Reach Deaf Services:

Child Protection and Welfare Policy and Procedures

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1.0 Policy Statement:

This is the Child Protection and Welfare Policy of Reach Deaf Services. This policy applies primarily to the Boarding Campus of Reach Deaf Services.
However, safeguarding responsibilities apply across all Reach Deaf Services functions.

The Chaplaincy Service and Supported Living Service (SLS) do not primarily provide services to children; however, staff may come into contact with:

- children on and off campus as part of their work;
- Children and young people supported by Reach Deaf Services Boarding Campus
- all adults who disclose past abuse (retrospective abuse); or
- information indicating that a child may be at risk.

In these situations, the Chaplaincy Service and SLS will follow the reporting pathways outlined in this policy and contact their Designated Liaison Person (DLP). When working in other organisations such as schools, churches, community groups or external agencies, staff must also comply with the safeguarding policies and procedures in place within those settings.

Reach Deaf Services recognises that Chaplaincy Services may be provided through Irish Sign Language (ISL) and British Sign Language (BSL). Safeguarding responsibilities and reporting obligations apply equally regardless of the communication method used.

A Designated Liaison Person (DLP) is assigned to the Chaplaincy, and safeguarding concerns arising in SLS are escalated to the organisational DLP structure in Reach Deaf Services.

This policy is prepared to comply with the Children First Act 2015, Children First: National Guidance for the Protection and Welfare of Children (2017), and the HSE National Child Protection and Welfare Policy (Effective 1 March 2026).

Reach Deaf Services is fully committed to safeguarding and promoting the welfare of all children. This policy applies primarily to the Boarding Campuses, where children and young people receive residential support during the academic term. It also applies to all Reach Deaf Services employees, volunteers, students, contractors and Board members who may, through the course of their work, encounter child protection and welfare concerns.

Reach Deaf Services recognises that child protection and welfare concerns may arise in a variety of ways and across all areas of service provision. Staff may receive disclosures directly from children, observe indicators of abuse or neglect, receive information from parents, carers or professionals, or become aware of concerns through their work with children and families. All concerns relating to the protection and welfare of children will be responded to in accordance with this policy and the relevant reporting procedures.

In aligning with the updated **HSE National Child Protection and Welfare Policy (2026)**,

Reach Deaf Services ensures that:

- All safeguarding and child protection measures reflect up-to-date national HSE standards and requirements.
- All staff understand their legal obligations, roles, and responsibilities in identifying, responding to, and reporting child protection and welfare concerns.
- All policies and procedures are consistent with the HSE framework for safe environments, recognising and responding to concerns, sharing information appropriately, and maintaining accurate records.

Reach Deaf Services remains dedicated to promoting the welfare of children, safeguarding them from harm, and ensuring that child protection is central to all aspects of our service.

2.0 Policy Purpose:

2.1 The purpose of this policy is to provide clear guidance on safeguarding, protecting and promoting the welfare of all children. It outlines the responsibilities of Reach Deaf Services staff in recognising, responding to, reporting and recording child protection and welfare concerns. The policy applies to concerns arising within Reach Deaf Services and to concerns relating to any child that may come to the attention of staff in the course of their work. It ensures that responses to child protection and welfare concerns are consistent with Children First: National Guidance for the Protection and Welfare of Children (2017), the Children First Act (2015) and the HSE National Child Protection and Welfare Policy (2026).

2.2 In accordance with *Children First: National Guidance for the Protection and Welfare of Children* (2017) and the HSE National Child Protection and Welfare Policy (2026), Reach Deaf Services recognises its responsibility to take appropriate and timely action where concerns for a child's safety or welfare arise, whether inside or outside the organisation.

This responsibility includes:

- Reporting concerns to the civil authorities and supporting those authorities in assessments or investigations, as appropriate.
- Ensuring all staff understand their safeguarding obligations, including the duty to follow established procedures for responding to and escalating concerns.
- Respecting the rights and responsibilities of parents and guardians, and informing them when a report is made, unless doing so would place the child at further risk, consistent with national guidance.

3.0 Policy Scope:

3.1 This policy applies to all individuals working on behalf of Reach Deaf Services, including employees, contractors, students, volunteers, and Board members. In line with the HSE National Child Protection and Welfare Policy (2026), all such individuals are required to read, understand, and adhere to the safeguarding roles, responsibilities, and procedures outlined in this policy and in the HSE's child protection framework.

3.2 This policy applies to all children under the age of 18. Some young adults availing of the Boarding Service may meet the definition of a vulnerable adult. In such circumstances, Reach Deaf Services will follow the *HSE Safeguarding Vulnerable Persons at Risk of Abuse: National Policy and Procedures* and the organisation's Safeguarding and Responding to Allegations of Abuse (Adult Policy) to ensure appropriate safeguarding measures are implemented.

3.3 Retrospective Disclosures and Disclosures of Harm by Adults This policy also applies where an adult discloses abuse that they experienced as a child, or where an adult discloses that they have caused harm to a child, either currently or in the past. Such disclosures must be assessed in accordance with Children First, Tusla guidance and the HSE National Child Protection and Welfare Policy to determine whether there is a current or potential risk to any child. Where appropriate, concerns will be reported to Tusla using the relevant reporting pathway, including the Retrospective Abuse Report Form (RARF).

4.0 Glossary of Terms and Definitions:

4.1 A child: A *child*, as defined by the **Child Care Act 1991**, is a person under the age of 18 years, excluding a person who is or has been married. From a child

safeguarding and protection perspective, a child is someone who is under 18 years of age.

For the purposes of this policy, a young adult aged 16 or 17 years may consent independently to healthcare interventions, provided they have the capacity to do so. Their views and autonomy should be respected, while also ensuring appropriate safeguarding measures and supports are in place.

Note: A young adult refers to an individual aged 18 to 25 years, it's a non-statutory term used commonly.

4.2 Harm: Under the Children First Act 2015, the term ''harm'' in relation to a child includes:

- **Assault, ill-treatment, or neglect** of the child in a manner that seriously affects, or is likely to seriously affect, the child's health, development, or welfare,
  OR
- **Sexual abuse**, whether caused by a single act, omission, circumstance, or a series or combination of acts, omissions, or circumstances.

This is the legal definition used to determine the threshold for mandated reporting. A disclosure from a child that they believe they have been harmed must be reported to Tusla.

4.3 Child Protection Concern: According to *Children First: National Guidance for the Protection and Welfare of Children (2017)*, Tusla should always be informed when a person has reasonable grounds for concern that a child may have been, is being, or is at risk of being abused or neglected.

4.4 Types of Abuse and how they may be recognised

Children First categorises abuse under four headings. A child may experience more than one type of abuse simultaneously.

4.4.1 Physical Abuse: Physical abuse occurs when someone deliberately hurts a child or puts them at risk of being physically hurt. It may be a single or repeated incident and may include:

- Physical punishment
- Beating, slapping hitting, kicking
- Pushing, shaking, throwing
- Pinching, biting, choking, hair pulling
- Excessive force in handling
- Deliberate poisoning
- Suffocation
- Fabricated or induced illness

- Female genital mutilation (FGM)

Note: The defence of “reasonable chastisement” was abolished under the Children First Act 2015.

4.4.2 Emotional Abuse: Emotional abuse involves the systematic emotional or psychological ill-treatment of a child. It occurs when a child’s basic needs for attention, affection, consistency, and security are unmet. It may include:

- rejection
- persistent criticism, sarcasm, blaming or hostility
- lack of comfort, affection, praise
- lack of attachment or continuity of care
- lack of stimulation (e.g., play, social interaction)
- bullying
- conditional parenting
- extreme over-protection
- inappropriate non-physical punishment
- exposure to conflict or violence
- unrealistic expectations

Children may show signs such as low self-esteem, underachievement, aggression, or unhappiness.

