

# **Southside Playball**

## **CHILD PROTECTION AND WELFARE POLICY**

**December 2015**

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## Introduction

Southside Playball brings Multi Sport Programmes to Schools in South County Dublin and Wicklow. Southside Playball organise two ranges of classes, (a) during school hours as PE instructors; and (b) when school is over, a comprehensive, age appropriate set of After School classes to appeal to every child from Junior Infants to sixth class. Southside Playball also organise and run Multi-Sport Camps during the mid-term and summer holidays. The classes and camps are very popular due to the fact that all our coaches have enjoyed sport from a young age and want to encourage and nurture children to do the same.

Southside Playball enter children in the Leinster hockey and soccer leagues, playing against other schools and learning how to win and sometimes more importantly, how to lose. The coaches nurture the children so they can learn how to be part of a team, to be inclusive, to learn who they are and how they might react in certain situations, and show children that everyone has a place in sporting life.

Southside Playball wants to ensure that we follow the best practice and guidance laid out in Children First: National Guidance for the Protection and Welfare of Children (2011) and The Irish Sports Council's Code of Ethics and Good Practice for Children's Sport.

The Child Protection and Welfare Policy outline procedures to help coaches to ensure the safety of the children, and their own safety, as they participate in the Southside Playball activities.

It also aims to provide coaches with the information needed to identify abuse and equip them to provide support and assistance to any child who may be experiencing any welfare issues or abuse.

## Glossary

**Child**

For the purposes of this policy, a 'child' means anyone who is under 18 years of age. In Ireland, the Child Care Act (1991) defines a child as any person under the age of 18 years, excluding a person who is or who has been married.

**Statutory Authorities**

These are An Garda Síochana and Child and Family Agency (Túsla). They are obliged under the law to investigate and assess in child abuse cases.

## **Policy statement**

Southside Playball are committed to a child-centred approach to our work with children. We undertake to provide a safe environment and experience where the welfare of the child is paramount.

Southside Playball adhere to the recommendations of The Irish Sports Council's Code of Ethics and Good Practice for Children's Sport and in Children First: National Guidance for the Protection and Welfare of Children 2011.

This policy covers the after school activities organised by Southside Playball and the camps organised by Southside Playball. The work undertaken in schools by Southside Playball as part of the school curriculum will be covered by the schools' own Child Protection policy and procedures.

We have implemented procedures covering:

- Code of behaviour for all coaches and for children
- Reporting of suspected or disclosed abuse
- Confidentiality
- Recruitment and selecting coaches
- Managing and supervising coaches
- Allegations against coaches and children
- Complaints
- Incidents and accidents.

This policy will be reviewed biennially by the Administrative Officer to ensure fitness for purpose and best practice is taken into account as it emerges.

## **Recruitment Procedures**

Southside Playball shall take all reasonable steps to ensure that all coaching staff are carefully selected using the following procedure, trained and supervised to provide a safe environment for all children taking part in our activities.

### **PROCEDURE**

#### *Advertisement*

Vacancies for coaches are advertised through contacts in sporting clubs and sporting organisations so that interested and qualified applicants may apply.

#### *Application and Declaration:*

All applicants will be requested to complete an application form (See Appendix 5) which includes a declaration stating that there is no reason why they would be unsuitable to work with children. All applicants are required to have a Hockey Coaching Level 1 Qualification.

#### *Identification:*

The applicant coaches should be asked to bring along to their interview a copy of the driver's licence or passport to confirm identity.

#### *Interview:*

The applicant coaches are formally interviewed by the Owner or Manager of Southside Playball.

During the interview applicants are assessed on the individual's knowledge of working with young children and their knowledge of child protection issues, their commitment to good practice and their ability to communicate with children and on their patience, care and understanding when dealing with children.

#### *Vetting:*

All coaches are Garda vetted by Dun Laoghaire Rathdown Volunteer Centre who provides Southside Playball with a full disclosure of information provided by the National Vetting Bureau.

#### *References:*

The Administrative Officer seeks two written references (see Appendix 6) from the referees provided by the applicant. One of these will be followed up with a telephone call to confirm the information provided.

#### *Appointment:*

The Director and Manager of Southside Playball will assess the information received through the application form, interview, references and the Garda Vetting before deciding whether to ratify the appointment of a new coach.

#### *Induction and Probationary Period:*

All coaches are allocated classes on the basis of continued good performance.

New coaches receive introductory training with the Director.

Each coach undertakes their own individual continuous professional development.

All Coaches must complete the Basic Awareness Child Protection training course organised by Southside Playball.

### **Supervision, support and training of coaches**

Southside Playball fosters a good working environment for all coaches which ensures all coaches have a number of support systems in place. These support systems include mentoring and support from fellow coaches, administrative support from the office and support, advice and assistance from the Director.

# Code of Behaviour

## Code of Behaviour for Coaches

Coaches should have as their first priority the children's safety and enjoyment of the sport they are participating in. It is important that Coaches should follow the code of conduct to ensure the children's and their own safety.

Southside Playball coaches should:

- Act as a role model (disciplined / committed / time keeping). Remember children learn by example.
- Encourage and be positive during sessions so that the children leave with a sense of achievement.
- Set challenging, realistic but achievable goals.
- Plan and prepare each session appropriately and ensure proper levels of supervision.
- Ensure that all activities are inclusive and allow all children to participate in an enjoyable way.
- Put the welfare and enjoyment of children first and strike a balance between this and winning or achieving results.
- Treat each player equally, with dignity and respect and ensure that all children play within the rules of the game.
- Be aware of the developmental stages and needs of players
- Actively encourage all children not to discriminate on the grounds of religious belief, race, gender, social classes or lack of ability.
- Encourage children to respect and accept the judgement of match officials.
- Challenge bullying in any form.
- Report accidents or incidents of alleged abuse to the Administrator in line with the Child Protection policy.
- Administer first aid in the presence of others.
- Maintain confidentiality about sensitive information.
- Refrain from smoking and consumption of alcohol before and during coaching sessions.
- Never ask anyone to keep secrets of any kind.
- Protect yourself from false accusations by:
  - Not spending excessive amounts of time alone with children away from others
  - Not taking children alone in a car journeys, however short.
  - Never taking children to their home.
  - Not administering first aid involving removing of children's clothing unless in the presence of others.

Coaches should not:

- Encourage or threaten a player by deed or gesture to act in any unacceptable way towards an opponent or official.
- Allow rough or dangerous play, bullying, or the use of bad language or inappropriate behaviour.
- Let any allegations of abuse of any kind go unchallenged or unrecorded if appropriate. Incidents and accidents to be recorded in the incident/accident book. Parents will be informed at earliest possible time, unless doing so would endanger the safety of the child.

Coaches should **never**:

- Engage in rough physical or sexually provocative games, including horseplay
- Share a changing room or bath or shower with a child
- Allow or engage in any form of inappropriate touching
- Use foul language or provocative language/gestures to a child, opponent, or match official.
- Allow children to use foul, sexualised or discriminatory language unchallenged
- Make sexually suggestive comments to a child, even in fun
- Reduce a child to tears in a form of control
- Allow allegations by a child to go unchallenged, unrecorded or not acted upon
- Undertake personal care for children. Ensure that parent or carer is responsible for personal care.
- Invite or allow children to stay with you at your home.

### **Disciplinary procedures if a coach is found in breach of Code of Behaviour**

Each breach of the Code of Behaviour will be assessed by the Director of Southside Playball. If a coach is deemed to be in breach of the Code of Behaviour the Director will speak to the individual coach. The Director will determine whether the coach should be given a warning on that occasion but will remind the coach of the standards expected of Southside Playball coaches.

If there is a further breach of the Code of Behaviour by a coach following a warning, the Director will meet with the coach and the Director will ask the coach to leave the programme.

If a serious allegation of abuse is made against a coach, the Director will suspend the coach until such time as the investigation has been completed and the Director will then determine the position of the coach in Southside Playball subject to the findings of the investigation.

### **Code of behaviour for children**

Southside Playball recognises that children have a great deal to gain from sport in terms of their personal development and enjoyment. Children are encouraged to realise that as a result of their participation in sports with Southside Playball that they also have a responsibility to treat other players, coaches and officials with fairness and respect. With rights there will always be responsibilities.

