

THE HAZELTON CLINIC'S CHILD PROTECTION POLICY

The aim of this policy document is to create a safe working environment as well as to ensure that we behave in an ethical manner in terms of professional practice.

It is by no means a complete document and will be updated accordingly.

In joining the team of Counsellors/Psychotherapists/Psychologists, hereafter called practitioners, practitioners agree to comply with the provisions of our policies and procedures regarding child protection.

Child Care Protection

The Cork Counselling Centre at the Hazelton Clinic has three priorities in relation to Child Protection:

- 1. To protect the children in our care
- 2. To prevent abusers gaining access to the children in our care
- 3. To protect our panel of counsellors/psychotherapists/psychologists when working with children.

A child is anyone under the age of eighteen years.

Like all other citizens, practitioners are subject to the law, and their practice must conform to the law. Therefore in putting together this policy we consulted the current UN Children's Convention on the Rights of the Child 1992. We also consulted The Child Care Act 2022, Youth Work Act 2002, the HSE Trust in Care Policy 2005 and The Children's First Handbook.

What is Child Abuse?

Child Abuse is defined as 'Harming children by indirect act or failure to provide proper care or both'.

Types of Abuse

<u>Physical Abuse:</u> any form of non-accidental injury, which results from wilful or neglectful failure to protect a child

<u>Sexual Abuse:</u> When a child is used by another person for his or her gratification or sexual arousal, or that of another person. (para 3.2.1; 3.3.1; 3.4.1; 3.5.1)

<u>Emotional Abuse:</u> When a child's need for affection, approval, consistency and security are not met. Emotional abuse is normally to be found in the relationship between caregiver and a child.

<u>Neglect</u>: An omission, where the child suffers harm or impairment of development by being deprived of food, clothing, warmth, hygiene, intellectual stimulation, supervision and safety, attachment to and affection from adults or medical care.



<u>Bullying</u>: Defined as unwanted negative behaviour, verbal, psychological or physical conducted by an individual or group against another person (or persons) and which is repeated over time. (Anti-Bullying Procedures for Primary and Post-Primary Schools, September 2013)

Significant Harm

As defined in the Children First Act, 2015, "harm" means, in relation to a child

(a) Assault, ill-treatment, or neglect of the child in a manner that seriously affects or is likely to seriously affect the child's health, development, or welfare, or

(b) Sexual abuse of the child, whether caused by a single act, omission or circumstance or a series or combination of acts, omissions, or circumstances, or otherwise.

Indicators of Neglect

<u>Physical Indicators</u> Constant Hunger Lack of supervision and being exposed to danger Inadequate/inappropriate clothing Poor Hygiene/ untreated illnesses Abuse is manifested in *passivity* and omission

Behavioural Indicators Tiredness, Listlessness Lack of peer relationships Low self-esteem Compulsive stealing/ begging

Indicators of Emotional & Psychological Abuse

<u>Physical Indicators</u> Sudden speech disorders Wetting/soiling Signs of mutilation Frequent vomiting

<u>Behavioural Indicators</u> Rocking, thumb sucking Poor peer relationships Chronic runaway Attention-seeking behaviours

Indicators of Physical Abuse

<u>Physical Indicators</u> Scratches/ Bites/Welts Bruises in awkward places

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Burns, especially from cigarettes Untreated injuries

<u>Behavioural Indicators</u> Self-mutilation Withdrawn/aggressive Chronic runaway Undue fear/watchfulness of adults

Indicators of Sexual Abuse

<u>Physical Indicators</u> Bleeding in genital/anal areas Itching/soreness in genitals Stomach pains/headache Pain on urination Difficulty in walking/sitting Bruises on inner thighs Anorexic/bulimic

<u>Behavioural Indicators</u> Chronic depression Inappropriate language Making sexual advances to others Low self-esteem Afraid of dark Wariness Substance/drug abuse

Remember to exercise caution, seek advice and use sound judgment before taking action. Even for professionals and experts it is very difficult to decide if a child has been abused.

Privacy & Confidentiality

Discuss the limits of confidentiality with the client at the time of initial contracting as outlined on the Hazelton Clinic's initial assessment sheet.

Store, handle, transfer and dispose of all records in a way that safeguards the client's right to privacy.

Informed Consent

The practitioner is not to act on behalf of their clients. If they do, they shall ensure that the client consents in advance to any proposed action.

Procedure for Reporting Suspected Cases of Child/Vulnerable Adult Abuse

A suspicion, which is not supported by any objective signs of abuse, would not constitute a reasonable suspicion, or reasonable grounds for concern.



If a client refrains from reporting abuse their wishes must be respected in spite of the ethical dilemma it may raise for the practitioner.

Upholding the client's right to confidentiality is a core principle of the service delivery of the Hazelton Clinic but in certain cases it may be necessary for the practitioner to override the wishes of the client:

- Where there is immediate or serious risk to the client(s).
- Where serious risk to others is suspected from the client or others in their situation.

Practitioners should take the following steps if a child or vulnerable adult abuse is suspected or alleged:

- 1. NB: Client's permission and consent will be sought before disclosure except in cases where such action would result in further risk.
- 2. All disclosures or observations of abuse will be reported verbally to the Hazelton Clinic's Manager and recorded in the client's file along with any actions required/taken.
- 3. All decisions with regard to external reporting of disclosures and observations will first be discussed with the clinic's manager who will get in touch with Tusla to tease out the concern.
- 4. An internal report for submission to Tusla should be written up following the guidelines below and given to the manager. The submission of the report needs to be made in person either by phone or in writing. Each Health Service has a Duty Social Worker that is available to meet with or talk on the telephone to person's wishing to report child protection concerns (A list of local contact numbers is available at this document). It is the responsibility of the Social Worker on duty to investigate the situation and take action if necessary.
- 5. It is generally most helpful if the person who first witnessed or suspected the alleged child abuse makes personal contact with the duty social worker.
- 6. The Gardai also have a statutory role in the protection of children. In the event of an emergency or non-availability of Tusla staff, a report may be made to An Garda Siochana at any Garda Station.

Requirements needed in making an Internal Report:

- i. Names and addresses of the child, parents, carers and any other children in the family.
- ii. Name and address of the person alleged to be causing harm to the child.
- iii. A full account of the current concern about the child's welfare or safety
- iv. The source of any information which is being discussed with the health board
- v. Dates of any incidents being reported
- vi. Circumstances in which the incident or concern arose
- vii. Any explanation offered for the risk, injury or concern
- viii. The child's own statement if relevant
- ix. Any other relevant information about the family
- x. Any factors relating to the family which could be considered supportive or protective
- xi. Name of the child's school
- xii. Name of the child's general practitioner
- xiii. Reporters own involvement with the child an parents/carers
- xiv. Details of any action already taken in relation to the child's safety
- xv. Names and addresses of any agency or key person involved with the family



xvi. Identity of the person reporting, including name, address, telephone number, occupation and relationship with the family.

Protection for Persons Reporting Abuse:

The 'Protection for Persons Reporting Abuse Act 1998' makes provision for the protection from civil liability of persons who have reported child abuse 'reasonable and in good faith'. This protection applies to organizations as well as individuals.

Details of your local Community Care Social Work Team:

Tusla:	021 492 3535
South Lee:	021 492 3001
North Lee:	021 492 7000
North Cork:	022 541 00
West Cork:	028 404 47
Kerry:	064 667 8065

Some other useful Telephone Numbers:

Childline: 1800 666 666 ISPCC (Irish Society for the Prevention of Cruelty to Children): 021 450 9588 The Cari Foundation: 0818 924 567

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