4.4.3 Sexual Abuse: Sexual abuse occurs when a child is used by another person for sexual arousal or gratification. It includes:

- sexual acts performed in a child’s presence
- inviting or coercing sexual touching
- intentional touching or molesting
- masturbation in the presence of a child
- oral, vaginal, or anal intercourse
- sexual exploitation
- showing sexually explicit material to a child
- exposing a child to abusive or inappropriate online content

Note on Consent and Young People Aged 15–17 Years

The legal age of consent to sexual activity in Ireland is 17 years. However, staff should be aware that sexual activity involving young people aged 15–17 years can present complex safeguarding considerations. Not all sexual activity involving young people under the age of 17 automatically constitutes child sexual abuse or requires a report to An Garda Síochána. The age difference between the young people involved, the presence of coercion, exploitation, intimidation, grooming, power imbalance, capacity to consent, vulnerability, disability, and the level of risk to the young person must all be considered.

Any concern relating to sexual activity involving a child or young person under the age of 18 must be discussed with the Designated Liaison Person (DLP). Where uncertainty exists, advice should be sought from Tusla. The welfare, safety and best interests of the child must remain the primary consideration in all decision-making.

Mandated persons should assess concerns in line with the Children First Act 2015, Children First: National Guidance for the Protection and Welfare of Children and the HSE National Child Protection and Welfare Policy when determining whether a mandated report is required. Staff must also comply with the Criminal Justice (Withholding of Information on Offences Against Children and Vulnerable Persons) Act 2012. This Act makes it a criminal offence to withhold information about certain serious offences against children or vulnerable persons where that information could assist An Garda Síochána in investigating or prosecuting the offence. Staff must comply with their legal duty to report such information.

Further guidance on reporting obligations to An Garda Síochána under this legislation is provided in Sections 6.4 and 6.6 of this policy

4.4.4 Neglect: Neglect occurs where a child does not receive adequate care or supervision, resulting in harm to their health or development.
It may include:

- persistent lack of supervision
- malnutrition or inadequate feeding
- inadequate living conditions
- lack of warmth or clothing
- poor hygiene
- exposure to danger
- persistent non-attendance at school
- failure to provide appropriate medical care
- emotional neglect
- abandonment or desertion

Neglect may be associated with parental substance misuse, mental ill-health, domestic violence, or disability.

Other Welfare Concerns: Where a concern does not clearly fall into the above categories, staff must consult the Designated Liaison Person (DLP**)**, who may seek advice from Tusla.

4.4.5 Risk of Systemic Abuse in Care Settings

(Organisational Safeguarding Category – Recognised by Reach Deaf Services)

Risk of systemic abuse refers to harm arising not from one individual but from systems, routines, workplace culture, or institutional practices. The HSE National Child Protection and Welfare Policy (2026) emphasises the importance of safe

environments, robust safeguarding systems, and organisational responsibility in preventing harm.

Systemic harm may occur through both:

- **Acts of commission** (harmful actions)
- **Acts of omission** (failure to protect or act)

Possible indicators include:

- "That's how we've always done it" attitudes
- Routines overriding individual needs
- One-size-fits-all rules
- Limited child participation in decisions
- Low expectations of children
- Communication needs not adequately supported
- Over-protection limiting independence
- Staff discomfort with raising concerns
- Defensive staff culture
- Normalisation of unsafe or outdated practices

Why included:
This category is particularly relevant in group living or boarding settings.
Reach Deaf Services incorporates awareness of systemic risk into in-house safeguarding training, reflective practice, and supervision.

4.4.6 Reasonable Grounds for Concern
See **Appendix 2** for guidance on what constitutes reasonable grounds for concern.

4.4.7 CPWR Form: Child Protection and Welfare Report Form
This form is used to report any concerns about the welfare of children under the age of 18.

4.4.8 Retrospective Abuse Report Form (RARF) A Retrospective Abuse Report Form (RARF) is used when an adult discloses abuse that they experienced as a child. While the person making the disclosure is now an adult, the concern must be assessed to determine whether there is a current or potential risk to any child. Reports should be made to Tusla using the Retrospective Abuse Report Form (RARF) where appropriate. The purpose of reporting is to assist in assessing whether children may currently be at risk from the alleged perpetrator or in similar circumstances.

Further guidance on responding to retrospective disclosures is contained in Section 6.8 of this policy.

5.0 Roles and Responsibilities:

Note: Every person who works for, or on behalf of, Reach Deaf Services has a responsibility for the protection and welfare of children.

5.1 Chief Executive Officer (CEO):

The CEO holds overall organisational responsibility for ensuring the protection and welfare of children across all Reach Deaf Services settings.
The CEO:

5.1.1 Reports to the Board of Reach Deaf Services on child protection and safeguarding matters at each Board meeting.
5.1.2 Maintains regular communication with the Chair of the Board and escalates concerns in line with good governance standards.
5.1.3 Ensures systems are in place for timely and appropriate sharing of information between the Boarding Campus and the Holy Family School for the Deaf.
5.1.4 Ensures organisational compliance with safeguarding legislation, Children First, and the HSE National Child Protection and Welfare Policy (2026).
Additional responsibilities may appear elsewhere in this policy.

5.2 Head of Support Services:

The Head of Support Services provides safeguarding leadership. This role does not act as the DLP but ensures safeguarding structures function effectively.
The Head of Support Services:
5.2.1 Oversees safeguarding governance, quality assurance, and compliance across all services.
5.2.2 Ensures the safeguarding framework aligns with Children First, Tusla guidance, and HSE National Child Protection and Welfare Policy (2026).
5.2.3 Ensures that policies, procedures, risk assessments, and training structures are in place and reviewed regularly.
5.2.4 Ensures the Child Safeguarding Statement and Child Protection Policy are reviewed every two years or sooner.
5.2.5 Ensures all safeguarding documentation is accessible, including ISL-adapted versions.
5.2.6 Oversees workforce training systems and ensures appropriate staff compliance monitoring.
5.2.7 Receives aggregated safeguarding data from Care Managers (DLPs) for monitoring and governance purposes.
5.2.8 Supports reflective practice, safeguarding culture development, and continuous improvement.

Appointment of Designated Liaison Persons (DLPs) and Deputy Designated Liaison Persons (DDLPs)

The Chief Executive Officer (CEO) and the Head of Support Services formally appoint the Care Manager of each Boarding Campus as the Designated Liaison Person (DLP) for that service. Due to the operation of two Boarding Campuses, Reach Deaf Services has a designated DLP for each campus. The appointed DLP is

responsible for receiving child protection and welfare concerns, consulting as required, making decisions regarding notifications to Tusla and/or An Garda Síochána, and acting as the primary liaison with statutory authorities.

The Chief Executive Officer (CEO) and the Head of Support Services also formally appoints designated Team Leaders as Deputy Designated Liaison Persons (DDLPs). The Deputy DLP supports the DLP in carrying out safeguarding responsibilities and may undertake delegated safeguarding functions in the absence of the DLP.

5.3 Care Managers:
Care Managers hold the operational responsibility for safeguarding and act as the Designated Liaison Person (DLP) while on duty. They carry out the full range of DLP functions, including decision-making and reporting.

The Care Manager (as DLP) is responsible for:

5.3.1 Informing the CEO and the Head of Support Services of concerns requiring governance oversight.
5.3.2 Maintaining records of all safeguarding concerns and providing updates as required and formerly at the Safeguarding, Protection and Welfare Committee Meetings.
5.3.3 Completing the Children First Self-Assessment Tool.
5.3.4 Maintaining an up-to-date list of mandated persons.
5.3.5 Participating in the updating of the policy and Child Safeguarding Statement every two years or as required.
5.3.6 Developing, reviewing, and updating risk assessments relating to safeguarding and seeking Tusla's feedback.
5.3.7 Conducting preliminary enquiries to determine whether thresholds for reporting are met.
5.3.8 Deciding, where appropriate, not to notify a concern and providing written reasons to the reporting staff member.
5.3.9 Seeking Tusla's advice on informing parents, where needed.
5.3.10 Informing parents of reports to civil authorities unless doing so places the child at further risk.
5.3.11 Reporting concerns to Tusla without delay via the electronic reporting system.
5.3.12 Making joint reports with mandated persons when required.
5.3.13 Reporting to An Garda Síochána if a serious offence may have been committed.
5.3.14 Drawing up risk assessments to minimise risk to the child and seeking Tusla's feedback.
5.3.15 Implementing further safety measures following Tusla/Garda outcomes.
5.3.16 Considering risks to other children and taking protective measures where needed.
5.3.17 Acting as liaison with Tusla, An Garda Síochána, and other external agencies.
5.3.18 Ensuring staff knowledge, compliance, and training requirements are met.
5.3.19 Ensuring all staff sign the policy (or access the ISL version) and understand safeguarding responsibilities.