Children participating in sport with Southside Playball are required to abide by this Code of Behaviour.

#### **Children have the right to:**

- Be safe and feel safe
- Be listened to
- Be believed
- Be treated with respect, dignity and sensitivity
- Be happy, have fun and experience a sense of enjoyment and fulfilment.
- Comment and make suggestions in a constructive manner
- Be afforded appropriate confidentiality.
- Participate in games and competitions at levels with which they feel comfortable.

- Be free to approach the coach with any questions they may have.
- Make a complaint in an appropriate way and have it dealt with through an effective complaints procedure.
- Be protected from abuse.

### **Children participating in sport with Southside Playball should always:**

- Play fairly, do their best and enjoy themselves.
- Play in accordance with the rules of the game
- Respect fellow team members regardless of ability, cultural or ethnic origin or gender.
- Support fellow team members regardless of whether they do well or not
- Respect all coaches and officials and opponents.
- Be gracious in defeat and modest in victory
- Take their safety seriously by always wearing the appropriate protective equipment while training or playing games.
- Seek permission from coaches to leave the session
- Ensure that camera phones are not used in changing rooms or any changing facilities at any Southside Playball activities.

### **Children participating in sport with Southside Playball must not:**

- Cheat or lie
- Shout at, or argue with, coaches, team mates, opponents or officials.
- Use bad or abusive language to coaches, team mates, opponents or officials
- Bully or use bullying tactics to gain advantage.
- Tell lies or spread rumours, about other children or adults.
- Play or train if they feel unwell or are injured.
- Keep secret about any person that has caused them harm or offence.

### **Sanctions if child is in breach of code of behaviour**

Southside Playball operate a red and yellow card system.

If a child does not abide by the code of behaviour during sessions, the coach will give the child a yellow card as a warning to control and correct their behaviour.

If a child continues not to abide by the code of behaviour during sessions, the coach will give the child a red card and be told why they are being given the red card. Parents will be called and told not to send the child to the class the following week. After a week's exclusion, the child may return to the class and the matter is forgotten.

If a child receives more than 2 red cards, their parent will be asked to remove their child from the class permanently.

### **Code of behaviour for parents**

Parents/guardians should remember that children learn best by example. To assist in the promotion of good practice parents/guardians should:

- Focus on their child's efforts rather than performance
- Focus on the fun and participation of the child in the activity.

- Show appreciation of and respect for coaches and match officials and their decisions
- Respect their child's team mates as well as players and coaches from opposing teams.
- Encourage their child to treat other participants, opponents, coaches and officials with respect.
- Encourage their child to play by the rules
- Encourage their child to appreciate everybody on their team, regardless of ability.
- Behave responsibly on the side-line at training and matches.
- Conduct themselves in such a way which promotes the definition of fair play
- Not take safety for granted but ensure that their child has all the appropriate equipment required for their participation in the sport.
- Not ridicule or shout at a child for losing a game or making a mistake.
- Not enter the field of play unless specifically invited to do so by a coach or official in charge.

# General Safety and Management

## Records

Registration forms are completed on-line by parents when booking classes.

Information contained on registration forms are forwarded to the relevant coach for each class/venue.

A roll call will be taken at the start of each class or at the start of each day of camp.

No child can attend a class unless they are on the list provided to the relevant coach by the office. If the child is not on the list, they must sit on the side-lines and the coach should obtain a number from the person who collects them and give it to the office to follow up.

## Building Safety

Coaches should be aware of the locations of fire exits and be familiar with the evacuation procedures for any premises in which Southside Playball activities are taking place. A fire drill should be held with each group annually.

Coaches should be aware of where the nearest accessible telephone is, in case of emergency.

Coaches should, where possible, be aware of what medication children are taking.

Coaches should ensure that they have their first aid kit with them when coaching and should also be aware of where the first aid kit is located in each premises in which they are coaching.

## Equipment Safety

Coaches should ensure sports equipment is not damaged or broken.

Coaches should talk about the importance of safety in the class and ensure that all children adhere to any safety rules.

Coaches should ensure that all children have and use any safety equipment appropriate to the sport being undertaken.

Coaches should ensure warm up is done before each class to avoid injury.

## Accident / Incidents.

Every coach will carry with them the contact numbers for parents or designated childminder of every child they teach. (Supplied by the parents on the forms they fill in) A roll call will be taken at the start of every class.

An incident is when a child tumbles, goes over on an ankle, runs into another child and bangs a head. Something that causes the coach to stop the game and ask if the child is alright or wants to sit out for a minute.

**All incidents will be reported to the person collecting the child.**

Minor cuts and bruises will be treated on site with company First Aid kit. The parent or minder being informed of the details when they collect the child.

Notes of incidents and accidents will be recorded in the coach accident book to protect the coach and company.

In the case of a more serious injury, the coach will assess the injury. In the case of blood injuries the coach must protect themselves by wearing the surgical gloves in the First Aid Kit. In the case of a head injury the child will not be moved.

The coach will call the parent or childminder immediately and take instruction from them for further action. Then call the Southside Playball office to report the accident. Should the office be unattended, they leave a message.

In the event of a parent or minder being uncontactable the coach will call the Director or the Sport office who will take responsibility for further action.

An accident report will be written up – in the coaches accident book within one hour of the accident occurring. On returning to the office – THE SAME DAY – the accident book will be handed in and registered with the Sport office. The Sport office will then type the accident details onto an accident report form and email it to the school.

**The parents will be called by the office the same evening.**

#### Children with special needs

Southside Playball encourages children of all abilities to attend classes. The Director/Coach will talk with parents of children with special needs to find out what those needs are and to see how they can help the child to participate.

When dealing with children with special needs, coaches will bear in mind these action points:

#### Do

- Include (not just by enrolling child into class but by including them in every aspect of what you say or do).
- Treat a child with special needs as you would any other child
- Always speak directly to the child with special needs
- Always ask the child with special needs if you can help them in any way
- Integrate the child into the group
- Try to be aware of a child's hidden disability or condition, such as epilepsy, which may require assistance.
- Assume nothing – always ask! Talk to parents or carers and communicate with child too!

#### Don't

- Exclude (this is demonstrated by your commitment to the child)
- Use language that promotes pity or charity
- Use emotional language such as 'suffers from'
- Consider a parent or carer as a conversational go-between
- Segregate

- Present that you know what children are saying when you cannot understand them – ask them to repeat themselves or try another method of communication
- Be embarrassed by using common expressions, for example saying ‘see you later’ when speaking to a child who is blind.

### Supervision

Two coaches are present for all classes, with a ratio of one coach to 10 children.

Parents are welcome to stay on the premises during class time.

At After School classes and Camps, children will not be allowed to leave the premises until their parents come to collect them.

Should a person unknown to the coach come to collect the child, the person presenting will be asked to supply a phone number for the child’s parents. If this cannot be done the child will not be handed over. The coach calls the office for advice.

If the number can be produced and it matches the number on the sheet that the coach is carrying, the coach will call the number. If the parent cannot be contacted the coach will call the Southside Playball Office for instruction.

# Complaints

Southside Playball is a wholly independent company which usually operates its afterschool classes within primary school property. Southside Playball pays rental to the school for the use of the property and therefore is wholly responsible for any complaints regarding the Southside Playball service to children/parents.

Complaints regarding Southside Playball should and must be in the first instance directed to the Southside Playball administrative officer responsible for complaints and NOT the school Principal.

Many complaints can be dealt with in an informal manner by firstly contacting the Southside Playball office and asking for the Administrative Officer responsible for complaints.

Note: In this process the term days refers to school days not calendar days.

## RIGHTS AND RESPONSIBILITIES

### RIGHTS OF A PERSON MAKING A COMPLAINT

In dealing with complaints, Southside Playball will ensure that the complainant receives:

- Fair treatment.
- Courtesy.
- A timely response.
- Accurate advice.
- Respect for your privacy.

Complaints will be treated as confidentially as possible allowing for the possibility that the Administrative officer may have to consult with other appropriate parties regarding the complaint.

