u>Rathmines Garda Station</u> Phone number: 01 - 6666700 District: Rathmines
<ul style="list-style-type: none"> • <u>Kevin Street Garda Station</u> Phone number: 01 - 6669400 District: Kevin Street 	<ul style="list-style-type: none"> • <u>Ronanstown Garda Station</u> Phone number: 01 - 6667700 District: Lucan
<ul style="list-style-type: none"> • <u>Kill-O-Grange Garda Station</u> Phone number: 01 - 6665500 District: Dun Laoghaire 	<ul style="list-style-type: none"> • <u>Rush Garda Station</u> Phone number: 01-84 37202 District: Balbriggan
<ul style="list-style-type: none"> • <u>Kilmainham Garda Station</u> Phone number: 01 - 6669700 District: Kevin Street 	<ul style="list-style-type: none"> • <u>Shankill Garda Station</u> Phone number: 01 - 6665900 District: Bray
<ul style="list-style-type: none"> • <u>Leixlip Garda Station</u> Phone number: 01 - 6667800 District: Lucan 	<ul style="list-style-type: none"> • <u>Skerries Garda Station</u> Phone Number: 01 - 8491211 District: Ballbriggan
<ul style="list-style-type: none"> • <u>Malahide Garda Station</u> • Phone number: 01 - 6664600 District: Coolock 	<ul style="list-style-type: none"> • <u>Stepaside Garda Station</u> Phone number: 01 - 6665700 District: Blackrock
<ul style="list-style-type: none"> • <u>Mountjoy Garda Station</u> Phone number: 01 - 6668600 District: Mountjoy 	<ul style="list-style-type: none"> • <u>Store Street Garda Station</u> Phone number: 01 - 6668000 District: Store Street
<ul style="list-style-type: none"> • <u>Pearse Street Garda Station</u> Phone number: 01 - 6669000 District: Pearse Street 	<ul style="list-style-type: none"> • <u>Sundrive Road Garda Station</u> Phone number: 01 - 6666600 District: Crumlin
<ul style="list-style-type: none"> • <u>Raheny Garda Station</u> Phone number: 01 - 6664300 District: Raheny 	<ul style="list-style-type: none"> • <u>Swords Garda Station</u> Phone number: 01 - 6664700 District: Coolock
<ul style="list-style-type: none"> • <u>Tallaght Garda Station</u> Phone number: 01 - 6666000 District: Tallaght 	<ul style="list-style-type: none"> • <u>Terenure Garda Station</u> Phone number: 01 - 6666400 District: Rathmines

Garda Stations in County Wicklow

<ul style="list-style-type: none"> • Arklow Garda Station • Arklow Tel: 0402 32304 	<ul style="list-style-type: none"> • Carnew Garda Station • Carnew Tel: 053 942 6102
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<ul style="list-style-type: none"> • Ashford Garda Station • Ashford Tel: 0404 40212 	<ul style="list-style-type: none"> • Donard Garda Station • Donard Tel: 045 404 612
<ul style="list-style-type: none"> • Aughrim Garda Station • Aughrim Tel: 0402 36142 	<ul style="list-style-type: none"> • Dunlavin Garda Station • Dunlavin Tel: 045 401 211
<ul style="list-style-type: none"> • Avoca Garda Station • Avoca Tel: 0402 35102 	<ul style="list-style-type: none"> • Enniskerry Garda Station • Church Hill Enniskerry Tel: 01 666 5750
<ul style="list-style-type: none"> • Baltinglass Garda Station • Baltinglass Tel: 059 648 1022 	<ul style="list-style-type: none"> • Greystones Garda Station • Marine Terrace Greystones Tel: 01 666 5800
<ul style="list-style-type: none"> • Blessington Garda Station • Blessington Tel: 045 865 202 	<ul style="list-style-type: none"> • Hollywood Garda Station • Hollywood Tel: 045 864 172
<ul style="list-style-type: none"> • Bray Garda Station • Convent Avenue Bray Tel: 01 666 5300 	<ul style="list-style-type: none"> • Newtownmountkennedy Garda Station • Newtownmountkennedy Tel: 01 281 9222
<ul style="list-style-type: none"> • Rathdrum Garda Station • Rathdrum Tel: 0404 46206 	<ul style="list-style-type: none"> • Tinahely Garda Station • Tinahely Tel: 0402 38102
<ul style="list-style-type: none"> • Roundwood Garda Station • Roundwood Tel: 01 281 8142 	<ul style="list-style-type: none"> • Wicklow Garda Station • Wicklow Tel: 0404 671
<ul style="list-style-type: none"> • Shillelagh Garda Station • Shillelagh Tel: 053 942 9102 	

For all other areas please refer to the Garda website at www.garda.ie/stations

Appendix Nine

Mandatory reporting.

Designated Liaison Officer. PSW

Deputy Designated Liaison Officer: N/A.

Following the commencement of the Children's Act 2015 and with effect from 11.12.2017, certain persons must report suspected child abuse to Tusla, Child and Family Agency. The Act sets out a list of Mandated Persons and from a PACT perspective this includes all directors, employees, including ad hoc social workers, volunteers, students, foster carers and any other person involved in the provision of PACT services.

Mandated persons are required to make a report to Tusla C&FA when;

- a. You know, believe or have reasonable grounds to suspect that a child has been harmed / is being harmed /or is at risk of being harmed. You may have knowledge, or a suspicion based on information you have received or become aware of through your employment / student placement / volunteering with PACT / profession or through the provision of foster care to a child or children.
- b. A child discloses to you during your employment / student placement / volunteering with PACT or through the provision of foster care, that they have been, is being or at risk of being harmed.

Mandated assistance may follow where an individual makes a report to Tusla and is subsequently required to assist in assessing whether the child has been harmed. While the individual assisting is protected from civil liability, a fine or imprisonment up to six months may be applied if that person discloses any information shared by Tusla to a third party without Tusla's written consent. (Mandatory Assisting Protocol Appendix 1)

PACT, through mandated assistance, undertakes to assist Tusla if requested in assessing whether the child has been harmed. Harmed in this context means assault, ill treatment or neglect of a child in a manner that seriously affects or is likely to affect the child's health, development or welfare. Harm also includes the sexual abuse of a child.

PACT undertakes to report information received or that it has become aware of after 11.12.2017 whether the harm occurred prior to or after that date.

However, no report to Tusla is required where

- a. The only basis for your knowledge or belief is because of information received from another mandated person and a report has already been made to Tusla in respect of that child.
- b. You know or believe that a child between the ages of 15 – 17 is engaged in sexual activity with a person not more than two years older than them and where there is
 - . no material difference in maturity or capacity
 - . there is no intimidation or exploitation between the parties
 - . the child concerned does not want it reported to Tusla.

Where this situation arises PACT will seek legal advice on reporting obligations considering other legislation such as the Criminal Justice (Withholding of Information Act) 2012. The reporting obligations under this Act are in addition to the obligation under the Children First Act 2015.

How to make a report.

Where possible inform either the DLO or Deputy DLO who will either assist you or make the report as required. A report must be made to Tusla as soon as practicable using the relevant form.

Where you believe a child is at risk of immediate harm and should be moved to a place of safety it is not necessary to use the mandated report form for the initial report. However this form must be submitted within three days of making the initial report.

Consequences of not reporting.

Although no legal consequences follow from a failure to make a mandatory report, Tusla may make a complaint to CORU and may provide information on a failure to make a mandatory report to the Garda Vetting Bureau which could be disclosed when an individual is being vetted.