5.3.20 Keeping updated on new safeguarding developments.
5.3.21 Ensuring proper safeguarding records are kept, maintained, and stored securely.
5.3.22 Acting as the *Relevant Person* for the Child Safeguarding Statement.
Additional responsibilities may appear elsewhere in this policy.

5.4 Team Leaders:

Team Leaders act as **Deputy DLPs while on duty** and support the operational DLP (Care Manager). They are responsible for:

5.4.1 Seeking Tusla's advice where appropriate.
5.4.2 Informing parents of concerns when safe and appropriate.
5.4.3 Reporting concerns to Tusla without delay via the electronic reporting system.
5.4.4 Making joint reports with mandated persons if requested
5.4.5 Reporting serious offence concerns to An Garda Síochána.
5.4.6 Supporting risk assessment development and notifying Tusla where relevant.
5.4.7 Implementing safety measures following Tusla or Garda outcomes.
5.4.8 Considering risks to other children and supporting necessary protective steps.
5.4.9 Acting as a resource person to staff with safeguarding concerns.
5.4.10 Ensuring the policy is available to children and families.
5.4.11 Maintaining safeguarding training knowledge.
5.4.12 Ensuring required training is completed.
5.4.13 Maintaining safeguarding records appropriately.
5.4.14 Identifying additional policies/procedures needed to ensure safety.

5.5 Mandated Persons:

Mandated persons at Reach Deaf Services must:

5.5.1 Report harm as defined in the Children First Act 2015.

5.5.2 Mandated persons must understand the distinction between a child protection or welfare concern and a mandated report under the Children First Act 2015. A child protection or welfare concern may arise where there are reasonable grounds for concern that a child may have been, is being, or is at risk of abuse or neglect. Such concerns must be discussed with the Designated Liaison Person (DLP) and, where appropriate, reported to Tusla as a child protection or welfare concern.

The Children First Act 2015 sets specific thresholds for mandated reporting. For physical abuse, emotional abuse/ill-treatment and neglect, the threshold is harm as defined in the Act. For sexual abuse, a mandated report must be made where a mandated person knows, believes, or has reasonable grounds to suspect that a child has been, is being, or is at risk of being sexually abused.

The absence of sufficient information to determine whether the threshold for a mandated report has been met should not prevent concerns being discussed with the DLP and, where appropriate, referred to Tusla as a child protection or welfare concern.

5.5.3 Report all concerns of sexual abuse as mandated reports, subject to the limited exceptions for older children, as defined under the Children First Act 2015.
5.5.4 Know that their obligation is not discharged by another person making the report.
5.5.5 Assist Tusla in assessments when requested. Reporting concerns to Tusla without delay via the electronic reporting system.
5.5.6 Follow all statutory requirements under the Children First Act 2015 and the Criminal Justice (Withholding of Information on Offences Against Children and Vulnerable Persons) Act 2012.
5.5.7 Share necessary information internally for child safety, under DLP direction.

5.5.8 Mandated and Non-Mandated Staff Responsibilities

Reach Deaf Services recognises that safeguarding is everyone's responsibility. All staff, whether mandated persons or non-mandated persons, must report child protection and welfare concerns in accordance with this policy.

Mandated persons have additional statutory obligations under the Children First Act 2015 and are legally required to submit a mandated report to Tusla where they know, believe, or have reasonable grounds to suspect that a child has been harmed, is being harmed, or is at risk of harm, as defined by the Act. A mandated report must also be made where they know, believe, or have reasonable grounds to suspect that a child has been, is being, or is at risk of being sexually abused.

Mandated persons should not disregard or fail to act on a child protection concern because they are unable to determine whether the threshold for a mandated report has been met. All child protection concerns should be discussed with the DLP and, where appropriate, reported to Tusla as a child protection or welfare concern.

Non-mandated staff do not have a statutory reporting obligation under the Children First Act 2015 but must report all child protection and welfare concerns to the Designated Liaison Person (DLP), Deputy DLP, or line manager without delay.

The reporting pathways for mandated and non-mandated staff are outlined in Appendix 4: Reporting Responsibilities of Mandated and Non-Mandated Staff.

5.6 Safeguarding, Protection and Welfare Committee:

5.6.1 The Safeguarding, Protection and Welfare Committee is a committee of the Board of Reach Deaf Services.
5.6.2 The Board appoints the members of this Committee and is Chaired by a Board member.
5.6.3 Committee Membership and Attendance.
The Safeguarding, Protection and Welfare Committee is comprised primarily of external members appointed by the Board of Reach Deaf Services to provide independent oversight and assurance regarding safeguarding, protection and welfare matters. Membership is drawn from a range of professional disciplines and community perspectives, including social work, legal, safeguarding, and Deaf community representation. The Board seeks to maintain this diverse mix of expertise and lived experience at all times, recognising the value it brings to robust oversight, challenge, and guidance in relation to safeguarding, protection, and welfare.

The following Reach Deaf Services personnel attend Committee meetings in an advisory, reporting and operational capacity:

- Chief Executive Officer (CEO)
- Head of Support Services
- Designated Liaison Person(s) (DLPs)
- Designated Officer(s)
- Any other staff member or professional invited by the Committee to support its work

Reach Deaf Services personnel attending Committee meetings contribute to safeguarding governance, provide reports, updates and specialist advice, and support the Committee in carrying out its functions. Committee membership and attendance arrangements are reviewed by the Board as required

5.6.4 The Committee reviews safeguarding and related policies in draft form and recommends them to the Board for approval.
5.6.5 The Committee exercises oversight—on behalf of the Board—of the implementation of safeguarding policies and their evaluation and review.
5.6.6 The Committee monitors safeguarding trends, compliance, risk areas, and organisational learning.
5.6.7 The Committee reports formally to the Board at agreed intervals.
5.6.8 Operational implementation of this Child Protection and Welfare Policy remains the responsibility of the CEO, Head of Support Services, operational DLPs (Care Managers), and relevant staff teams across boarding, chaplaincy, and other services.

5.7 DLP Meetings (School & Boarding Campus Collaboration):

5.7.1 DLP Meetings facilitate collaboration between Reach Deaf Services and Holy Family School for the Deaf.
5.7.2 Meetings occur three times annually unless additional meetings are required.
5.7.3 Attendees include:

- The DLP for Holy Family School for the Deaf
- The DLP(s) for Reach Deaf Services Boarding Campus
- Representatives of the diocesan Child Safeguarding and Protection Service (CSPS)
- CEO of Reach Deaf Services
- Head of Support Services

5.7.4 The purpose of the meetings is to discuss child protection and welfare issues arising in the course of work with children attending the school and/or residing in the Boarding Campus.
5.7.5 The meetings support consistency, shared learning, and collaborative safeguarding practice across both services.
5.7.6 The meetings ensure timely and appropriate information sharing in line with Children First and organisational protocols.
5.7.7 Outputs from these meetings may inform policy improvement, shared training needs, and practice development.

5.7.8 Overall accountability for safeguarding governance, compliance and the effectiveness of safeguarding arrangements within Reach Deaf Services remains with the Chief Executive Officer. The Head of Support Services provides safeguarding oversight, guidance and quality assurance to support the DLP structure.