- Reasons for our decisions.

Where the complaint is justified Southside Playball will acknowledge this and advise the complainant of the action that will be taken.

If the complaint; after investigation, it is judged groundless, the complainant will be advised accordingly.

### RESPONSIBILITIES OF A PERSON MAKING A COMPLAINT

In making a complaint Southside Playball would expect that the complainant:

- Raise issues in a timely manner with the Southside Playball administrative officer responsible for complaints.
- Treat Southside Playball staff with respect and courtesy.
- Provide accurate and concise information in relation to the issues raised.

### RIGHTS OF PARTIES INVOLVED DURING THE INVESTIGATION

The process is non-adversarial and does not provide a role for any other statutory or non-statutory body.

## **LEGAL REPRESENTATION**

Legal representation or representation by person(s) acting in a Professional capacity is not permitted within this procedure. This however, does not take away the statutory rights of any of the participants.

## **WHO WILL DEAL WITH YOUR COMPLAINT?**

At the informal stage complaint should be raised and dealt with by the Southside Playball Administrative Officer responsible for complaints.

## **COMPLAINTS PROCEDURE**

### **INFORMAL STAGE: STAGE 1**

In the first instance a Parent/guardian who wishes to make a complaint should telephone the Southside Playball office and ask for the administrative officer responsible for complaints.

Where the parent/guardian is unable to resolve the complaint with the administrative officer she/he should ask for the Director to call the parent with a view to resolving it.

Note: In some circumstances the Director may not be able to deal effectively with your complaint immediately and may require some time to investigate and prepare a response. If time is required you will be informed of the timescale and the likely date by which a response will be issued.

Note: In relation to entering children for matches, Southside Playball are employed by parents to coach children to a level of fielding a team for a match. However if parents have a complaint in relation to the opposing team or coach this cannot be dealt with by this complaints procedure as it is outside the remit of Southside Playball.

### **INFORMAL STAGE: STAGE 2**

If the complaint is still unresolved and the parent/guardian wishes to pursue the matter further she/he should lodge the complaint in writing with the Principal of the school concerned.

Should the complaint reach this stage Southside Playball is quite happy to be bound by the wishes of the Principal of the school concerned and follow the complaints procedure of the school.

## **MALICIOUS OR VEXATIOUS COMPLAINTS**

Where the Southside Playball management consider the actions of a parent/group of parents to constitute frivolous or vexatious behaviour, they will suggest that parents remove their children from Southside Playball classes.

## Recognising Abuse

Child neglect or abuse can often be difficult to identify and may present in many forms. A list of indicators of abuse are listed in Appendix 2. No one indicator should be seen as conclusive in itself of abuse. It may indicate conditions other than child abuse. All signs and symptoms must be examined in the context of the child's situation and family circumstances.

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.

### 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 on-going 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.

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.

### Stage 3: Recording of information

If neglect or abuse is suspected it is important to establish the grounds for concern by obtaining as much information as possible. Observations should be accurately recorded and should include dates, times, names, locations, context and any other information that may be relevant. Confidentiality of this information is very important and should be stored in line with procedures.

#### What constitutes reasonable grounds for a child protection or welfare concern?

- 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 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.

A concern about a potential risk to children posed by a specific person, even if the children are unidentifiable, should also be reported.

An increasing number of adults are disclosing abuse that took place during their childhoods. It is essential to establish whether there is any current risk to any child who may be in contact with the alleged abuser revealed in such disclosures and therefore any disclosures by adults should also be reported.

A coach who knows or suspects that a child/young person has been harmed or is at risk of being harmed has a duty to convey this concern to the Designated Liaison Person.

#### How to respond to a disclosure

Remember, a child may disclose abuse to a coach as a trusted adult at any time during their work with them. It is important that they are aware and prepared for this.

- Be as calm and natural as possible.
- Remember that you have been approached because you are trusted and possibly liked. Do not panic.
- Be aware that disclosures can be very difficult for the child.
- Remember, the child may initially be testing your reactions and may only fully open up over a period of time.
- Listen to what the child has to say. Give them the time and opportunity to tell as much as they are able and wish to.
- Do not pressurise the child. Allow him or her to disclose at their own pace and in their own language.
- Conceal any signs of disgust, anger or disbelief.
- Accept what the child has to say – false disclosures are very rare.
- It is important to differentiate between the person who carried out the abuse and the act of abuse itself. The child quite possibly may love or strongly like the alleged abuser while also disliking what was done to them. It is important therefore to avoid expressing

any judgement on, or anger towards, the alleged perpetrator while talking with the child.

- It may be necessary to reassure the child that your feelings towards him or her have not been affected in a negative way as a result of what they have disclosed.

#### When asking questions

- Questions should be supportive and for the purpose of clarification only.
- Avoid leading questions, such as asking whether a specific person carried out the abuse. Also, avoid asking about intimate details or suggesting that something else may have happened other than what you have been told. Such questions and suggestions could complicate the official investigation.

#### Confidentiality – Do not promise to keep secrets

At the earliest opportunity, tell the child that:

- You acknowledge that they have come to you because they trust you.
- You will be sharing this information only with people who understand this area and who can help. There are secrets, which are not helpful and should not be kept because they make matters worse. Such secrets hide things that need to be known if people are to be helped and protected from further ongoing hurt. By refusing to make a commitment to secrecy to the child, you do run the risk that they may not tell you everything (or, indeed, anything) there and then. However, it is better to do this than to tell a lie and ruin the child's confidence in yet another adult. By being honest, it is more likely that the child will return to you at another time.

#### Think before you promise anything – Do not make promises you cannot keep

At the earliest possible opportunity:

- Record in writing, in factual manner, what the child has said, including, as far as possible, the exact words used by the child.
- Inform the Designated Liaison Person immediately and follow the reporting procedures.
- Maintain appropriate confidentiality.

#### On-going support

Following a disclosure by a child, it is important that the coach continues in a supportive relationship with the child. Disclosure is a huge step for a child. Coaches should continue to offer support, particularly through:

- maintaining a positive relationship with the child;
- keeping lines of communication open by listening carefully to the child;
- continuing to include the child in the usual activities.

Any further disclosure should be treated as a first disclosure and responded to as indicated above. Where necessary, immediate action should be taken to ensure the child's safety.

## Reporting Procedures

Coaches who suspect that a child is being abused, or to whom a child has made a disclosure, or to whom a retrospective disclosure has been made by an adult, or who has a concern about a risk to unidentifiable children should report the matter to the Designated Liaison Person.

The Coach should complete the Child Protection Reporting Form (see Appendix 7) with all the details of the concern/suspicion/disclosure.

The Designated Liaison Person should expediently assess the disclosure / allegation to ascertain whether there are reasonable grounds for making a formal report to the Child and Family Agency.

The Designated Liaison Person can consult with the Child and Family Agency personnel on whether a formal report to them should be made and on the appropriate actions to take.

If a formal report is required, the Designated Liaison Person should contact the Child and Family Agency by telephone and make a report. The Designated Liaison Person will also complete the Standard Reporting Form for the Child and Family Agency and submit it without delay.

The Designated Liaison Person (in consultation with the statutory authorities) should contact the parents / guardians of the child informing them that a report is likely to be submitted to the statutory authorities, unless doing so is likely to endanger the child or undermine an investigation.

Any further information required by the statutory authorities will be requested through the Designated Liaison Person who should liaise with the staff and child/young person as necessary.

If a formal report is not required, the Designated Liaison Person should inform, in writing, the coach who first raised the concern the reason(s) supporting this decision.

The coach should also be advised that they can pursue their concerns with the Child and Family Agency if they are not satisfied with the decision and be provided with contact details of the relevant authorities.

Following the report of a disclosure/allegation to the Designated Liaison Person, they should provide support to the child/young person and staff involved.

In the event of an emergency where it is considered that the child is in immediate danger, or the non-availability of Child and Family Agency personnel, the Designated Liaison Person should report to An Garda Síochána.

## **Dealing with allegations against coaches and children**

When an allegation of abuse is received against a coach, it should be assessed promptly and carefully by the Designated Liaison Person. Action taken in reporting an allegation of child abuse against a coach should be based on an opinion formed 'reasonably and in good faith'. It will be necessary to decide whether a formal report should be made to the Child and Family Agency. This decision should be based on reasonable grounds for concern.