5.8 Responsibilities of All Staff:

5.8.1 Every staff member has a responsibility to protect and safeguard children.
5.8.2 All staff must familiarise themselves with this Child Protection and Welfare Policy and sign to confirm they have read it (or viewed the ISL version).
5.8.3 Staff must behave in accordance with this policy at all times.
5.8.4 Staff must attend Reach Deaf Services safeguarding training delivered on a two-year cycle, including a full one-day refresher.
5.8.5 Staff must be knowledgeable about:

- The Child Safeguarding Statement
- Children First National Guidance for the Protection and Welfare of Children (2017)
- Tusla reporting procedures
- Their responsibilities as mandated persons (if applicable)

5.8.6 Staff must attend workshops throughout the year to stay updated on legislation, reporting structures, signs of abuse, organisational learning, and emerging safeguarding concerns.
5.8.7 All mandatory training will be adapted to include Deaf culture and Irish Sign Language (ISL) as required.
5.8.8 Staff must complete Tusla Children First e-Learning every two years.

5.8.9 Staff must complete HSE Safeguarding Training every three years.
5.8.10 Staff must attend an annual Trust in Care Workshop.
5.8.11 Staff must report any concerns for the protection or welfare of children to their line manager or directly to the DLP (operational Care Manager on duty).
5.8.12 If a staff member disagrees with a DLP decision not to report, they may make a report directly to Tusla or An Garda Síochána.
5.8.13 If there is immediate risk to a child, staff must contact An Garda Síochána without delay.
5.8.14 Staff may report organisational concerns under the Whistle-blower Policy without fear of adverse consequences.
5.8.15 Staff must assist Tusla and/or An Garda Síochána during assessments or investigations if required.
5.8.16 Staff must support children and families in line with their roles and responsibilities.
5.8.17 Additional responsibilities may be listed elsewhere in this policy.

6.0 Procedures:

(Note: Adult safeguarding is covered in the separate Reach Deaf Services Safeguarding and Responding to Allegations of Abuse (Adult Policy).)

6.1 Procedure when staff have reasonable suspicion, witness, or receive a disclosure/allegation of abuse from a child

6.1.1 **Paramountcy**: The safety and wellbeing of the child is Reach Deaf Services' primary concern. Staff act immediately to protect the child and others potentially at risk.
6.1.2 **Rights of all involved**: The rights and fair procedures of any person named in an allegation will be respected, without compromising child safety.
6.1.3 **Confidentiality (need-to-know):** Allegations are handled confidentially and information is shared only on a need-to-know basis to protect the child and enable statutory assessment. Sharing for child protection is **not** a breach of confidentiality.
6.1.4 **Organisational learning:** A confidential log of safeguarding concerns is maintained for governance oversight and learning. Summary updates on ongoing/closed cases are provided to the Board via the CEO.

6.2 Responding to a Disclosure (Recognise → Respond → Inform)

6.2.1 When a child discloses, staff should:

- Remain calm, adopt a non-reactive, supportive stance.
- Explain the limits of confidentiality in child-friendly and accessible ways (using ISL/interpreters where required).
- Use the child's own words; avoid leading questions; clarify only as necessary.
- Acknowledge and believe; do not judge the child or the alleged perpetrator; avoid false reassurance about timelines.
- Record promptly (verbatim where possible), date, sign; use ISL support where needed.

- Continue supportive contact (positive relationship, open communication, inclusion in routine).
- Do not discuss with other staff except on a need-to-know basis and with the line manager/DLP.

6.2.2 Reasonable Grounds for Concern:

Under *Children First: National Guidance for the Protection and Welfare of Children (2017)*, staff must report any child protection or welfare concern where there are **reasonable grounds for concern**.
These include, but are not limited to:

- a child disclosing that they have been abused;
- a witness account of abuse;
- an admission or indication by a person that they have harmed a child;
- signs, injuries, or behaviours that are consistent with abuse and unlikely to have another explanation;
- concerns that a child may be at risk of sexual abuse;
- a pattern of ongoing low-level concerns which, when considered together, indicate a potential risk.

Staff may consult the DLP or Tusla Duty Social Worker (without identifying the child) where uncertainty exists.

6.2.3 Immediate safety & evidence preservation:

- Take immediate steps to secure the child's safety. With the DDLP/your line manager/operational DLP (Care Manager/Team Leader /Care Manager on duty), consider medical assessment and preservation of potential evidence.

6.2.4 Report promptly to the DDLP/DLP (Care Manager/Team Leader/Care Manager on duty)

- Before going off shift, staff report concerns to the DDLP or line manager or the operational DLP (Care Manager on duty) without delay.
- The DLP supports threshold decision-making (reasonable grounds for concern / harm) in line with Children First and HSE reporting stages.
- Staff may report directly to Tusla/An Garda Síochána at any time if they believe this is necessary for the child's immediate safety (e.g., outside DLP/DDLP working hours), and must notify the DLP as soon as possible thereafter.
- If uncertain whether the threshold is met, staff/DLP may consult Tusla Duty Social Work without sharing identifying information. (Allegations against a deceased person should still be reported to Tusla.)

Informing parents/guardians

- Parents/guardians are informed **unless** doing so would place the child at further risk; the DLP may seek guidance from Tusla on **how** and **what** to communicate.

6.3 Protected Disclosures (Whistleblowing):

Staff may raise concerns about colleagues, managers, or systems via the Protected Disclosure Policy and/ or directly with the civil authorities. Protections apply to good faith reporters under national law.

6.4 Threshold Decision, Reporting & Joint Reporting (Report → Record → Assist)

6.4.1 Threshold Decision-Making

Staff must consult with the DLP regarding all child protection and welfare concerns unless immediate action is required to protect a child. The DLP is the designated decision-maker on behalf of Reach Deaf Services regarding whether a concern meets the threshold for notification to Tusla and/or An Garda Síochána. In reaching this decision, the DLP may consult with the reporting staff member, Deputy DLP, Head of Support Services, Tusla Duty Social Work Service, or other relevant professionals as appropriate. All consultations undertaken as part of the decision-making process must be documented and recorded.

6.4.2 Where a Decision is Made Not to Notify

6.4.1 Where the DLP determines that a concern does not meet the threshold for notification to Tusla and/or An Garda Síochána, the DLP must clearly document:

• the concern presented;
• the consultation undertaken;
• the rationale for the decision;
• any advice received;
• any actions, safeguards or monitoring arrangements identified; and
• any feedback provided to the reporting staff member.

The consultation process, decision-making rationale and any actions taken must be recorded and retained on the safeguarding record.

Where, following consultation, the DLP determines that a concern does not meet the threshold for notification to Tusla and/or An Garda Síochána, this decision represents the position of Reach Deaf Services and must be documented accordingly.

6.4.2This organisational decision does not remove or replace the individual statutory obligations of a mandated person under the Children First Act 2015. Where a mandated person knows, believes, or has reasonable grounds to suspect that a child has been harmed, is being harmed, or is at risk of harm, they remain legally entitled and obliged to submit a mandated report to Tusla in their own right, irrespective of the decision reached by the DLP on behalf of Reach Deaf Services. Where a

mandated person chooses to make an independent report, they should inform the DLP as soon as practicable, unless doing so would place a child at further risk.

6.4.3 If reasonable grounds (or harm threshold) exist, the DLP ensures a Tusla report is submitted without delay via the Tusla Web Portal (Child Protection Welfare Report Form (CPWRF) or, where applicable, RARF). Urgent matters can be phoned in first but must be followed with a portal submission within three working days (mandated persons). The portal issues an acknowledgement by email with a reference number.

6.4.4The CEO/Head of Support Services will be informed by the DLP where a report is made and especially where an allegation involves a staff member (for governance oversight).
6.4.5 Notify An Garda Síochána where appropriate (see 7.2). Information that a person may have committed a specified serious offence against a child must be reported to the Gardaí under the Criminal Justice (Withholding of Information…) Act 2012.

6.5 Safety planning & multi-agency liaison

6.5.1 A risk assessment/safety plan may be developed by the Keyworker/Team Leader/Care Manager (DLP) to minimise risk; Tusla is informed and invited to provide feedback on adequacy.

6.5.2 Following Tusla assessment and/or Garda investigation outcomes, the Care Manager (DLP) and Head of Support Services assess whether further safety measures are required and implement them.

6.5.3 The DLP/DDLP considers whether other children may be at risk and takes appropriate protective measures, including information-sharing with the school in line with agreed protocols and data protection (see 7.6).

6.5.4 Relevant staff (usually the DLP/DDLP) act as liaisons with Tusla, An Garda Síochána, and other agencies during assessments/investigations.

6.5.5 Records of concerns, decisions, and actions are created and kept securely by Team Leaders/DDLP/DLP in line with **7.7**.

6.5.6 Where an allegation is made against a staff member, the **HSE Trust in Care Policy** is invoked. HSE Policy - Trust-In-Care.pdf

6.6.6 Where reasonable grounds for concern exist, Reach Deaf Services will initiate appropriate internal processes, noting these are secondary to any criminal process.

6.6 Procedure for reporting to An Garda Síochána

6.6.1Tusla–Garda Joint Working Protocol: Tusla may notify Gardaí; however, if Tusla does not notify and staff/DLP believe the child's immediate safety is at risk or a serious specified offence may have been committed, staff/DLP must contact An Garda Síochána directly in addition to Tusla.

6.6.2 Offences alleged on the Boarding Campus are ordinarily reported to Cabra Garda Station (see Appendix 1).

6.6.3 Offences alleged off-campus are ordinarily reported to the Garda station for the area where the offence occurred / the child's home address (as appropriate).

6.6.4 Advice may be sought from the **Tusla Liaison Sergeant** (e.g., at Cabra/ Blanchardstown Garda Station).

6.6.5 Parents/guardians are informed of Garda reports **unless** doing so would place the child at further risk.

6.7 Procedure for anonymous allegations

6.7.1 Anonymous allegations are assessed and appropriate action is taken to safeguard the child.

6.7.2 All anonymous allegations of child abuse that allegedly occurred when the person was under 18 are assessed and reported to Tusla.

6.7.3 Decisions consider: seriousness, potential to obtain independent confirmation, and ongoing risk.

6.8 Procedure for historical/retrospective allegations

(including when an adult (e.g., an 18-year-old) discloses abuse experienced as a child)

6.8.1 Children First (2017) and the 2025 Addendum clarify duties where an adult discloses non-recent childhood abuse. Mandated persons must consider whether there is a current or potential risk to any child; if yes, report to Tusla (and Gardaí where appropriate). If no current risk to a child is identified, a mandated report may not be required; however, staff should still consider supports for the adult and may consult Tusla for advice.

6.8.2 The HSE reporting procedure and HSE Guide 2 include steps for adult retrospective disclosures (RARF). Reports are submitted via the Tusla Portal using the Retrospective Abuse Report Form (RARF) where applicable.

6.8.3 All historical concerns must be assessed and reported to Tusla where there may be current/potential risk to children (identifiable or not).

6.8.4 Individuals named in any complaint (historic or current) may have a right to be informed by the appropriate authorities, subject to Garda requirements and fair procedures.

6.8.5 Staff should provide or signpost supportive information to adults who disclose (e.g., counselling, advocacy), noting the separate adult-safeguarding policy for adults at risk.

6.9 Procedure for dealing with bullying and peer abuse

6.9.1 Bullying (repeated physical, verbal, or psychological aggression) is **not tolerated**. Preventive strategies are in place.

6.9.2 A culture of openness encourages children to raise concerns; children co-create and uphold an Agreement "Living Well Together at Boarding" appropriate to their age/stage.
6.9.3 Where victimisation occurs, the response focuses on **behaviours**, not labels; support is offered to both those harmed and those causing harm.

6.9.4 Physical or sexual assault by a child on another child is a child protection concern that must be reported to Tusla and, where thresholds are met, to An Garda Síochána. Indicators for Garda referral in physical assault include repeat incidents, demonstrable harm, or need for medical attention beyond first aid. Sexual assault is always reported to Gardaí.

6.9.5 The DLP (Care Manager on duty) decides on Garda reporting, seeking Garda advice if in doubt.

6.9.6 Parents/guardians of **both** children are informed promptly, given a full account of actions taken, and advised of their right to contact the civil authorities.

6.9.7 Persistent risk-causing behaviour triggers a multi-agency assessment with Tusla to evaluate the service's capacity to meet needs; additional supports may be requested.

6.9.8 Where Reach Deaf Services concludes it cannot safely continue to provide the service due to ongoing risk to others, this decision is taken only after careful multi-disciplinary consideration and the Safeguarding Protection and Welfare Committee consultation, and with support in identifying alternatives. The Admissions, Transitions, Transfers and Discharges Policy will be adhered to.

6.9.10 All steps, decisions, and communications are carefully recorded.

6.10 Procedure for information sharing and confidentiality

6.10.1 Sharing information for child protection with those who **need to know** is lawful and expected under Children First; Reach Deaf Services cooperates with Tusla in sharing records relevant to child protection and welfare.

6.10.2 Confidentiality is respected to the greatest extent consistent with child safety and law.

6.10.3 Information sharing is carried out per national guidance, this policy, and law; reporting to statutory authorities is **not** a breach of confidentiality.

6.10.4 The Criminal Justice (Withholding of Information on Offences against Children and Vulnerable Persons) Act 2012 creates a criminal offence for failing, without reasonable excuse, to disclose information about certain serious specified offences against a child/vulnerable person to Gardaí.

6.10.5 The Protections for Persons Reporting Child Abuse Act 1998 provides civil immunity and protects employees from penalisation for good-faith reporting; knowingly false reporting is an offence.
6.10.6 School–Boarding information sharing: In line with agreed protocols, the CEO and School Principal oversee timely, appropriate two-way information sharing between the school and Reach Deaf Services on a need-to-know basis. DLP notifications are made by each organisation's DLP; each alerts the other when notifications relate to a child who is both a day pupil and a child/young person boarding, respecting data protection. DLP Meetings (see **6.7**) are **not** a reporting mechanism and do not share identifying information with CSPS; parental/ child/ young adults information-sharing forms are used to explain the lawful bases for sharing.

6.11 Procedure for Secure Storage and Access to Child Protection and Safeguarding Records:

6.11.1 When a staff member records a child protection or safeguarding concern, the original Incident Report Form must be forwarded without delay to the Designated Liaison Person (Care Manager on duty) or Deputy DLP (Team Leader).
6.11.2 Where the concern requires notification to Tusla and/or An Garda Síochána, the report must be submitted through the appropriate statutory reporting portal by the Designated Liaison Person or jointly with the mandated person, where applicable.
6.11.3 A copy of the submitted report, including the confirmation or reference number, must be printed and retained.
6.11.4 All documentation relating to child protection and safeguarding concerns, including:

- Incident Report Forms;
- reports submitted to Tusla or An Garda Síochána;
- records of decisions, actions, and correspondence,

must be placed in the Child Protection and Safeguarding File.
6.11.5The Child Protection and Safeguarding File is stored in:

- a secure locked cabinet;
- located within a locked office;
- on the St Joseph's Campus.

6.11.6 Access to safeguarding records is strictly controlled.
6.11.7 Only the following roles are authorised to access safeguarding records:

- Care Managers (Designated Liaison Persons);

- Team Leaders (Deputy Designated Liaison Persons);
- Head of Support Services;
- Chief Executive Officer (CEO).

6.11.8 Safeguarding records may only be accessed on a need-to-know basis and solely for the purposes of safeguarding, supervision, audit, governance oversight, or statutory requirements.

6.11.9 All safeguarding documentation is managed in accordance with:

- GDPR and the Data Protection Act 2018;
- Children First guidance;
- HSE record-keeping standards.

6.11.10 Oversight and Accountability: Oversight of child protection and safeguarding records, including compliance with secure storage, access controls, and retention requirements, forms part of:

- safeguarding governance arrangements;
- supervision and management review;
- internal audits; and
- review by the Safeguarding, Protection and Welfare Committee.

6.12 Procedure for the use of mobile phones, IT equipment and social media:

6.12.1 Staff must follow the Employee Handbook and boarding policies.

6.12.2 Professional boundaries apply online as offline. Use only work devices/accounts for approved communications.

6.12.3 Staff must **not**: collect or provide personal contact details without a work purpose/approval; access the internet with a child unless authorised; "friend" children on social media; take or share images without appropriate permissions; use personal email/phones to communicate with children.