The first priority is to ensure that no child is exposed to unnecessary risk. The Designated Liaison Person should as a matter of urgency take any necessary protective measures. These measures should be proportionate to the level of risk and should not unreasonably penalise the coach, financially or otherwise, unless necessary to protect children. Where protective measures penalise the coach, it is important that early consideration be given to the case.

Any action taken should be guided by agreed procedures, the applicable employment contract and the rules of natural justice.

The Designated Liaison Person should be informed about the allegation as soon as possible.

When the Designated Liaison Person becomes aware of an allegation of abuse of a child or children by a coach during the execution of that coach's duties, the Designated Liaison Person should privately inform the coach of the following:

- (i) The fact that an allegation has been made against him or her;
- (ii) The nature of the allegation.

The coach should be afforded an opportunity to respond. The Designated Liaison should note the response and pass on this information if making a formal report to the Child and Family Agency.

The Designated Liaison Person should take care to ensure that actions taken by her do not undermine or frustrate any investigations/ assessments conducted by the Child and Family Agency or An Garda Síochána. To this end it is strongly recommended that the Designated Liaison Person maintain a close liaison with the statutory authorities.

The Designated Liaison Person should be notified of the outcome of an investigation and/or assessment by the Child and Family Agency. This will assist them in reaching a decision about the action to be taken in the longer term concerning the coach.

In a situation where child abuse is alleged to have been carried out by another child, the standard reporting procedures will be followed for both the victim and the alleged abuser, as it should be considered a child care and protection issue for both children.

If an allegation, suspicion or concern of peer abuse is made against a child that gives rise to reasonable grounds for concern, this should be reported to the Designate Liaison Person. The matter will be referred to the Child and Family Agency, who will deal with it as a child protection and welfare issue for both children.

## **Role of Designated Liaison Person**

The Administrative Officer, Jill Aston, has been designated as the Designated Liaison Person to contact if you have an issue or concern about any aspect of a child's safety and welfare. It is the responsibility of the Designated Liaison Person to support and advise staff about policy and procedures in relation to child protection and to ensure that procedures are followed. It is also the responsibility of the Designated Liaison Person to liaise with the Child and Family Agency or Gardaí where appropriate.

The Administrative Officer, Jill Aston can be contacted at 01 2351588.

## **Record keeping, access and storage of information**

### **Child Protection Records**

The Designated Liaison Person is responsible for keeping the following records relating the Child Protection and Welfare Policy in a locked fire-proof filing cabinet.

- Personnel records for all coaches including application form, notes from interview, references, Garda Vetting and details of appointment and training undertaken.
- Any disclosures, concerns or allegations of child abuse.
- Records relating to disclosures, concerns or allegations of abuse including reports from coaches, reports to the Child and Family Agency, including informal advice from the Child and Family agency, informing parents/guardians, reports to Gardaí, advice given to coaches.
- Any complaints about the safety and welfare of children whilst at Southside Playball activities.
- Any disciplinary procedures taken against a coach

The Designated Liaison Person is the only personnel who has access to these records: Coaches may request, in writing, to view the records held by the Designated Liaison Person relating to them.

All Child Protection records will be held by Southside Playball in perpetuity.

### **Children's Records**

Records (registration forms and attendance records) are held in the Southside Playball offices. Access to information is limited to Director, Administrator and coaches. All information is kept private and confidential and at no stage is it shared with a third party. Information is stored on computer with back up to hard drive and held in perpetuity.

Other records

Records (accident and incident report forms) are held in the Southside Playball offices. All information is kept private and confidential and is only shared with third parties on a need to know basis.

Such information is stored on computer/in a filing cabinet and is held in perpetuity.

# Confidentiality and sharing of information

## **Confidentiality**

Confidentiality is about managing sensitive information that arises in a trusting relationship and doing so in a manner that is respectful, professional and purposeful.

All information provided to Southside Playball by parents/guardians, a child or coach must be treated in a confidential manner.

Southside Playball are committed to ensuring people's rights to confidentiality. However in relation to child protection and welfare we undertake that:

- Information will only be forwarded on a 'need to know' basis in order to safeguard the child
- Giving such information to others for the protection of a child is not a breach of confidentiality;
- We cannot guarantee total confidentiality where the best interests of the child are at risk;
- Parents/guardians and children have a right to know if personal information is being shared and/or a report is being made to the statutory authorities, unless doing so could put the child/young person at further risk.

## **Information Sharing.**

On joining Southside Playball, parents/guardians and children will be provided with information on the organisation and its activities. They will also be provided with information leaflets on the Child Protection and Welfare policy.

Parents / Guardians will be required to complete an online registration form for their child (ren) giving contact details, relevant medical conditions and special requirements.

## **Interagency Working**

Where Southside Playball activities are taking place in any National School as part of the school curriculum, it is important to note that the School's Child Protection and Welfare Policy will be followed by the Southside Playball coaches.

Where Southside Playball are using or hiring premises for activities, they should comply with any requirements such as providing a copy of insurance and their Child Protection and Welfare Policy. The child protection policy of any premises will not supersede Southside Playball Child Protection and Welfare Policy.

## **Appendices**

- Appendix 1 - Relevant Legislation
- Appendix 2 - Definitions of Abuse
- Appendix 3 - Signs and Symptoms of Child Abuse
- Appendix 4 - National Contacts for Child and Family Agency Social Workers
- Appendix 5 - Application form for new coaches
- Appendix 6 - Reference form
- Appendix 7 - Child Protection Reporting Form
- Appendix 8 - Anti-Bullying Policy

## RELEVANT LEGISLATION

### 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 the HSE 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 the HSE to provide child care and family support services;
- (iii) the improvement of the procedures to facilitate immediate intervention by the HSE 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 the HSE;
- (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.

The Act also states that it is an offence to engage in a sexual act, or attempt to engage in a sexual act with a child under the age of 17 years.

### Domestic Violence Act 1996

The Domestic Violence Act 1996 introduced major changes in the legal remedies for domestic violence. There are two main types of remedies available:

- (i) Safety Order: This Order prohibits a person from further violence or threats of violence. It does not oblige that person to leave the family home. If the parties live apart, the Order prohibits the violent person from watching or being in the vicinity of the home.
- (ii) Barring Order: This Order requires the violent person to leave the family home. The legislation gives the HSE the power to intervene to protect individuals and their children from violence. Section 6 of the Act empowers the HSE to apply for Orders for

which a person could apply on his or her own behalf but is deterred from doing so through fear or trauma. The consent of the victim is not a prerequisite for such an application, although he or she must be consulted. Under Section 7 of the Act, the Court may, where it considers it appropriate, adjourn proceedings and direct the HSE to undertake an investigation of the dependent person's circumstances with a view to:

- (i) applying for a Care Order or a Supervision Order under the Child Care Act 1991;
- (ii) providing services or assistance for the dependent person's family; or
- (iii) taking any other action in respect of the dependent person.

#### 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 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.

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.

#### Education Act 1998

The Education Act 1998 places an obligation on those concerned with its implementation to give practical effect to the constitutional rights of children as they relate to education and, as far as practicable and having regard to the resources available, to make available to pupils a level and quality of education appropriate to meeting their individual needs and abilities. Education (Welfare) Act 2000 The Education (Welfare) Act 2000, which was fully commenced in July 2002, replaced previous school attendance legislation and provided for the creation of a single national agency, the National Educational Welfare Board (NEWB), which has statutory responsibility to ensure that every child either attends school or otherwise receives an education or participates in training. The NEWB also assists in the formulation and implementation of Government education policy.

### Non-Fatal Offences against the Person Act 1997

The two relevant provisions of this Act are:

- (i) it abolishes the rule of law under which teachers were immune from criminal liability in respect of physical chastisement of pupils;
- (ii) it describes circumstances in which the use of reasonable force may be justifiable.

### 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;
- (i) protecting records that would reveal a confidential source of information.