6.12.4 Children are guided on safe online behaviour; anti-grooming awareness and anti-bullying measures are emphasised. Shared devices are protected and monitored appropriately.

6.13 Procedure for appointing a Relevant Person (Children First Act 2015):

6.13.1 The Board and CEO formally appoint the Relevant Person for the service. For the Boarding Campuses, Reach Deaf Services appoints the Care Manager (operational DLP) as the Relevant Person. The name is listed in this policy and in the Child Safeguarding Statement.

6.14 Procedure for maintaining a list of Mandated Persons:

6.14.1 The Care Manager (DLP) maintains the operational list of mandated persons for the Boarding Campuses; the Head of Support Services maintains the central governance list and ensures accessibility for inspection. Both lists are kept up to date and stored in the designated secure electronic location.

7.0 Implementation Plan:

The implementation of this Child Protection and Welfare Policy will be monitored on an ongoing basis by the Chief Executive Officer (CEO), the Head of Support

Services, and the management and staff of Reach Deaf Services.
This implementation plan ensures alignment with **Children First**, Tusla expectations for reporting and compliance, and the HSE National Child Protection and Welfare Policy (2026).

7.1 Implementation Actions

Below are the key actions required to implement and maintain this policy. Responsibilities reflect the updated organisational structure.

7.1.1 Complete the Children First Implementation & Compliance Self-Audit Checklist

- Timeline: Annually
- Responsibility: Care Managers ,Head of Support Services and Policy Officer.
- Ensures compliance with Children First implementation requirements.

7.1.2 Approve, sign and circulate the Child Protection and Welfare Policy

- Timeline: Following Board approval; updated versions circulated thereafter
- Responsibility: CEO, Head of Support Services

7.1.3 Circulate and collect updated Sharing of Information & Consent Forms

- Timeline: As updates occur; ongoing until all relevant consents received
- Responsibility: Care Managers

7.1.4 Ensure this policy is accessible to all relevant persons

- Includes making accessible versions available (e.g., ISL version).
- Timeline: Ongoing
- Responsibility: Head of Support Services

7.1.5 Maintain effective information-sharing processes with Holy Family School for the Deaf

- Timeline: Ongoing
- Responsibility: CEO, Head of Support Services, Care Managers

7.1.6 Maintain an up-to-date list of Mandated Persons

- Required under the Children First Act 2015; must be accessible for inspection.
- Timeline: Ongoing
- Responsibility: Care Managers (operational list), HR Department (governance list)

7.1.7 Develop, implement and review safeguarding risk assessments

- Must reflect safe-environment requirements of the HSE National Child Protection and Welfare Policy (2026). [legislation.ie]
- Timeline: Ongoing
- Responsibility: Head of Support Services, Care Managers, Team Leaders

7.1.8 Maintain and display the Child Safeguarding Statement

- Review every two years or sooner if required.
- Timeline: Ongoing

- Responsibility: Head of Support Services

7.1.9 Ensure all staff understand the Child Safeguarding Statement and their responsibilities
- Timeline: Ongoing
- Responsibility: Head of Support Services, Care Managers, Team Leaders

7.1.10 Ensure staff are knowledgeable about Children First, mandated person duties & relevant legislation
- Timeline: Ongoing
- Responsibility: Care Managers, Team Leaders

7.1.11 Provide all required child protection safeguarding training
Includes:
- Tusla Children First e-learning (every 2 years)
- Qualified In-house trainers for Children First training
- HSE Safeguarding Training (every 3 years)
- Internal Reach Deaf Services safeguarding training (ISL-accessible)
- Training on systemic risk, Deaf-aware practice, reporting pathways
- Timeline: Ongoing
- Responsibility: Care Managers, Team Leaders / HR and Administration Team

7.1.12 Provide training on this policy and ensure an ISL version is available
- Timeline: Ongoing
- Responsibility: Head of Support Services and ISL Manager

7.1.13 Ensure staff sign to confirm they have read and understood the policy
- Timeline: On induction and each time the policy is updated
- Responsibility: Head of Support Services and Policy Officer

7.1.14 Promote ongoing safeguarding awareness through supervision, reflective practice and support
- Aligns with HSE expectations for safeguarding culture.
- Timeline: Ongoing
- Responsibility**:** Head of Support Services, Care Managers, Team Leaders

7.1.15 Ensure timely reporting, liaison and assistance with Tusla and An Garda Síochána
- Includes supporting assessments and investigations.
- Timeline: Ongoing
- Responsibility: Care Managers (DLPs), Team Leaders (Deputy DLPs), Social Care Staff, Support Workers

7.1.16 Ensure proper recording and secure storage of child protection and welfare information
- In line with HSE record-management standards and GDPR.
- Timeline: Ongoing
- Responsibility: Head of Support Services, Care Managers, Team Leaders, Social Care Staff, Support Workers

7.1.17 Host an annual Trust in Care Workshop

- Supports appropriate management of allegations against staff.
- Timeline: Annually
- Responsibility**:** Administration Team/HR

7.1.18 Monitor and manage behaviours of concern (staff or children/young people we support)

- Timeline: Ongoing
- Responsibility: Head of Support Services, Care Managers, Team Leaders

7.1.19 Ensure compliance with safe recruitment and Garda vetting requirements

- Timeline: Ongoing
- Responsibility: HR Department

7.1.20 Ensure staff receive induction, probationary support, supervision and ongoing professional guidance

- Timeline: Ongoing
- Responsibility: Care Managers, Team Leaders and HR Department

8.0 Revision and Audit:

This Child Protection and Welfare Policy will be subject to systematic review at intervals of no more than two years to ensure continued compliance with Children First: National Guidance for the Protection and Welfare of Children (2017), the HSE National Child Protection and Welfare Policy (2026), organisational learning, and legislative developments. Reviews may occur sooner where legislative, regulatory, or organisational changes require it.

The Child Safeguarding Statement will be reviewed at intervals of no more than two years, or as soon as practicable after a material matter has arisen, in accordance with the requirements of the Children First Act 2015.

The **Safeguarding, Protection and Welfare Committee** of the Reach Deaf Services Board holds responsibility for ensuring:

- Effective governance oversight of safeguarding systems,
- Assurance that the Boarding and Community Services have appropriate structures, protocols, and monitoring frameworks in place,
- Ongoing alignment with Children First, Tusla guidance, and the HSE National Child Protection and Welfare Policy (2026) requirements relating to safeguarding practice, information-sharing, and safe environments.

The Committee reports directly to the Board and may make recommendations to the CEO and the Head of Support Services regarding policy amendments, training priorities, audits, and service improvements.

9.0 Legislation and Related Reach Deaf Services Policies and Procedures:

HSE National Policies
This policy should also be read in conjunction with the following HSE national safeguarding policy:

- **HSE Trust in Care Policy –** the HSE policy on upholding the dignity and welfare of the individuals we support and the procedure for managing allegations of abuse against staff members.

HSE Accompanying Guides:
This policy must be read in conjunction with the HSE National Child Protection and Welfare Policy (2026) and its accompanying suite of four operational guides, which provide essential, practical procedures for staff:

1. Guide 1: Developing and Reviewing Child Safeguarding Statements Guide 1: Developing and Reviewing Child Safeguarding Statements
2. Guide 2: Recognising and Reporting Child Protection and Welfare Concerns Guide 2: Recognising and Reporting Child Protection and Welfare Concerns
3. Guide 3: Managing Child Protection and Welfare Records Guide 3: Managing Child Protection and Welfare Records
4. Guide 4: Sharing Child Protection and Welfare Information Guide 4: Sharing Child Protection and Welfare Information

These guides form part of the national safeguarding framework, and all staff are required to follow them as relevant to their role.

Related Reach Deaf Services Policies and Procedures:
This policy should also be read alongside the following internal Reach Deaf Services documents:
Safeguarding & Protection Policies

- Safeguarding and Responding to Allegations of Abuse (Adult Policy)
- Whistle-blowing Policy- Employee Handbook
- Helping Young People to Stay Safe Online Policy
- Anti-Bullying Policy

Behavioural, Welfare & Safety Policies

- Behaviour Support Policy
- Policy and Procedure on the use of restrictive practices
- Concerned Absence Policy

Risk, Incident & Information Management Policies

- Risk Management Policy
- Incident Management Policy
- Data Protection and Record-Keeping Procedures (where applicable)

Operational Policies/ Guidance

- Activities and Outings Policy
- Any applicable Admissions, Discharge or Supervision-related policies
- Model of Support
- Living Well Together Agreement

HR & Workforce Policies

- Employee Handbook
- Recruitment and Selection Policy
- Staff Education and Training Policy

Reach Deaf Services ensures that appropriate arrangements are in place for the care and supervision of children both on campus and off campus during activities facilitated by Reach Deaf Services staff.

External Partner Policies:
This policy sits alongside the Child Protection Policy of the Holy Family School for the Deaf, with an established and appropriate information-sharing protocol in place.

Additional Notes on Reporting Duties:
Individuals may have concerns about the practice of colleagues, managers, or organisational systems. Such concerns may be reported to civil authorities. The Reach Deaf Services Whistle-blower Policy protects individuals who raise concerns in good faith.

The above legislation, national policies, and internal procedures operate in addition to the reporting obligations outlined under the Children First Act 2015 and the HSE National Child Protection and Welfare Policy (2026).

10.0 References and Bibliography:
This policy is informed by the following legislation, national guidance documents, and safeguarding frameworks:

- Children First Act 2015 — statutory safeguarding obligations, mandated reporting, and organisational responsibilities.
- Children First: National Guidance for the Protection and Welfare of Children (2017) — national non-statutory guidelines on recognising and responding to child protection and welfare concerns.
- Children First: Addendum (2025) — *Dealing with Adult Retrospective Disclosures of Childhood Abuse* (Clarifies mandated person responsibilities in cases of non-recent abuse following the McGrath v HSE Court of Appeal ruling.)
- HSE National Child Protection and Welfare Policy (Effective 1 March 2026) — sets out safeguarding roles, responsibilities, reporting procedures, information sharing, and record-management requirements for all HSE-funded and contracted organisations.
- HSE Child Protection and Welfare Reporting Procedure (2024–2026) — includes the stages of reporting concerns, retrospective abuse guidance, joint reporting with mandated persons, and record-keeping expectations.
- Trust in Care Policy (HSE, 2005) — national guidance for managing allegations of abuse against staff members in health and social care settings.
- Tusla – Child and Family Agency:
- Online reporting portal (CPWRF & RARF)

- Child protection guidance and supports
- Children First e-learning
- Protection for Persons Reporting Child Abuse Act 1998 — civil and employment protections for persons reporting in good faith; offence of knowingly false reporting.
- Criminal Justice Act 2006
- Criminal Justice (Withholding of Information on Offences Against Children and Vulnerable Persons) Act 2012 — offence of failing to report knowledge or belief of specified serious offences against a child or vulnerable person to An Garda Síochána.
- National Vetting Bureau (Children and Vulnerable Persons) Acts 2012–2016 — statutory vetting requirements for persons working with children or vulnerable persons.
- Child Safeguarding: A Guide for Policy, Procedure and Practice (Tusla) — organisational safeguarding guidance.
- General Data Protection Regulation (GDPR) and the Data Protection Act 2018 — legal requirements relating to data protection, confidentiality, data retention, and information sharing in safeguarding contexts.

Appendix 1 – Designated Liaison Person (DLP), Deputy DLP & Statutory Contact Details

Designated Liaison Persons (Operational DLPs)
Care Managers – Reach Deaf Services Boarding Services
(Operational DLP while on duty)
St Joseph's Campus Care Manager
Mobile: 0871355971

St Mary's Campus Care Manager
Mobile: 0873597963

Email: DLPboardingcampus@reachdeafservices.ie

Deputy Designated Liaison Persons (Deputy DLPs)
Team Leaders – Reach Deaf Services Boarding Services
(Deputy DLP while on shift)
St. Joseph's
Team Leader 1: 0871678484
Team Leader 2: 0871864799
St Mary's:
Team Leader 3: 0872839997
Team Leader 4: 0872859224

Governance Oversight (Non-Operational)
Head of Support Services
Acts as DLP in the absence of Care Managers.
Mobile:

Provides safeguarding governance, compliance and strategic oversight)
Contact Details
Telephone: +353 1 830 0522
Email: info@reachdeafservices.ie

Tusla – Child and Family Agency
Reports should be submitted to Tusla via the Tusla Web Portal for:

- **Child Protection and Welfare Report Forms (CPWRF)**
- **Retrospective Abuse Report Forms (RARF)** (adult disclosing childhood abuse)

Portal: https://www.tusla.ie/children-first/web-portal/
Tusla Out of Hours Service (for Mandated Persons):
0818 776315
(Available 6pm–6am daily; 9am–5pm weekends & bank holidays)

An Garda Síochána

- For incidents **on the Reach Deaf Services Campus**:
  Cabra Garda Station: 01-666 7400
- Additional point of contact:**Blanchardstown Garda Station:** 01-666 7000
- In cases of emergency: **Dial 999 / 112 immediately.**

Joint Working Protocol – Tusla & Gardaí
Tusla may notify Gardaí directly. If they do not, and staff believe a child is at immediate risk or that a serious specified offence (sexual offences, assault causing harm, abduction, manslaughter, murder) has occurred, staff must notify Gardaí directly in addition to Tusla.

Appendix 2: Reasonable Grounds for Concern

Reasonable grounds for concern exist where a child may have been, is being, or is at risk of being abused, harmed or exploited. Reasonable grounds for a child protection or welfare concern include:

• evidence, for example an injury or behaviour, that is consistent with abuse and is unlikely to have been caused in any other way
• any concern about possible sexual abuse
• consistent signs that a child is suffering from emotional or physical neglect
• a child saying or indicating by other means that he or she has been abused
• admission or indication by an adult or a child of an alleged abuse they committed
• an account from a person who saw the child being abused.

APPENDIX 3 — Positive Safeguarding Culture & Good Practice Guidelines
Reach Deaf Services is committed to promoting a **positive safeguarding culture** in line with:

- HSE National Child Protection and Welfare Policy (2026) (safe environments, cultural vigilance, organisational responsibility)
- Children First National Guidance (2017 & 2025 Addendum)
- ISL Act 2017 – Ensuring all safeguarding practices are deaf friendly accessible, inclusive and in line with best practice standards.

A. Core principles of a positive safeguarding culture

- The welfare and safety of children is everyone's responsibility.
- Children are listened to, taken seriously, and influence decisions.
- Communication is accessible in ISL and suitable for Deaf and Hard of Hearing children.
- Staff maintain openness, transparency, and accountability in all interactions.
- Reflective practice is used to identify bias, assumptions, or safeguarding blind spots.
- Safeguarding is embedded in daily routines — not only in crises.
- Unsafe practice is challenged respectfully and promptly.
- Organisational systems are reviewed to prevent systemic drift and institutional risk.