### UN Convention on the Rights of the Child

Adopted unanimously by the United Nations in November 1989, Ireland signed up to the convention in 1992. The convention has no legal or statutory powers. All the rights detailed in the UN Convention apply to children without exception, Obligation to protect the child from any form of discrimination. All action concerning the child shall take account of his or her best interest. The state shall provide the child with adequate care when parents or other conferred with such responsibility fail to do so. Every child has the inherent right to life and the state has an obligation to ensure the child's survival and development. The child has the right to express his/her opinion freely and to have that opinion taken into account in any matter or procedure affecting the child. The UN Convention on the Rights of the Child has impacted on legislation here in Ireland particularly in recent years.

### Sex Offenders Act 2001

Under this legislation those who are convicted of certain sexual offences are now obliged to provide certain information to the Gardai including the address at which they are living

following their release from prison. There are also a number of requirements for sex offenders to fulfil when seeking employment where unsecured access to child is involved.

### Criminal Justice (Withholding of Information on Offences Against Children and Vulnerable Persons) Act 2012

The Criminal Justice (Withholding of Information) Act makes it a criminal offence for a person to fail to disclose information to the Gardaí that would assist in prosecuting a person who commits a serious offence against a child or vulnerable adult. Any person who withholds information faces a minimum jail term of five years. The Minister has stated the main aim of the Act was to close a loophole in our current law. The Offences Against the State (Amendment Act) 1998 provides for an offence of withholding information in relation to serious offences, but specifically excludes sexual offences. The legislation contains defences for parents and others where a victim of an offence requests that the details not be passed on to authorities.

### National Vetting Bureau (Children and Vulnerable Persons) Act 2012

The Act provides a legislative basis for the vetting of persons who seek positions of employment relating to children or vulnerable persons. The Act states specifically that vetting applies to 'any work or activity which is carried out by a person, a necessary and regular part of which consists mainly of the person having access to, or contact with, children in any work or activity which consists of the provision of educational, training, cultural, recreational, leisure, social or physical activities....'It also provides for the disclosing of 'specified information' where there is a bona fide concern that a person **may** harm a child or vulnerable adult.

### Children First Act 2015

The Act contains three main elements relating to child welfare and protection and also includes a provision to abolish the common law defence of reasonable chastisement.

Firstly, the Bill obliges certain professionals and others working with children to report child protection concerns to the Child and Family Agency and to assist the Agency, if requested to do so, in its assessment of a child protection risk.

The second key element of this Bill obliges a provider of services to children to undertake an assessment of the potential for risk of harm to a child while that child is availing of its services and to prepare an appropriate Child Safeguarding Statement in accordance with the Bill.

The third element provides statutory underpinning for the Children First Inter-departmental Implementation Group which will promote cross-sectoral implementation and compliance with Children First. This Group, which comprises a representative of each Government Department, and a representative each of the HSE, An Garda Síochána and the Child and Family Agency will be required to keep the implementation of this legislation under review and to report on an annual basis to the Minister for Children and Youth Affairs.

This Act represents an important addition to the child welfare and protection measures already in place and will help to ensure that child protection concerns are brought to the attention of the Child and Family Agency, and that the Agency gets the information and cooperation that it requires, in order to deal with any child welfare or protection concerns.

## DEFINITIONS OF ABUSE

### Neglect

Neglect can be defined in terms of an *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 example, a child who suffers a series of minor injuries may not be having his or her needs met in terms of necessary supervision and safety. A child whose height or weight is significantly below average may be being deprived of adequate nutrition. A child who consistently misses school may be being deprived of intellectual stimulation.

The *threshold of significant harm* is reached when the child's needs are neglected to the extent that his or her well-being and/or development are severely affected.

### Emotional abuse'

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) unresponsiveness of the parent/carer and/or inconsistent or inappropriate expectations of the child;
- (v) premature imposition of responsibility on the child;
- (vi) 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.

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.

### Physical abuse'

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 (*see Appendix 1 for details*);
- (xi) allowing or creating a substantial risk of significant harm to a child.

### Sexual abuse

Sexual abuse occurs when a child is used by another person for his or her gratification or sexual arousal, or for that of others. 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, modelling 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.

### Child welfare concern

A problem experienced directly by a child, or by the family of a child, that is seen to impact negatively on the child's health, development and welfare, and that warrants assessment and support, but may or may not require a child protection response.

# Signs and symptoms of child abuse

## Signs and symptoms of neglect

Child neglect is the most common category of abuse. A distinction can be made between 'wilful' neglect and 'circumstantial' neglect.

'Wilful' neglect would generally incorporate a direct and deliberate deprivation by a parent/carer of a child's most basic needs, e.g. withdrawal of food, shelter, warmth, clothing, contact with others. 'Circumstantial' neglect more often may be due to stress/inability to cope by parents or carers.

Neglect is closely correlated with low socio-economic factors and corresponding physical deprivations. It is also related to parental incapacity due to learning disability, addictions or psychological disturbance.

The neglect of children is 'usually a passive form of abuse involving omission rather than acts of commission' (Skuse and Bentovim, 1994). It comprises 'both a lack of physical caretaking and supervision and a failure to fulfil the developmental needs of the child in terms of cognitive stimulation'.

Child neglect should be suspected in cases of:

- abandonment or desertion;
- children persistently being left alone without adequate care and supervision;
- malnourishment, lacking food, inappropriate food or erratic feeding;
- lack of warmth;
- lack of adequate clothing;
- inattention to basic hygiene;
- lack of protection and exposure to danger, including moral danger or lack of supervision appropriate to the child's age;
- persistent failure to attend school;
- non-organic failure to thrive, i.e. child not gaining weight due not only to malnutrition but also to emotional deprivation;
- failure to provide adequate care for the child's medical and developmental problems;
- exploited, overworked.

## Characteristics of neglect

Child neglect is the most frequent category of abuse, both in Ireland and internationally. In addition to being the most frequently reported type of abuse; neglect is also recognised as being the most harmful. Not only does neglect generally last throughout a childhood, it also has long-term consequences into adult life. Children are more likely to die from chronic neglect than from one instance of physical abuse. It is well established that severe neglect in infancy has a serious negative impact on brain development.

Neglect is associated with, but not necessarily caused by, poverty. It is strongly correlated with parental substance misuse, domestic violence and parental mental illness and disability.

Neglect may be categorised into different types (adapted from Dubowitz, 1999):

- **Disorganised/chaotic neglect:** This is typically where parenting is inconsistent and is often found in disorganised and crises-prone families. The quality of parenting is inconsistent, with a lack of certainty and routine, often resulting in emergencies regarding accommodation, finances and food. This type of neglect results in

attachment disorders, promotes anxiety in children and leads to disruptive and attention-seeking behaviour, with older children proving more difficult to control and discipline. The home may be unsafe from accidental harm, with a high incident of accidents occurring.

- Depressed or passive neglect: This type of neglect fits the common stereotype and is often characterised by bleak and bare accommodation, without material comfort, and with poor hygiene and little if any social and psychological stimulation. The household will have few toys and those that are there may be broken, dirty or inappropriate for age. Young children will spend long periods in cots, playpens or pushchairs. There is often a lack of food, inadequate bedding and no clean clothes. There can be a sense of hopelessness, coupled with ambivalence about improving the household situation. In such environments, children frequently are absent from school and have poor homework routines. Children subject to these circumstances are at risk of major developmental delay.
- Chronic deprivation: This is most likely to occur where there is the absence of a key attachment figure. It is most often found in large institutions where infants and children may be physically well cared for, but where there is no opportunity to form an attachment with an individual carer. In these situations, children are dealt with by a range of adults and their needs are seen as part of the demands of a group of children. This form of deprivation will also be associated with poor stimulation and can result in serious developmental delays.

The following points illustrate the consequences of different types of neglect for children:

- inadequate food – failure to develop;
- household hazards – accidents;
- lack of hygiene – health and social problems;
- lack of attention to health – disease;
- inadequate mental health care – suicide or delinquency;
- inadequate emotional care – behaviour and educational;
- inadequate supervision – risk-taking behaviour;
- unstable relationship – attachment problems;
- unstable living conditions – behaviour and anxiety, risk of accidents;
- exposure to domestic violence – behaviour, physical and mental health;
- community violence – anti social behaviour.

#### Signs and symptoms of emotional neglect and abuse

Emotional neglect and abuse is found typically in a home lacking in emotional warmth. It is not necessarily associated with physical deprivation. The emotional needs of the children are not met; the parent's relationship to the child may be without empathy and devoid of emotional responsiveness.

Emotional neglect and abuse occurs when adults responsible for taking care of children are unaware of and unable (for a range of reasons) to meet their children's emotional and developmental needs. Emotional neglect and abuse is not easy to recognise because the effects are not easily observable. Skuse (1989) states that 'emotional abuse refers to the habitual verbal harassment of a child by disparagement, criticism, threat and ridicule, and the inversion of love, whereby verbal and non-verbal means of rejection and withdrawal are substituted'.

Emotional neglect and abuse can be identified with reference to the indices listed below. However, it should be noted that no one indicator is conclusive of emotional abuse. In the case of emotional abuse and neglect, it is more likely to impact negatively on a child where

there is a cluster of indices, where these are persistent over time and where there is a lack of other protective factors.

- rejection;
- lack of comfort and love;
- lack of attachment;
- lack of proper stimulation (e.g. fun and play);
- lack of continuity of care (e.g. frequent moves, particularly unplanned);
- continuous lack of praise and encouragement;
- serious over-protectiveness;
- inappropriate non-physical punishment (e.g. locking in bedrooms);
- family conflicts and/or violence;
- every child who is abused sexually, physically or neglected is also emotionally abused;
- inappropriate expectations of a child relative to his/her age and stage of development.

Children who are physically and sexually abused and neglected also suffer from emotional abuse.

### Signs and symptoms of physical abuse

Unsatisfactory explanations, varying explanations, frequency and clustering for the following events are high indices for concern regarding physical abuse:

- bruises (*see below for more detail*);
- fractures;
- swollen joints;
- burns/scalds (*see below for more detail*);
- abrasions/lacerations;
- haemorrhages (retinal, subdural);
- damage to body organs;
- poisonings – repeated (prescribed drugs, alcohol);
- failure to thrive;
- coma/unconsciousness;
- death.

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

### Bruises

#### *Accidental*

Accidental bruises are common at places on the body where bone is fairly close to the skin. Bruises can also be found towards the front of the body, as the child usually will fall forwards.

Accidental bruises are common on the chin, nose, forehead, elbow, knees and shins. An accident-prone child can have frequent bruises in these areas. Such bruises will be diffuse, with no definite edges. Any bruising on a child before the age of mobility must be treated with concern.

#### *Non-accidental*

Bruises caused by physical abuse are more likely to occur on soft tissues, e.g. cheek, buttocks, lower back, back, thighs, calves, neck, genitalia and mouth.

Marks from slapping or grabbing may form a distinctive pattern. Slap marks might occur on buttocks/cheeks and the outlining of fingers may be seen on any part of the body. Bruises caused by direct blows with a fist have no definite pattern, but may occur in parts of the body that do not usually receive injuries by accident. A punch over the eye (black eye syndrome) or ear would be of concern. Black eyes cannot be caused by a fall on to a flat surface. Two black eyes require two injuries and must always be suspect. Other distinctive patterns of bruising may be left by the use of straps, belts, sticks and feet. The outline of the object may be left on the child in a bruise on areas such as the back or thighs (areas covered by clothing).

Bruises may be associated with shaking, which can cause serious hidden bleeding and bruising inside the skull. Any bruising around the neck is suspicious since it is very unlikely to be accidentally acquired... Other injuries may feature – ruptured eardrum/fractured skull. Mouth injury may be a cause of concern, e.g. torn mouth (frenulum) from forced bottle-feeding.

### Bone injuries

Children regularly have accidents that result in fractures. However, children's bones are more flexible than those of adults and the children themselves are lighter, so a fracture, particularly of the skull, usually signifies that considerable force has been applied.

#### *Non-accidental*

A fracture of any sort should be regarded as suspicious in a child less than 8 months of age. A fracture of the skull must be regarded as particularly suspicious in a child less than 3 years. Either case requires careful investigation as to the circumstances in which the fracture occurred. Swelling in the head or drowsiness may also indicate injury.

### Burns

Children who have accidental burns usually have a hot liquid splashed on them by spilling or have come into contact with a hot object. The history that parents give is usually in keeping with the pattern of injury observed. However, repeated episodes may suggest inadequate care and attention to safety within the house.

#### *Non-accidental*

Children who have received non-accidental burns may exhibit a pattern that is not adequately explained by parents. The child may have been immersed in a hot liquid. The burn may show a definite line, unlike the type seen in accidental splashing. The child may also have been held against a hot object, like a radiator or a ring of a cooker, leaving distinctive marks. Cigarette burns may result in multiple small lesions in places on the skin that would not generally be exposed to danger. There may be other skin conditions that can cause similar patterns and expert paediatric advice should be sought.

### Bites

Children can get bitten either by animals or humans. Animal bites (e.g. dogs) commonly puncture and tear the skin, and usually the history is definite. Small children can also bite other children.

#### *Non-accidental*

It is sometimes hard to differentiate between the bites of adults and children since measurements can be inaccurate. Any suspected adult bite mark must be taken very seriously. Consultant paediatricians may liaise with dental colleagues in order to identify marks correctly.

## Poisoning

Children may commonly take medicines or chemicals that are dangerous and potentially life-threatening. Aspects of care and safety within the home need to be considered with each event.

### *Non-accidental*

Non-accidental poisoning can occur and may be difficult to identify, but should be suspected in bizarre or recurrent episodes and when more than one child is involved. Drowsiness or hyperventilation may be a symptom.

## Shaking violently

Shaking is a frequent cause of brain damage in very young children.

## Fabricated/induced illness

This occurs where parents, usually the mother (according to current research and case experience), fabricate stories of illness about their child or cause physical signs of illness. This can occur where the parent secretly administers dangerous drugs or other poisonous substances to the child or by smothering. The symptoms that alert to the possibility of fabricated/induced illness include:

- (i) symptoms that cannot be explained by any medical tests; symptoms never observed by anyone other than the parent/carer; symptoms reported to occur only at home or when a parent/carer visits a child in hospital;
- (ii) high level of demand for investigation of symptoms without any documented physical signs;
- (iii) unexplained problems with medical treatment, such as drips coming out or lines being interfered with; presence of unprescribed medication or poisons in the blood or urine.

## Signs and symptoms of sexual abuse

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

Cases of sexual abuse principally come to light through:

- (a) disclosure by the child or his or her siblings/friends;
- (b) the suspicions of an adult;
- (c) physical symptoms.

Colburn Faller (1989) provides a description of the wide spectrum of activities by adults which can constitute child sexual abuse. These include:

### Non-contact sexual abuse

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

### Sexual contact

- Involving any touching of the intimate body parts. The offender may fondle or masturbate the victim, and/or get the victim to fondle and/or masturbate them. Fondling can be either outside or inside clothes. Also includes 'frottage', i.e. where offender gains sexual gratification from rubbing his/her genitals against the victim's body or clothing.

#### Oral-genital sexual abuse

- Involving the offender licking, kissing, sucking or biting the child's genitals or inducing the child to do the same to them.

#### Interfemoral sexual abuse

- Sometimes referred to as 'dry sex' or 'vulvar intercourse', involving the offender placing his penis between the child's thighs. Penetrative sexual abuse, of which there are four types:
- 'Digital penetration', involving putting fingers in the vagina or anus, or both. Usually the victim is penetrated by the offender, but sometimes the offender gets the child to penetrate them.
- 'Penetration with objects', involving penetration of the vagina, anus or occasionally mouth with an object.
- 'Genital penetration', involving the penis entering the vagina, sometimes partially.
- 'Anal penetration' involving the penis penetrating the anus.

#### Sexual exploitation

- Involves situations of sexual victimisation where the person who is responsible for the exploitation may not have direct sexual contact with the child. Two types of this abuse are child pornography and child prostitution.
- 'Child pornography' includes still photography, videos and movies, and, more recently, computer-generated pornography.
- 'Child prostitution' for the most part involves children of latency age or in adolescence. However, children as young as 4 and 5 are known to be abused in this way.

The sexual abuses described above may be found in combination with other abuses, such as physical abuse and urination and defecation on the victim. In some cases, physical abuse is an integral part of the sexual abuse; in others, drugs and alcohol may be given to the victim.

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

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

- bleeding from the vagina/anus;
- difficulty/pain in passing urine/faeces;
- an infection may occur secondary to sexual abuse
- unusual reluctance to join in normal activities that involve undressing, e.g. games/swimming.

Particular behavioural signs and emotional problems suggestive of child abuse in young children (aged 0-10 years) include:

- mood change where the child becomes withdrawn, fearful, acting out;
- lack of concentration, especially in an educational setting;
- bed wetting, soiling;

- pains, tummy aches, headaches with no evident physical cause;
- skin disorders;
- reluctance to go to bed, nightmares, changes in sleep patterns;
- school refusal;
- separation anxiety;
- loss of appetite, overeating, hiding food.
- Particular behavioural signs and emotional problems suggestive of child abuse in older children (aged 10+ years) include:
  - depression, isolation, anger;
  - running away;
  - drug, alcohol, solvent abuse;
  - self-harm;
  - suicide attempts;
  - missing school or early school leaving;
  - eating disorders.

All signs/indicators need careful assessment relative to the child's circumstances.

# National contacts for Children and Family Agency Social Workers

Area	Address	Telephone No.
<b>DUBLIN NORTH</b>	Duty Social Work Department, 492 North Circular Road, Dublin 1	(01) 8566856
	Duty Social Work Department, Health Centre, Cromcastle, Coolock, Dublin 5	(01) 816 4200 (01) 816 0314
	Duty Social Work Department, Health Centre, Wellmount Park, Finglas, Dublin 11	(01) 8567704
	Duty Social Work Department, Roselawn Health Centre, Roselawn, Blanchardstown, Dublin 15	(01) 6464518
	Duty Social Work Department, 180 – 189 Lakeshore Drive, Airside Business Park, Swords, County Dublin	(01) 8708000
<b>DUBLIN SOUTH</b>	Duty Social Work Department, Carnegie Centre, 21-25 Lord Edward Street, Dublin 2	(01) 648 6500
	Duty Social Work Department, Bridge House, Cherry Orchard Hospital, Ballyfermot, Dublin 10	(01) 6206387
	Duty Social Work Department, Churchtown Primary Care Centre, Unit 9 Nutgrove Retail Park, Churchtown, Dublin 14	(01) 4916400
	Duty Social Work Department, Chamber House, Chamber Square, Tallaght, Dublin 24	(01) 4686289
	Duty Social Work Department, Our Lady's Clinic, Patrick Street, Dun Laoghaire, Co. Dublin	(01) 6637300
<b>CARLOW</b>	Duty Social Work Department, Ground Floor, St. Dymphna's Hospital, Athy Road, Co. Carlow	(059) 9136587
<b>CAVAN</b>	Child and Family Agency, Drumalee Cross, Co. Cavan	(049) 4377305 (049) 4377306
<b>CLARE</b>	Clare Duty Social Work Team, River House, Gort Road, Ennis, Co. Clare	(065) 6863935
<b>CORK</b>	134 Bank Place, Mallow, Co. Cork	(022) 54100
	North Lee Social Work Department, Floor 2 (adjacent to Shopping Centre), Blackpool, Co. Cork	(021) 4927000
	South Lee Social Work Department, St. Finbarr's Hospital, Douglas Road, Cork	(021) 4923001
	Duty Social Work Department, Coolnagarrane, Skibbereen, Co. Cork	(028) 40447
<b>DONEGAL</b>	Links Business Centre, Lisfannon, Buncrana, Co. Donegal	(074) 9320420
	Millennium Court, Pearse Road, Letterkenny, Co. Donegal	(074) 9104714
	County Clinic, St Conal's Hospital, Letterkenny, Co. Donegal	(074) 9104714
	Euro House, Killybegs Road, Donegal Town, Co. Donegal	(074) 9723540
<b>GALWAY</b>	Galway City Social Work Department, Local Health Office, 25 Newcastle Road, Galway, Co. Galway	(091) 546366
	Child Protection Social Work Department, Mellows House, Care of Health Centre, Vicar Street, Tuam, Co. Galway	(093) 37264 (093) 37265
	Child Protection Social Work Department, Health Centre, 60 Main Street, Loughrea, Co. Galway	(091) 847820
	Ballinasloe Social Work Department, Health Centre, Brackernagh, Ballinasloe, Co. Galway	(090) 9646200
	Oughterard Social Work Department, Health Centre, Oughterard, Co. Galway	(091) 552200
<b>KERRY</b>	Social Work Department, Kerry Community Services, Rathass, Tralee, Co. Kerry	(066) 7121566
	Killarney Social Work Department, St. Margaret's Road, Killarney, Co. Kerry	(064) 6636030
<b>KILDARE</b>	Social Work Department, St Mary's Craddockstown Road, Naas, Co. Kildare	(045) 882400

<b>KILKENNY</b>	Social Work Office, Childcare Department, Carlow/Kilkenny, St. Canice's Hospital, Dublin Road, Kilkenny, Co. Kilkenny	(056) 7784057
<b>LIMERICK</b>	Child Protection and Welfare, Ballynanty Health Centre, Ballynanty, Limerick, Co. Limerick Child Protection and Welfare, Roxtown Health Centre, Roxtown Terrace, Old Clare Street, Limerick, Co. Limerick Child Protection and Welfare, Southill Health Centre, Southill, Limerick Child Protection and Welfare, Newcastle West Health Centre, Newcastle West, Co. Limerick.	(061) 457102 (061) 483091 (061) 209985 (069) 66653
<b>LAOIS</b>	Social Work Department, Child and Family Centre, Dublin Road, Portlaoise, Co. Laois	(057) 8692567
<b>LEITRIM</b>	Community Care Office, Leitrim Road, Carrick on Shannon, Co. Leitrim	(071) 9650324
<b>LONGFORD</b>	Social Work Department, Tivoli House, Dublin Road, Co. Longford	(043) 3350584
<b>LOUTH</b>	Social Work Department, Local Health Care Unit, Wilton House, Stapleton Place, Dundalk, Co. Louth Social Work Department, Ballsgrove Health Centre, Ballsgrove, Drogheda, Co. Louth	(042) 9392200 (041) 9838574
<b>MAYO</b>	Ballina Social Work Team, Ballina Health Centre, Mercy Road, Ballina, Co. Mayo St. Mary's Headquarters, Castlebar, Co. Mayo Swinford Health Centre, Aras Attracta, Swinford, Co. Mayo	(096) 21511 (094) 9042283 (094) 9050133
<b>MEATH</b>	Duty Social Work Department, 25 Brews Hill, Navan, County Meath	(046) 9030616 (046) 9030608
<b>MONAGHAN</b>	1 <sup>st</sup> Floor, Support Service Building, Roosky, Co. Monaghan	(047) 30426
<b>OFFALY</b>	Social Work Department, Derry Suite, Castlebuildings, Tara Street, Tullamore, Co. Offaly	(057) 937 0700
<b>ROSCOMMON</b>	Child & Family Agency, Government Buildings, Convent Road, Co. Roscommon Child & Family Agency, Golf Links Road, Co. Roscommon Child & Family Agency, Health Centre, Boyle, Co. Roscommon Child & Family Agency, Riverside House, Main Street, Castlerea, Co. Roscommon	(090) 6637814 (090) 6637863 (090) 663 7505 (090) 663 7580 (071) 966 2087 (090) 663 7851
<b>SLIGO</b>	Child & Family Agency, Markievicz House, Barrack Street, Sligo, Co. Sligo Child & Family Agency, One Stop Shop, Teach Laighne, Humbert Street, Tubercurry, Co. Sligo	(071) 915 5133 (071) 912 0454 (087) 9299666
<b>TIPPERARY</b>	Duty & Intake Social Work Department, Civic Offices, Limerick Road, Nenagh, Co. Tipperary Social Work Team, South Tipperary Community Care Services, Western Road, Clonmel, Co. Tipperary	(067) 46 636 (067) 46660 (052) 6177303
<b>WATERFORD</b>	Social Work Service, Waterford Community Services, Cork Road, Co. Waterford Social Work Department, Dungarvan Community Services, St. Joseph's Hospital, Dungarvan, Co. Waterford	(051) 842827 (058) 20906
<b>WESTMEATH</b>	Social Work Department, Athlone Health Centre, Coosan Road, Athlone, Co. Westmeath Social Work Department, Child and Family Centre, St. Loman's, Mullingar, Co. Westmeath	(090) 648 3106 (044) 9384450
<b>WEXFORD</b>	Gorey Health Centre, Hospital Grounds, Gorey, Co. Wexford Social Work Department, Ely House, Ferrybank, Co. Wexford	(053) 943 0100 (053) 912 3522 Ext. 201
<b>WICKLOW</b>	Child & Family Protection Service, Glenside Health Centre, Glenside Road, Wicklow Town, Co. Wicklow	(0404) 60800

## APPLICATION FORM FOR NEW COACHES

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ (Home) \_\_\_\_\_ (Mobile)

PPS No. \_\_\_\_\_

Previous experience / involvement in sport? Please give details.

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Details of Qualifications

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Reason for applying

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Have you ever been asked to leave a sporting organisation in the past?  
*(If you have answered yes we will contact you in confidence)* YES NO

Do you agree to abide by the guidelines contained in Southside Playball  
Child Protection and Welfare Policy? YES NO

Do you agree to abide by the rules of Southside Playball? YES NO

**REFEREE**

Please supply the names of two responsible people whom we can contact and who from personal knowledge is willing to provide a reference. If you have had a previous involvement in sport one of these names should be that of an administrator/coach in your last club / place of involvement.

**Referees Names and Address**

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

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**DECLARATION**

Surname ..... Forename(s) .....

Date of Birth ..... Place of Birth .....

Any other name previously known as .....

- 1. I consent to a Garda vetting check being completed.
- 2. Have you ever been convicted of a criminal offence or been the subject of a caution or a bound-over order? Yes  No

If yes, please state below the nature and date(s) of the offence(s)

Nature of offence	Date
.....	.....
.....	.....

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

# REFERENCE FORM

**TO WHOM IT MAY CONCERN**

\_\_\_\_\_ (*applicant*) has applied to become a Coach with Southside Playball, and has given your name as a referee. If you are willing to complete this reference, all the information contained on the form will remain confidential. We would appreciate you being extremely candid in your evaluation of this person.

- 1 How long have you known this person? \_\_\_\_\_
- 2 In what capacity? \_\_\_\_\_
- 3 Can you highlight some of the applicants skills and qualities?  
\_\_\_\_\_  
\_\_\_\_\_
- 4 Please rate the person on the following? (please tick one box per row)

	POOR	AVERAGE	GOOD	V/GOOD	EXCELLENT
Responsibility					
Maturity					
Self Motivation					
Can motivate others					
Commitment					
Energy					
Trustworthiness					
Reliability					

This post involves substantial access to children and young people. As an organisation committed to the welfare and protection of children and young people, we are anxious to know, to the best of your knowledge, is there any reason why the applicant may be deemed unsuitable to work directly with children in a sporting capacity? YES NO

If YES, please specify why  
\_\_\_\_\_  
\_\_\_\_\_

Any additional comments  
\_\_\_\_\_  
\_\_\_\_\_

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

CONTACT TELEPHONE NUMBER: \_\_\_\_\_

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Thank you for completing this reference form. Please return to the Administrative Officer, Jill Aston, Southside Playball, 34 Wolverton Glen, Dalkey, County Dublin. If you have any questions or queries, please contact Jill Aston at 01 2351588.

# Child Protection Reporting Form

*To be filled out by coach in the event of an alleged or suspected abusive situation*

Date : \_\_\_\_\_ Time: \_\_\_\_\_

Name of Person Reporting: \_\_\_\_\_ Class: \_\_\_\_\_

Name of child involved \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

Parents/Guardians Name(s): \_\_\_\_\_

Address (if different from above): \_\_\_\_\_

Contact telephone number: \_\_\_\_\_

Name of person allegedly causing concern: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Describe the incident or situation, which is causing concern

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Source of information (i.e. child, adult, injury/distress noticed):

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Any explanation offered to account for injury / distress etc.: \_\_\_\_\_

Child's own statement (if relevant)

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Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This form should be completed with as much detail as is known and returned marked "Confidential" to the Designated Liaison Person, 34 Wolverson Glen, Dalkey, County Dublin. Continue on a blank sheet where appropriate.

## **Anti-bullying policy**

Bullying has no place in Southside Playball. Coaches should promote a positive anti-bullying ethos in their classes and raise awareness amongst coaches and children that bullying will not be tolerated. By emphasising the Code of Behaviour, coaches should create an environment in which children are valued as individuals and are encouraged and affirmed.

### **What is bullying?**

Bullying can be defined as repeated aggression be it verbal, psychological, or physical conducted by an individual or group against others. Bullying is intentional and it includes behaviours such as teasing, taunting, exclusion, tormenting (e.g. hiding possessions, threatening gestures), threatening, spreading rumours, hitting and extortion, by one or more persons against a victim.

Bullying contains 7 key features:

- An intention to be hurtful;
- The intention is carried out;
- The behaviour harms the target;
- The bully overwhelms the target with his or her power;
- There is often no justification for the action;
- The behaviour repeats itself again and again;
- The bully derives a sense of satisfaction from hurting the target.

Bullying is usually carried out secretly and in an atmosphere of fear. A child who is being bullied may be too afraid to tell anyone about it or may have difficulty communicating that they are being bullied for a variety of reasons.

It is important then that coaches should be aware of the signs that might indicate a child is being bullied.

### **Potential Indicators of Bullying**

- Physical signs (unexplained bruises or scratches);
- Damage to personal belongings;
- Having money or personal belongings stolen;
- Frequent loss of subs or pocket money;
- Having few friends;
- Frequently the target of jokes;
- Cyber Bullying – receiving threatening/abusive texts, emails or comments on social networking sites;
- Hesitant of coming to meetings or taking part in activities;
- Fearful behaviour (fear of walking to meeting, taking a different route or asking to be driven);
- Unexplained changes in behaviour (stressed, withdrawn, stammering, moody, irritable, upset, distressed);
- Not eating;
- Anxiety (indicated by nail biting, fearfulness);

- Attempting suicide or hinting at suicide.

NB: There are other possible reasons for many of these indicators.

### **What can a coach do if a child tells them they are being bullied?**

- Listen calmly and accept what is said.
- Take notes following the conversation and keep on files as this forms the basis of the bullying report. Notes should include nature of incident, date, time, location, names of those involved, witnesses, relevant history and child's response.
- Reassure that help is available, action will be taken, the child was right to tell, it is not their fault and it could happen to anyone.
- Negotiate confidentiality – be clear you'll only tell people who need to know.
- Ensure the child's safety. The coach should be aware that the safety of the child is paramount and this can be maintained through appropriate supervision. Liaise with the parents/guardians in relation to a solution and possible actions.
- Tell the child that you will keep them informed and how you intend to proceed.
- Make an intervention – all actions should be guided by the needs of the child. Inform the coach of your concerns. Decide what action to take (choose response from options listed below) and by whom.
- Make a record of facts rather than opinions. Include details from the bullying report, details recounted by others involved, any agreements made, an account of action taken and suggestions for follow up and monitoring.

### **Practical Steps to Prevent and Counter Bullying**

- Use children as a resource in countering bullying and to foster a "permission to tell" culture in the group.
- Let children know who they should tell if they are being bullied themselves or if someone else is being bullied.
- Reassure children that they will be listened to and that an intervention will be made if they are being bullied.
- Teach children to co-operate, negotiate and help others, particularly new or different children.
- Never tell a child to ignore the bullying or to take the law into their own hands by retaliating.
- Make every member aware of how a bullying incident will be dealt with in the group. Parents and guardians should also be made aware of this.
- Apply these procedures fairly and consistently.