B. Preventing systemic abuse & unsafe cultures

Reach Deaf Services maintains vigilance for systemic risks, including:

- "That's how we've always done it" attitudes
- Routines overriding individual needs
- Over-protection limiting independence
- Communication barriers not addressed
- Low expectations of children
- Defensive or closed culture where feedback is unwelcome
- Staff discomfort raising concerns
- Unsafe normalised practices or complacency

C. Staff conduct – expected behaviours

Staff commit to:

- Treating children equally & respectfully
- Using ISL and Deaf-aware communication
- Encouraging participation and autonomy
- Supporting children to express worries or concerns
- Respecting personal boundaries
- Working openly and transparently
- Reporting concerns immediately
- Maintaining confidentiality appropriately
- Collaborating with colleagues professionally

D. Staff must not:

- Physically punish a child
- Use humiliating or harmful sanctions
- Develop sexual, exploitative, or inappropriate relationships
- Gossip, minimise concerns, or condone unsafe practice
- Bully, favour, or isolate a child
- Use alcohol/drugs or attend work under their influence
- Take a child to their home
- Use inappropriate language or jokes
- Ignore concerns raised by children or staff

E. Prevention measures

Reach Deaf Services ensures:

- Safe recruitment, vetting, police and reference checks
- Proper induction, supervision, and probation
- Regular child protection training
- ISL accessibility for all safeguarding information
- Appropriate adult-child ratios and safe environments
- Accessible complaints processes
- Strong and continuous safeguarding leadership

APPENDIX 4 – Reporting Responsibilities of Mandated and Non-Mandated Staff

All Staff

All staff are responsible for:

- Recognising child protection and welfare concerns.
- Responding appropriately to concerns or disclosures.
- Taking immediate action where a child is at risk.
- Reporting concerns internally without delay.
- Cooperating with safeguarding processes and statutory agencies as required.

Non-Mandated Staff

Where a non-mandated staff member has a child protection or welfare concern, they must:

1. Ensure any immediate safety needs are addressed.
2. Report the concern to the DLP, Deputy DLP or line manager without delay.
3. Record the concern factually and contemporaneously.
4. Participate in consultation and safeguarding processes as required.
5. Be informed of decisions relating to the concern where appropriate.

Mandated Persons

Where a mandated person becomes aware of a concern that meets the threshold for harm under the Children First Act 2015, they must:

1. Ensure any immediate safety concerns are addressed.
2. Inform the DLP without delay.
3. Participate in consultation with the DLP.
4. Make or participate in a mandated report to Tusla where the threshold for mandated reporting is met.
5. Assist Tusla if requested during an assessment of a mandated report. [tusla.ie], [healthservice.hse.ie]

Joint Reporting

Reach Deaf Services encourages joint reporting between the DLP and mandated person whenever a mandated report is required. Joint reporting promotes information sharing, consistency of safeguarding actions and appropriate organisational oversight. Where a mandated person makes a report independently, they should inform the DLP as soon as practicable.

Where a Decision is Made Not to Report

If, following consultation, a decision is made that a concern does not meet the threshold for notification to Tusla, the consultation process, rationale, advice received and actions identified must be documented. Staff remain entitled to make a report directly to Tusla or An Garda Síochána if they believe a child requires protection.

Addendum

Addendum to the Child Protection and Welfare Policy of Reach Deaf Services and the Safeguarding Policy of Holy Family School for the Deaf
Revised to align with 2026 safeguarding structures and national guidance
This Addendum supplements and supports:

- The Child Protection and Welfare Policy of Reach Deaf Services, and
- The Child Protection Procedures of Holy Family School for the Deaf,
- In accordance with Children First: National Guidance for the Protection and Welfare of Children (2017) and the HSE National Child Protection and Welfare Policy (2026).

This Addendum strengthens inter-agency collaboration and sets out the agreed safeguarding information-sharing arrangements between the Boarding Campus and the School.
This Addendum is effective from: 2026.
This Addendum supersedes the 2022 version.

1. Parties to the Addendum
The parties to this agreement are:

- **Reach Deaf Services** (Boarding Campus), and
- **Holy Family School for the Deaf**

Both parties jointly recognise their responsibilities under **Children First**, including the duty to share relevant information for the **protection and welfare of children**.

2. Purpose of this Addendum
To ensure:

- Timely, appropriate, and lawful **sharing of safeguarding information**;
- Clear communication between both DLP structures;
- A shared, child-centred approach for all children attending the school and residing in the Boarding Campus;

- Compliance with national requirements for multi-agency cooperation (Children First, HSE 2026).

3. Designated Liaison Persons

Reach Deaf Services

- **Operational DLPs:** Care Managers (while on duty)
- **Deputy DLPs:** Team Leaders
- **Governance Oversight:** Head of Support Services

Holy Family School for the Deaf

- **Designated Liaison Person:** School Principal
- **Deputy DLP:** Deputy Principal

Both parties commit to maintaining up-to-date contact details and ensuring DLP availability during operational hours

4. Safeguarding Information-Sharing Between School and Boarding

The following agreements apply:

4.1 Sharing information about concerns

- The School Principal (School DLP) will inform the Care Manager acting as DLP of Reach Deaf Services of any safeguarding or child-welfare concern involving a child who resides in the Boarding Campus.
- This includes concerns managed locally within the school and those escalated to Tusla or An Garda Síochána.
- The Care Manager acting as DLP (Boarding) will inform the School Principal (School DLP) of any safeguarding or child-welfare concern involving a child who attends the school.
- In all cases, the CEO of Reach Deaf Services and the Head of Support Services will be informed in line with governance oversight structures.

4.2 Timeliness

Information will be shared:

- **As soon as practicable**,
- In line with the urgency of the concern,
- While respecting the roles of both organisations' DLPs.

4.3 Purpose of sharing

Information is shared strictly to:

- Protect the child,
- Assess ongoing risk,
- Enable coordinated safety planning, and
- Fulfil statutory safeguarding duties.

4.4 Legal bases for sharing

Information sharing is carried out under:

- Children First Act 2015
- Children First National Guidance 2017
- HSE National Child Protection and Welfare Policy 2026 (safe environments, information-sharing, record-management requirements)
- GDPR and Data Protection Act 2018 (legitimate interest, legal obligation, vital interests)

This sharing does not require parental consent in cases of child protection, though transparency is promoted wherever safe.

5. Information Sharing for Young People Aged 18 and Over

- For boarders aged 18+, consent will be sought directly from the child/ young person for sharing information with their parent/guardian.
- This does not affect the lawful sharing of safeguarding information between School and Boarding where necessary to protect a child or vulnerable young person.
- In rare circumstances (e.g., vital interests / immediate danger), information may be shared with parents/guardians without consent, in line with GDPR provisions.

This reflects both Children First and GDPR requirements.

6. Documentation and Records

6.1 A **Sharing of Information Form** must be completed for each child or young person and must be stored on **both the School file and the Boarding file**.
6.2 Where a signed Sharing of Information Form is missing or cannot be located, it must be **obtained without delay** and placed on file in both organisations.
6.3 Both Reach Deaf Services and Holy Family School for the Deaf will maintain secure records in accordance with:

- **GDPR and the Data Protection Act 2018**;
- **Children First guidance**; and
- **HSE record-keeping standards**.
- 6.4 All documentation relating to child protection and safeguarding concerns, including Sharing of Information Forms and records of information exchange between School and Boarding, must be:
- recorded accurately and contemporaneously;
- stored securely;
- accessed only on a **strict need-to-know basis**; and
- retained in line with national guidance and organisational record-retention requirements.
- 6.5 Oversight of documentation and record-keeping practices forms part of safeguarding governance, audit, supervision, and review processes within both organisations.

7. Safeguarding Practice & Training Alignment

- The **Dublin Diocese Safeguarding Team** will continue to provide safeguarding training to all school staff, including SNAs and auxiliary staff.
- This will be complemented by Department of Education training as relevant.
- Reach Deaf Services staff will receive training via:
  - Internal safeguarding training (including Deaf-aware and systemic-risk components),
  - Tusla Children First e-learning,
  - HSE safeguarding training.

Both parties commit to ongoing professional development and alignment of safeguarding practice.

8. Policy Updates & Review

- Any changes to either organisation's Child Protection Policy will be communicated immediately to the other party.
- Where necessary, a revised Addendum will be agreed and signed.

9. Dispute Resolution

If there is a conflict or uncertainty between this Addendum and either organisation's policy:

- The **Diocesan Child Safeguarding and Protection Service (CSPS)** will be consulted for guidance.

10. Agreement

This Addendum forms part of the safeguarding arrangements between **Reach Deaf Services** and **Holy Family School for the Deaf**.

By signing below, both parties confirm their agreement to the shared responsibilities and cooperation outlined in this document.

For Reach Deaf Services	**For Holy Family School for the Deaf**
Chairperson	Chairperson
Date:	Date: