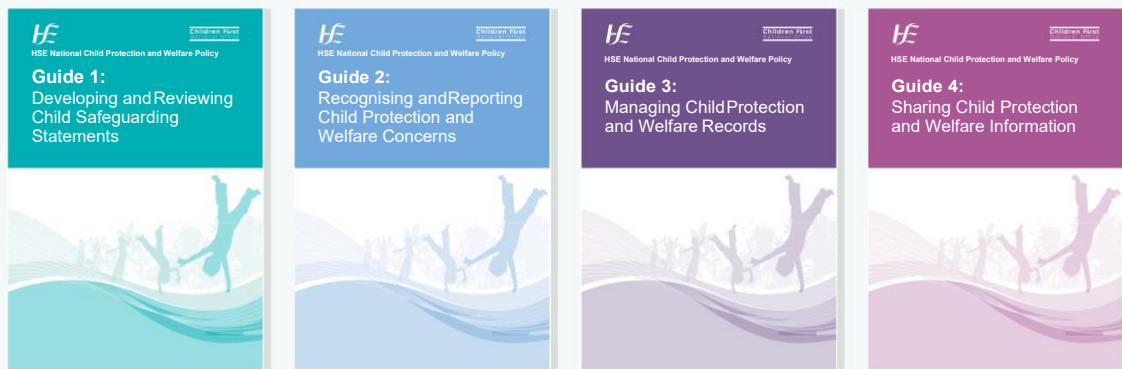




# HSE National Child Protection and Welfare Policy

This Policy has an accompanying suite of guides



Click on the image to access the documents online





National Policy  National Procedure  National Protocol  National Guideline   
National Clinical Guideline

## HSE NATIONAL CHILD PROTECTION AND WELFARE POLICY

### DOCUMENT GOVERNANCE<sup>1</sup>

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Note: Original document is Version 0. First revision is Version 1. Second revision is Version 2, and so on.

Note: HSE National 3PGs should be formally reviewed every 3 years, unless new legislative/regulatory or emerging issues/research/technology/audit etc. dictates sooner.

**VERSION CONTROL UPDATE<sup>3</sup>**

<b>Version No.</b> (most recent version first)	<b>Date reviewed</b> (most recent date first)	<b>Comments</b> (1 sentence max, if required)
3.0	01/03/2026	Full revision of Policy Version 2.1
2.1	19/01/2024	Amended Sections 5.5, 7.1, 8.2 & 8.3 of Policy Version 2
2.0	14/11/2019	Full revision of Policy Version 1
1.0	28/09/2016	Full revision of Policy

**Additional notes:**

A suite of guides has been developed to accompany this revised HSE National Child Protection and Welfare Policy. The suite of guides provides the detail for practical application of this Policy.

**PUBLICATION INFORMATION<sup>4</sup>****Topic:**

Child Safeguarding, Protection and Welfare

**National Group:**

Children First National Office Child Protection and Welfare Policy and Procedure Group

**Short Summary:**

The HSE National Child Protection and Welfare Policy sets out the roles, responsibilities and procedures by which the HSE actively safeguard and protect children. The Policy has an accompanying suite of guides. These guides provide detailed and practical advice to help staff meet the requirements of this Policy and these should be used in conjunction with this Policy.

<sup>3</sup> Records details when a document is reviewed, even if no changes are made.

<sup>4</sup> Records the document information required for publication on the HSE National Central Repository.

**Description:**

All of the safeguarding requirements in this Policy apply to in-person service delivery as well as digital working. All staff must read and adhere to this Policy. They must also refer and adhere to its suite of guides, as and when required.

The purpose of this Policy is to provide the framework for creating a safe environment for children and for the reporting of any child protection or welfare concerns. It is one of a number of policies and procedures in the HSE that contribute to safeguarding children. It describes the organisation's (and that of its funded and contracted services):

- legal obligations
- policy and practice requirements for safeguarding children
- roles and responsibilities of all HSE staff (including students, volunteers, contracted and agency staff working in the HSE)
- procedures for managing child protection and welfare concerns, information sharing and record management practices.

The suite of guides has been developed to provide robust supporting information. The guides provide detailed and practical advice to help staff meet the requirements of HSE National Child Protection and Welfare Policy.



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# 1.0 Policy development

This HSE National Child Protection and Welfare Policy document updates and replaces the HSE Child Protection and Welfare Policy 2019 and 2024 (as amended).

This Policy has been developed in line with the [How to Develop HSE National Policies, Procedures, Protocols and Guidelines: A Practical Guide 2023](#).

It was developed by the HSE National Child Protection and Welfare Policy Development Group within the HSE Children First National Office. You can read about how we developed this Policy in Section 10.

This document contains the general Policy principles, requirements and procedures for staff. All of the safeguarding requirements in this Policy apply to in-person service delivery as well as digital working.

## **All HSE staff must read, and agree to adhere to this Policy**

The assessment module of the mandatory HSE eLearning training 'An Introduction to Children First' will include a statement requiring you to confirm that you have read and agree to adhere to your organisation's Child Protection and Welfare Policy, in order to achieve a certification of completion.

This HSE National Child Protection and Welfare Policy is presented within the eLearning training programme.

Staff of HSE funded services will be required to access their own organisation's policy document before confirming this statement.

We have also developed a suite of guides for this Policy. The guides provide detailed and practical advice to help you as a HSE staff member to meet the requirements of this Policy. The suite of guides should be read in conjunction with this Policy as and when required.

The suite of guides is comprised of the following.

HSE National Child Protection and Welfare Policy:

- [Guide 1: Developing and Reviewing Child Safeguarding Statements](#)
- [Guide 2: Recognising and Reporting Child Protection and Welfare Concerns](#)
- [Guide 3: Managing Child Protection and Welfare Records](#)
- [Guide 4: Sharing Child Protection and Welfare Information](#)

**Note:**

- Where required, local written standard operating procedures may be developed in order to implement this Policy in full. However, no part of this Policy may be subtracted from or amended in any form in the development of such procedures. Any additional procedures or information must be in line with both:
  - Children First legislation, national guidance and best practice
  - the general principles of this Policy and its suite of guides.

### 1.1. Scope

This Policy applies to:

<b>HSE staff</b> (see glossary for a definition of staff)	All HSE staff across all HSE services. This includes staff in: <ul style="list-style-type: none"><li>children’s services</li><li>adult based services</li><li>digital, telehealth and telephone services</li><li>administrative and corporate settings.</li></ul> There are some exceptions identified in the table below.
<b>Contracted staff and Agency staff working in the HSE</b>	Any contracted staff or agency staff working for the HSE. Contracted staff or agency staff must also follow any directions specified by their employing organisation.
<b>HSE staff working in HSE led multi-agency teams</b>	All staff (of HSE and HSE funded organisations) on HSE led multi-agency teams for the purpose of their work within the multi-agency team only.

This Policy does not apply to those listed in the following. However, the HSE staff listed in it may still have some duties to fulfil in relation to this Policy, so please read carefully:

**HSE staff working in external services**

If you are a HSE staff member working in external services, you must:

- follow the Child Safeguarding Policies of the external organisation.
- read the HSE National Child Protection and Welfare Policy.

**Reporting to Tusla**

You must also tell your HSE line manager when

- you make a report to Tusla, or
- you decide **not** to report a concern.

This applies to:

HSE staff working as part of a multi-agency team led by a partner agency.

If you are part of a multi-agency team and the concern does not involve a child under the team's caseload, you must follow the reporting procedures of the external organisation.

**HSE Funded Services and Contracted Services**

(see glossary for definitions of HSE Funded Services & Contracted Services)

HSE funded services and contracted services must comply with Children First legislation and guidance, where required. This compliance must be in line with the Service Arrangement or the Grant Aid Agreement for the service.

- All funded services must have a child safeguarding and/or a child protection and welfare policy that is consistent with all sections of this HSE National Child Protection and Welfare Policy.
- Contracted services must also make sure that the scope of any such policy is in line with the scope of this Policy.

HSE funded services and contracted services may adopt or adapt the HSE National Child Protection and Welfare Policy to meet their specific needs, with the exception of the role of a designated officer. The role of designated officer applies only to specified staff in the HSE, Tusla and An Garda Síochána.

## 1.2 Rationale and purpose

### Rationale

The rationale for this Policy comes from [Children First National Guidance for the Protection and Welfare of Children 2017](#).

This guidance states that all organisations that provide services to children should develop specific policies and procedures on how to create a safe environment for children.

### Purpose

The purpose of this HSE National Child Protection and Welfare Policy is to provide a clear framework for all staff to follow, ensuring that children's safety and welfare is always prioritised. It is a foundation for fostering a culture of vigilance, openness, and accountability regarding child protection.

Every staff member, regardless of their role, has a duty to prioritise the safety and welfare of children and to keep them safe and protected from harm.

There are also legal obligations for certain staff members, known as [mandated persons](#), under the Children First Act 2015.

This Policy is essential to ensure the effective management of child safeguarding and child protection within the HSE.

## 1.3 Supporting evidence

Many of the principles of best practice which underpin the HSE National Child Protection and Welfare Policy are informed by the learning from serious case enquiries, reports and reviews. This learning has also influenced legislation and national guidance in relation to child safeguarding policy in Ireland, which is primarily based on a legal framework provided by the [Child Care Act 1991](#) and the [Children First Act 2015](#). Reporting responsibilities are further informed by the:

- [Children First National Guidance for the Protection and Welfare of Children 2017](#)
- [Protections for Persons Reporting Child Abuse Act 1998](#)
- [Criminal Justice Act 2006](#)
- [Criminal Justice \(withholding of information on offences against children and vulnerable persons\) Act 2012](#)

Details of relevant legislation and related policies, practice, procedures and guidance can be found in Appendix 2: References.

## 1.4 Objectives

The objectives of this Policy are to:

- promote safe environments for children attending, or who directly or indirectly come to the attention of HSE, HSE funded and contracted services
- inform staff of their roles and responsibilities in relation to implementing all aspects of Children First legislation, guidance, best practice and HSE policy requirements
- help staff to understand how to recognise child welfare or protection concerns and signs of child abuse
- help staff to understand how to respond to child welfare or protection concerns and signs of child abuse
- instruct staff on how to report child welfare or protection concerns
- support HSE compliance with legislative and policy requirements under the Children First Act 2015 and National Guidance for the Protection and Welfare of Children 2017.

## 1.5 Outcomes

This Policy will be successful where:

- the best interests and safety of children is always a priority for staff
- children are safe from harm, while directly or indirectly availing of, and/or attending a HSE service, and/or their parents are attending a HSE service
- all staff clearly understand and fulfil their responsibility to protect children from abuse, harm or exploitation
- all staff are aware of their roles within the HSE, in relation to protecting children and what procedures must be followed
- all staff recognise child protection or welfare concerns
- all staff respond to concerns for the welfare or protection of children and report concerns to Tusla.

## 1.6 Disclosure of interests by Policy developers

You can see the names of the HSE staff who developed this Policy in Appendix 3. They are called the HSE National Child Protection and Welfare Policy Development Group and they are based within the HSE Children First National Office.

Each of them said there were no conflicts of interest that did or would influence their decisions in relation to this Policy. Each member signed a conflict of interest declaration form. These forms are kept in the HSE Children First National Office.

## 1.7 Copyright and permissions sought

The primary sources of information for this Policy and its suite of guides is publicly available and/or has been referenced accordingly.

We got permission from Jan Webb to use material from her book J. Webb 'Safeguarding and Protecting Children: The Roles and Responsibilities of the Emergency Department Practitioner' in K. Cleaver, and J. Webb, eds., The Emergency Care of Children: An Evidence Based Approach. Blackwell Science. 2016.

We used this material in the Guide 2: Recognising and Reporting Child Protection and Welfare Concerns. Webb's material features in Section 6 Abuse: Definitions, Indicators and Signs.

## 2.0 Glossary of terms

### Abuse

#### Refers to child abuse

Child abuse can be categorised into four different types:

- neglect
- emotional abuse
- physical abuse
- sexual abuse.

A child may be subjected to one or more forms of abuse at any given time. Child exploitation may sometimes be recognised as its own type of abuse, however, it usually falls within one of the four main types.

We also talk about retrospective abuse which is abuse that took place during an adult's childhood.

### Child

The [Child Care Act 1991](#) defines a child as a person under the age of 18 years, other than a person who is, or has been, married. Since 2019, a Court Exemption Order cannot be granted allowing a marriage to go ahead where one or both parties are under 18 years of age.

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

#### Age of consent for medical treatment is different

In the [HSE National Consent Policy](#), for medical treatment only, a child refers to someone under the age of 16 years and a young person refers to someone aged 16 or 17 years.

## Children First Legislation and Guidance

Refers in this document to:

- [Children First Act 2015](#)
- [Children First National Guidance for the Protection and Welfare of Children \(2017\)](#) and any addendums since its publication. This is national guidance issued by the Department of Children and Youth Affairs for individuals, professionals and organisations to help keep children safe and protected from harm
- related [child safeguarding guidance](#) issued by Tusla.

## Child Protection and Welfare Record

Records created for the purpose of recognising, responding, reporting and documenting child protection or welfare concerns. This includes records created for the purpose of reporting concerns or providing assistance to Tusla and/or to An Garda Síochána.

## Child Protection Concern

Is when there are reasonable grounds for believing that a child may have been, is being or is at risk of being abused, harmed or exploited.

## Child Welfare Concern

This is a problem experienced directly by a child, or by the family of a child, that is seen to impact negatively on the child's welfare or development, but may, or may not, require a child protection response. ([The Child Protection and Welfare Practice Handbook, HSE 2011](#))

## Designated Officer

Under the [Protections for Persons Reporting Child Abuse Act 1998](#), persons are protected from civil liability and penalisation by their employers, if they report suspected child abuse to a designated officer of the HSE, Tusla - Child and Family Agency or a member of An Garda Síochána.

In the HSE, all [mandated persons](#) under the Children First Act 2015 are appointed as designated officers under the Protections for Persons Reporting Child Abuse Act 1998.

## Emotional Abuse

This is the systematic emotional or psychological ill-treatment of a child as part of the overall relationship between a caregiver and a child. It occurs when a child's basic needs for attention, affection, approval, consistency and security are not met, due to incapacity or indifference from their parent or caregiver.

Emotional abuse can also occur 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. A reasonable concern for the child's welfare exists when the behaviour becomes typical of the relationship between the child and the parent or carer.

## Exploitation

Refers to child exploitation.

Child exploitation occurs when a child is used for financial gain, sexual gratification, labour or personal advantage.

## Harm

The [Children First Act 2015](#) states that harm means in relation to a child -

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

whether caused by a single act, omission or circumstance or a series or combination of acts, omissions or circumstances, or otherwise.

## Health Regions

The HSE is made up of six health regions. Each region is responsible for providing both hospital and community care for the people in that area.

Within the Health Regions, there are smaller Integrated Healthcare Areas (IHAs). The IHAs report into the Health Region.

## HSE Contracted Services

An independent supplier who has a contractual arrangement with the HSE to provide services to the public on behalf of the HSE. These independent contractors can include:

- general practitioners
- general dental practitioners and clinical dental technicians
- pharmacists
- optometrists
- dispensing opticians and ophthalmologists
- other services contracted under the HSE's Standard Terms for Service & Supplies.

## HSE Funded Services

A non-statutory organisation or body that receives funding from the HSE in line with Section 38 or Section 39 of the [Health Act 2004](#). These can include hospital and community services delivered to the public.

## Limits to Confidentiality

This means that staff must report information to Tusla and/or An Garda Síochána when they are concerned about the protection or welfare of a child. There is a [HSE Limits to Confidentiality leaflet](#) which can be provided to service users for their information.

## Line Manager

A person to whom a staff member reports directly in the regular performance of their duties. A line manager may or may not also be a service manager.

Some staff members may have multiple line managers. This is due to different functions, operations or clinical service provision, or for HR-related matters. In such situations, staff must request clarity and be clear as to which line managers they must report to for the purposes of this Policy. The service must also clarify and be clear which staff report to which managers for the purpose of this Policy.

## Mandated Persons

The Children First Act 2015 places specific legal child safeguarding obligations on certain people known as mandated persons. [Schedule 2 of the Children First Act 2015](#) provides a full list of mandated persons.

Mandated persons have two legal obligations under the Children First Act 2015:

- to report the harm of children at or above a defined threshold to Tusla
- to assist Tusla, if requested, in assessing a concern which has been the subject of a mandated report.

## Mandated Report

A report sent to Tusla that a [mandated person](#) believes reaches the mandated reporting threshold. Under the Children First Act 2015, mandated persons are required to report any knowledge, belief or reasonable suspicion that a child has been harmed, is being harmed, or is at risk of being harmed, to Tusla.

## Neglect

This is when a child does not receive adequate care or supervision to the extent that the child is harmed physically or developmentally. It is generally defined in terms of an omission of care, where a child's health, development or welfare is impaired by being deprived of food, clothing, warmth, hygiene, medical care, intellectual stimulation, supervision or safety.

## Parents

When we talk about parents in this document, we mean all parents, guardians and carers with parental responsibility.

## Person Subject of Abuse Allegations (PSAA)

A person, either a child or an adult, who has had allegations of child abuse made against them.

## Physical Abuse

Is when someone deliberately hurts a child physically or puts them at risk of being physically hurt.

## 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.

## Relevant Person

A person who is appointed to be the first point of contact for the provider's Child Safeguarding Statement. This is a requirement of the [Children First Act 2015](#).

## Relevant Service

[Schedule 1 of the Children First Act 2015](#) identifies relevant services. Relevant services have specific legal obligations under the Act.

## Senior Manager

A manager at a higher level position in the HSE, responsible for overseeing a department or function, setting strategic goals and direction for the department or function, or even the organisation.

## Service Manager

A manager who is responsible for overseeing a specific team or function within the organisation. They are accountable for the delivery and quality of the service, as well as managing resources. They are directly involved in the day-to-day operations of their team. This includes assigning tasks, providing guidance and support and evaluating performance. Service managers may also be line managers.

## Service User

User of a service, including adults and children.

## Sexual Abuse

Occurs when a child is used by another person for his or her gratification or arousal, or for that of others. It includes the child being involved in sexual acts (masturbation, fondling, oral or penetrative sex) or exposing the child to sexual activity directly or through pornography.

Sexual abuse also includes the practice of preparing a child for sexual abuse, also known as grooming.

## Staff

Staff refers to all:

- employees
- contracted and agency staff working in the HSE
- volunteers
- students
- those on clinical training, internships or work placements
- boards of management
- management committees.

## Tusla – Child and Family Agency

Tusla – Child and Family Agency was set up under the [Child and Family Agency Act 2013](#). It has legal responsibilities for:

- child welfare and protection services
- family support
- educational welfare.

Tusla – Child and Family Agency is referred to as Tusla throughout this document.

## Tusla Dedicated Contact Points

Tusla has dedicated contact points available throughout the country where you can contact them to discuss any concerns you may have. Tusla also has an out-of-hours service. The dedicated contact points and out-of-hours service are available on the Tusla website. These are accessible at <https://www.tusla.ie/services/child-protection-welfare/contact-a-social-worker/>

## Tusla Portal

There is an online portal to report child protection or welfare concerns, or retrospective abuse to Tusla. The portal is accessible at:

<https://www.tusla.ie/children-first/web-portal/>

## 3.0 Introduction

Within the HSE, we understand the critical importance of child safeguarding and protection measures to ensure the safety and welfare of all children.

### Child safeguarding

Child safeguarding is the process of looking after children, to protect them from child abuse, harm or exploitation. It is a proactive process that aims to:

- prevent the abuse, harm or exploitation of children
- address potential issues before they escalate into more serious child protection concerns
- promote children's overall welfare. This includes recognising child welfare concerns that may warrant assessment and support but may or may not require a child protection response.

### Child protection

A child protection concern is when there are reasonable grounds for believing that a child may have been, is being or is at risk of being abused, harmed or exploited.

Child protection is about protecting individual children who may be suffering, or likely to suffer, significant harm as a result of abuse, harm or exploitation. Child protection describes the laws, policies, guidelines and services that are in place to help respond once children have already experienced or are at risk of experiencing child abuse, harm or exploitation.

Child safeguarding prevents and protects, while child protection responds and protects.

## **We are all responsible**

Child safeguarding and child protection are a collective effort that involves everyone, including everyone within the HSE.

HSE relevant services working with children have legal obligations to safeguard and support the welfare and protection of children, under [Schedule 1 of the Children First Act 2015](#).

Adult services also play a significant role in child safeguarding and child protection, by recognising the impact an adult's behaviour or health can have on children.

## **Commitment to children within and outside our service**

The HSE's commitment to child safeguarding and child protection extends not only to children directly using our services, and the children in contact with adult service users. It is essential that all staff consider the welfare of all children and be vigilant when recognising and responding to signs of potential child abuse, harm or exploitation.

The HSE aims to effectively implement child safeguarding policies, procedures and guidance to minimise the risk of the abuse, harm or exploitation of children. Our objective is to ensure that those working in, or for, the HSE, whether through direct employment or by other means, are clear about their responsibilities to safeguard and protect all children.

## 4.0 General principles

The following general principles are informed by Children First legislation and guidance, and the [UN Convention on the Rights of the Child](#). They underpin this Policy and inform best practice within the HSE. They relate to children, their parents and our staff.

### Rights-based principles – Children

#### Right to be recognised and respected

- Children have the right to be recognised, respected, and protected from child abuse, harm or exploitation.

#### Right to equal treatment and protection

- All children must be treated equally and have the right to be protected from discrimination, intolerance, harassment and bullying. This is all in line with the [Equal Status Acts 2000-2018](#), and without discrimination.

#### Right to be heard, listened to and to be taken seriously

- Children have a right to be heard, listened to and taken seriously. Taking account of their age and understanding, they should be consulted and involved in all matters and decisions that may affect their lives.

### Rights-based principles – Parents

#### The need to balance rights, needs and duties of all involved is important.

- A balance must be struck between protecting children and respecting the rights, needs and duties of others, including HSE staff, parents and families. Where there is conflict, the child's welfare must come first.
- Parents have a right to respect and must be consulted and involved in matters that concern their children.

## Other key principles

- The safety and welfare of children is everyone's responsibility.
- The best interests of the child must be paramount.
- Prevention and early intervention are essential for better outcomes
- Child safeguarding and protection is a multi-agency, multi-disciplinary activity. Agencies, professionals and staff must work together in the best interests of children.
- Every staff member must be aware of their role and the roles of others in safeguarding and protecting children.
- Staff are possibly more likely to effectively prevent, detect and respond to child abuse, harm or exploitation when they:
  - have completed Children First training
  - are clear about their responsibilities.

## 5.0 Child safeguarding in the HSE

Children must be protected from harm, abuse and exploitation. The safety, welfare and development of children are core objectives and key priorities for the HSE.

### 5.1. Children First governance

The HSE Children First National Office role is to support and monitor the consistent implementation of, and compliance with, the [Children First Act 2015](#) and the [Children First National Guidance for the Protection and Welfare of Children 2017](#).

[The HSE Children First Governance Structures](#) provides the framework for how the implementation of legislative and child safeguarding and protection policy requirements are supported and monitored within the HSE.

### 5.2. HSE funded and contracted services

HSE services must ensure that funded services and contractors working on their behalf or on HSE premises are aware of their legal obligations, and support the HSE to meet its legal obligations also, where required.

These legal obligations are set out in:

- the Children First Act 2015
- Children First: National Guidance for the Protection and Welfare of Children 2017
- and Garda Vetting requirements under the [National Vetting Bureau \(Children and Vulnerable Persons\) Acts 2012–2016](#).

#### Ensuring compliance of HSE funded services

For HSE funded services, compliance requirements are set out as part of section 38 and 39 service arrangements and section 39 grant aid agreement processes.

#### Ensuring compliance of HSE contracted services

Service managers play a vital role in ensuring compliance with safeguarding requirements in HSE contracted services.

Service managers must ensure that contracted services are considered as part of the Child Safeguarding Risk Assessments and that safeguarding requirements are clearly defined. These requirements must be clearly communicated and managed as part of HSE tender specification and contract management processes.

Contractors delivering **relevant services** under the Children First Act 2015 must meet their independent legal child safeguarding responsibilities. HSE procurement documents and contracts must include a reminder of these obligations.

For contractors providing non-relevant services, service managers must still ensure Child Safeguarding Risk Assessments are conducted and safeguards, including Garda Vetting, training, and adherence to HSE's policies, are identified for inclusion and management as part of HSE tender specification and contract management processes.

They should also ensure that all relevant child safeguarding requirements are met before the service commences.

### 5.3. Children First compliance assurance

The HSE oversees compliance with Children First legislation and guidelines through a three-level assurance system:

#### Three-level assurance system

##### Level 1: Self-assessment

Individual services (HSE, HSE funded services and HSE contracted services) must:

- complete the **Children First Implementation and Compliance Self-Audit Checklist** annually and as required.
- keep a copy of the completed checklist
- provide the checklist on request. For example for HSE compliance assurance checks or internal audits.

##### Level 2: Independent Compliance Assurance Checks

These are checks the HSE Children First National Office carries out. They aim to drive service improvement and provide an additional layer of independent assurance and governance over Children First compliance.

The **HSE Children First National Office Compliance Assurance Framework** supports consistent decision-making and a transparent process for conducting First Compliance Assurance Checks.

##### Level 3: Internal Audit

**HSE Internal Audit** may conduct thematic audits focused on Children First compliance to further ensure safeguarding protocols are being followed.

Feedback from compliance assurance checks, audits, staff surveys and lessons learned from implementation will inform updates to this Policy.

## 5.4. Child Safeguarding Risk Assessments and Child Safeguarding Statements

**Guide 1: Developing and Reviewing Child Safeguarding Statements** provides detailed guidance for HSE services. You must use the supporting **HSE Child Safeguarding Risk Assessment Template** and **Child Safeguarding Statement Template**. These resources help services maintain compliance and to ensure the safety of children availing of their services.

### Relevant services under the Children First Act 2015

In accordance with **Schedule 1 of the Children First Act 2015**, all organisations providing relevant services to children and families must have a **Child Safeguarding Statement**. The Child Safeguarding Statement, informed by one or more Child Safeguarding Risk Assessments does the following:

- lists the main activities of the service
- outlines the principles and procedures designed to keep children safe from harm, as far as practicable, while they are using the service
- lists HSE core safeguarding risks and invites readers to request specific risk assessments for the service they are using. The Child Safeguarding Statement must be informed by an up-to-date Child Safeguarding Risk Assessment.

### Review

The Child Safeguarding Statement must be reviewed within 24 months from the date of the last review, or sooner if there is a material change in any matters to which the Statement relates.

### Services that are not relevant services under the Children First Act 2015

By law, services that are not relevant services do not have to have a Child Safeguarding Statement or undertake a Child Safeguarding Risk Assessment. However, it is best practice that all services in the HSE carry out a Child Safeguarding Risk Assessment and develop a Child Safeguarding Statement. This helps keep children safe.

This includes services who do not provide a service to children. These services should be aware of:

- children they see, for example, children accompanying adults
- children they do not see, for example, children in the care of or in contact with service

Services that are not service user facing, for example, corporate services, must also consider child safeguarding.

## 5.5. Safe recruitment and employment practices

HSE Human Resources (HR) plays a crucial role in child safeguarding. It does this by operating safe recruitment and employment practices. These include:

- certain staff must be Garda vetted
- staff contracts must have key responsibilities that incorporate child safeguarding and protection responsibilities
- all staff take part in induction and mandatory training in child safeguarding
- HR must have clear policies for managing allegations of abuse against staff members. See Section 5.6 of this Policy.

### Service managers must be involved in recruitment planning

All service managers must link in with HR and the HSE Garda Vetting Liaison Unit before starting to recruit staff. They need to do this to make sure:

- Garda Vetting is in place where required
- appropriate child safeguarding controls are in place
- roles are identified in job specification and contract documents, as relevant to the role.

## 5.6. Managing allegations of abuse, harm or exploitation of a child by a member of staff

### HSE Trust in Care Policy

The [Trust in Care Policy](#) is about upholding the dignity and welfare of service users and the procedure for managing allegations of abuse against staff members. The Trust in Care Policy's aim is two-fold:

- 1) Preventative: to outline the importance of the proper use of human resource policies in communicating and maintaining high standards of care amongst health service staff.
- 2) Procedural: to make sure proper procedures are in place for reporting suspicions or complaints of abuse, and to manage allegations of abuse against health service staff in accordance with natural justice. Natural justice is a legal term that means fair treatment.

When an allegation of abuse, harm or exploitation of a child is made against a member of staff, the HSE Trust in Care Policy must be followed alongside this Policy.

## Our duties

Staff must be clear that compliance with Trust in Care processes does not replace or delay the obligation to report under Children First legislation and guidance. Managers must ensure that child safeguarding actions are taken in parallel with the requirements under the Trust in Care Policy. The child's safety and welfare are always the first priority. Any concern that meets the threshold for reporting must be reported to Tusla without delay, regardless of internal disciplinary processes.

In situations where the concern involves an alleged [Schedule 1 Criminal Justice \(Withholding of Information on Offences against Children and Vulnerable Persons\) Act 2012](#), a report must also be made to An Garda Síochána.

The HSE also has responsibilities under the [National Vetting Bureau Act 2012](#). We have procedures to notify the Vetting Bureau when appropriate of allegations against a staff member.

## 5.7. Code of Conduct

The Department of Health developed a unified Code of Conduct (the Code). It is called: [Supporting a Culture of Safety, Quality and Kindness: A Code of Conduct for Health and Social Service Providers](#). The Code's primary objective is to ensure the safety of service users accessing health and social services, while maintaining the quality of these services. This Code forms part of the terms and conditions of all staff contracts. This further supports child safeguarding in the HSE.

## 5.8. Public Sector Equality and Human Rights Duty

The Public Sector Equality and Human Rights Duty (the Public Sector Duty) which is included in [Section 42 of the Irish Human Rights and Equality Commission Act 2014](#) states that all public bodies in Ireland, including the HSE, have a responsibility to promote equality, prevent discrimination and protect the human rights of their employees, service users and everyone affected by their policies and plans.

## 5.9. Training and resources

A comprehensive suite of training and resources is available to assist services in fulfilling their child safeguarding and child protection responsibilities.

- All HSE staff and staff of HSE funded services must complete the relevant mandatory Children First training on [HSeLand](http://www.hseland.ie) ([www.hseland.ie](http://www.hseland.ie)). Staff of HSE contracted services must also complete this training where identified as being relevant to the role and/or location of work. They must access the training at: <https://childrenfirst.hseland.ie/>.
- All staff working in the HSE, HSE funded and contracted services, must also, as required, complete additional Children First training on <https://childrenfirst.hseland.ie/>.

You can also access all related resources on the HSE Children First [website](#).

## 5.10. Inter-agency and multi-disciplinary working

Effective child protection requires strong inter-agency and multi-disciplinary collaboration to ensure the best interest of the child. That is why we are committed to working with different organisations. These organisations include:

- Tusla
- An Garda Síochána
- other relevant organisations, for example, the Department of Education and HSE funded services.

We are also committed to working with children and their families to support better outcomes for children.

### **Joint Protocol for Interagency Collaboration between the HSE and Tusla**

Effective interagency working with Tusla is essential to safeguard children. When a child requires services from both Tusla and the HSE for their health and welfare to be promoted and protected, this should be delivered in a coordinated way. The [Joint Protocol for Interagency Collaboration between the Health Service Executive and Tusla – Child and Family Agency to Promote the Best Interests of Children and Families](#) clarifies the roles and responsibilities of both agencies. It emphasises the importance of working together to provide person-centred pathways for children.

There is the expectation that all staff adhere to the principles of the protocol and apply it alongside this Policy when responding to concerns that require Tusla involvement. Communication, cooperation and keeping children at the centre of what we do are crucial to the meaningful implementation of the Protocol.

## Share information appropriately with Tusla

As a staff member, you are expected to voluntarily support and assist Tusla in their assessment of a child protection or welfare concern.

When assisting Tusla to safeguard children from child abuse, harm or exploitation, you may be required to share a service user's information. This is acceptable as long as you:

- share confidential information appropriately on a need-to-know basis, and
- in accordance with law.

See Section 9 of this Policy and Guide 4: Sharing Child Safeguarding and Protection Information.

### Note:

- The [HSE Personal Data Protection Policy](#) sets out the legal requirements relating to the protection of personal data. It is important that you comply with these.
- However, it is equally important that you and all staff understand that child protection measures must always take precedence over data protection considerations affecting an individual.
- Data Protection Acts 1988 to 2018 do not prevent the sharing of information on a reasonable and proportional basis to protect a child.

## 6.0 Roles and responsibilities

All staff are responsible for the safeguarding and protection of children. You must comply with Children First legislation, guidance, and HSE policy. You must also support one another to work together in the best interests of children.

Responsibilities are set out below and include an accumulation of responsibilities in line with levels of management.

Mandated persons and designated officers have additional responsibilities.

### 6.1 All staff

As a staff member, you must:

#### **Clarify who your line manager is for this Policy**

Some staff members may have several line managers due to multiple functions, working across different services, or for HR-related matters. Be clear who your line manager is for the purpose of getting support or for reporting compliance with implementing this Policy.

#### **Read and agree to adhere to this Policy**

You must confirm you have read and agree to adhere to this Policy and to follow the HSE Child Protection and Welfare Reporting Procedure when necessary.

The assessment module of the mandatory HSE eLearning training 'An Introduction to Children First' will include a statement requiring you to confirm that you have read and agree to adhere to this HSE National Child Protection and Welfare Policy, in order to achieve a certification of completion.

You must ensure that you are up-to-date with your mandatory training requirements.

Incorporate into practice this Policy and its suites of guides. Ask your line manager if you need help to do this.

#### **Complete mandatory training and refresher training**

You must complete all relevant mandatory Children First training on HSeLanD, and any refresher training as necessary.

You must also take part in additional Child Safeguarding training as appropriate to your role, if recommended by your line manager.

## **Know if you are a mandated person and a designated officer – and what this means for you.**

Check if you are a mandated person under the [Schedule 2 of the Children First Act 2015](#). If you are a mandated person, you are also a designated officer in the HSE.

If you are, make sure you understand and fulfil the related responsibilities outlined in Section 6.5 and 6.6.

## **Know and use relevant resources**

Be familiar with, and consult, if you need to, with:

- national guidance
- Tusla guidance
- other HSE policies relevant to supporting the protection and welfare of children.

## **Child Safeguarding Statements**

You must read and follow any relevant Child Safeguarding Statement and associated Child Safeguarding Risk Assessments, where applicable, that apply to the service you work in.

## **Share confidential information appropriately**

To protect children, you can share confidential information on a need-to-know basis only. This is in line with this Policy and its suite of guides. See Guide 4: Sharing Child Protection and Welfare Information for more details on who to share with, when and when not to share.

## **Make people aware of the limits to confidentiality**

Inform service users and parents about the limits to confidentiality. This means you must report information to Tusla and/or An Garda Síochána when you are concerned about the protection or welfare of a child.

## **Inform children of their rights**

You must inform children of their rights, as appropriate. Treat children with respect.

## **Co-operate with other professionals and agencies about child safeguarding.**

You must make sure you co-operate with other professionals and agencies about child safeguarding.

## **Assist Tusla with child protection and welfare concerns**

Provide any necessary and proportionate assistance to support Tusla in their assessment of a child protection or welfare concern.

## **Address concerns about unsafe practices**

If you have concerns about unsafe practices, you must either:

- tell your line manager or most appropriate senior staff member, and/or
- make a [protected disclosure](#) (also called whistleblowing).

## **Follow and report under relevant policies, procedures and frameworks**

You must also follow and report under any other relevant policies, procedures and frameworks, as necessary. Consider the [HSE Sexual Safety Framework for Approved and Designated Centres 2025](#) if an incident of a sexual nature has occurred in HSE or HSE funded approved and designated centres.

Where required, follow the [HSE Enterprise Risk Management Policy and Procedures](#) and [HSE Safety Incident Management Framework](#), when a child is harmed or at risk of harm while availing of a HSE service.

## **Support your colleagues with safeguarding**

Support your colleagues in their roles and responsibilities safeguarding children.

## **6.2 Line managers**

In addition to your staff responsibilities in 6.1, as a line manager, you must:

### **Support senior management**

You must support senior management to put this Policy in place. You may also be delegated additional responsibilities as well as the ones below.

### **Raise awareness**

You must raise awareness of child safeguarding and child protection through supervision, support, and advice.

### **Clarify staff who you line manage for the purpose of this Policy**

Identify staff who you line manage for this Policy. Some staff members may have several line managers. This is due to different functions or services or HR-related matters.

### **Include this Policy in staff induction**

You must include this Policy and its suite of guides in the induction process for new staff.

### **Make sure staff read and agree to adhere to this Policy**

The assessment module of the mandatory HSE eLearning training 'An Introduction to Children First' will include a statement requiring staff to confirm that they have read and agree to adhere to this HSE National Child Protection and Welfare Policy, in order to achieve a certification of completion.

You must ensure your staff are up-to-date with their mandatory training requirements.

### **Give all staff a copy of the Child Safeguarding Statement**

You must make sure staff are given a copy of the service's Child Safeguarding Statement and associated Child Safeguarding Risk Assessments, where applicable.

### **Assist staff with child protection or welfare concerns**

You must provide consultation and assist staff who have child protection or welfare concerns and support them in following the child protection and welfare reporting procedure correctly.

### **Promote inter-agency cooperation**

You must promote inter-agency cooperation to safeguard children.

### **Make sure staff keep records appropriately**

You must ensure that staff maintain:

- records of all child protection and welfare reports submitted to Tusla and/or An Garda Síochána in an appropriate and secure filing system
- records of all child protection and welfare concerns that do not reach the threshold for a report to Tusla and/or An Garda Síochána.

This should be done in line with this Policy, its suite of guides and any local written procedures.

### **Facilitate mandatory training and other training**

You must allow and make it easy for staff to complete any relevant mandatory HSE eLearning Programme as required and/or any relevant refresher training.

You must encourage and facilitate staff to complete any other child safeguarding training as appropriate to their role.

## 6.3 Service managers

As a service manager you have a key role in ensuring that the necessary structures are in place to oversee Children First compliance in your services.

As a service manager, in addition to the above responsibilities, you must:

### **Create, promote and embed a child safeguarding environment**

You must create and promote a child safeguarding environment in your services.

You must ensure that your service undertakes a Child Safeguarding Risk Assessment and has a Child Safeguarding Statement in place.

You must complete the Children First Implementation and Compliance Self-Audit Checklist annually.

You must also embed HSE Children First planning and ongoing implementation in your services.

### **Develop local procedures and standards**

To implement the requirement of this Policy and its suite of guides properly, you must develop:

- any local written procedures needed to do this, in particular those identified as being required following the completion of the child safeguarding risk assessment process. See Guide 1: Developing and Reviewing Child Safeguarding Statements for further information
- a local written record keeping procedure for child protection and welfare records
- a local written procedure for considering the management of missed appointments and any child safeguarding concerns arising. See Section 4.8 in Guide 2 Recognising and Reporting Child Protection and Welfare Concerns for further information.

### **Maintain a secure filing system**

You must develop and maintain a secure filing system for documentation related to child protection and welfare concerns.

## **Have a working procedure for selected staff to access the CPNS**

Ensure that the procedure for selected staff to access the Child Protection Notification System (CPNS) is in place.

This procedure is only for:

- hospital emergency department staff
- maternity hospital staff
- out-of-hours General Practitioners.

See Section 4.1 of Guide 2: Recognising and Reporting Child Protection and Welfare Concerns.

## **HSE funded and contracted services compliance**

You must support oversight of Children First compliance for HSE funded and contracted services, as per Section 5.2 of this Policy.

## **Monitor and address issues**

You must monitor and address issues affecting the implementation of:

- this Policy and its suite of guides and
- Children First legislation and guidance.

## **Delegate and oversee actions**

You must delegate and oversee actions, as required, to make sure this Policy and its suite of guides are effectively implemented.

## 6.4 Senior management

Members of senior management may include managers of Regional Health Areas, Integrated Healthcare Areas and national services.

As a member of senior management, in addition to the above responsibilities, you must:

- make sure this Policy and its suite of guides are implemented across your regions and services
- make sure HSE Children First Governance Structures are implemented properly
- delegate actions to service and line managers to help effectively implement this Policy and its suite of guides
- ensure HSE funded and contracted services compliance with Children First, as required
- oversee the fulfilment of responsibilities by service managers and line managers.

## 6.5 Mandated persons

As a mandated person, as defined in [Schedule 2 of the Children First Act 2015](#), you must:

### Report to Tusla

You must report to Tusla if you have any knowledge, belief or reasonable suspicion that a child has been harmed, is being harmed, or is at risk of being harmed without delay. This includes where a child tells you that they have been, are being or are likely to be harmed. This is known as a mandated report.

### Assist Tusla

You must assist Tusla, if requested to do so, in their assessment of a concern which has been the subject of a mandated report. You must do this regardless of who made the original report. This is known as mandated assisting.

Tusla will only make a formal request for mandated assisting when:

- you do not provide this assistance voluntarily and
- they believe that mandated assistance will need to be sought in the best interests of the child.

## Report concerns even if they do not meet the threshold for a mandated report

If your concern does not reach the threshold for mandated reporting, but you feel you have reasonable grounds for concern, you must follow the reporting procedure in this Policy. There is further details in Section 3.1 of Guide 2: Recognising and Reporting Child Protection and Welfare Concerns.

If you are a mandated person in the HSE, you are also a designated officer. See Section 6.6 below.

## 6.6 Designated officers

Under the [Protections for Persons Reporting Child Abuse Act 1998](#), designated officers are specified staff in Tusla, the HSE and An Garda Síochána. In the HSE, all mandated persons defined in [Schedule 2 of the Children First Act 2015](#), are appointed as designated officers in the HSE.

As a designated officer in the HSE, you may receive reports of suspected child abuse or neglect from any person, including members of the public. You should:

- advise reporters they are protected from civil liability if they report a child abuse or neglect concern reasonably and in good faith
- follow the HSE Child Protection and Welfare Concern Reporting Procedure
- inform reporters that it is best practice for Tusla to receive concerns directly from the person concerned and advise them that they can also make a report directly to Tusla.

# 7.0 Recognising and reporting child protection and welfare concerns

This section gives you an overview of the HSE Child Protection and Welfare Reporting Procedure. It outlines:

- how to recognise and report a concern
- the help you can expect from your line managers
- the role of mandated persons in relation to reporting and
- when you need to follow reporting requirements to An Garda Síochána.

However, you must follow the detailed guidance in [Guide 2: Recognising and Reporting Child Protection and Welfare Concerns](#). This Guide also provides a comprehensive overview of the categories and signs of abuse.

## 7.1 Recognise a concern

Child abuse can be categorised into four different types:

- neglect
- emotional abuse
- physical abuse
- sexual abuse.

A child may be subjected to one or more forms of abuse at any given time.

Child exploitation may sometimes be recognised as its own type of abuse, however, the form(s) of exploitation itself usually falls within one of the four main types.

Some concerns are not in the category of abuse or harm but relate to the ongoing welfare of a child.

The [Child Protection and Welfare Practice Handbook, 2011](#) details child welfare concerns. It says that a child welfare concern is a problem experienced directly by a child, by the family of a child, or both. You can see that it affects the child's welfare or development in a negative way. However, it may or may not, need a child protection response.

You also need to consider the welfare or protection needs of an unborn child during pregnancy.

See Section 6 Abuse: Definitions, Indicators and Signs in Guide 2: Recognising and Reporting Child Protection and Welfare Concerns.

### **Retrospective abuse**

Some adults may disclose abuse that took place during their childhood. This is known as retrospective abuse.

Following receipt of a disclosure from an adult that they were abused as a child, all staff who have a concern about the welfare or protection of a child (who is under 18 years on the date of the disclosure) must report that concern to Tusla. This is because the person against whom an allegation has been made may pose a current or potential future risk to children.

### **Concerns may arise for any child**

It is important to report concerns even if you do not have the full details of the children. This will allow the appropriate safeguarding actions to take place. Tusla outlines formal definitions for different categories of children at risk in their [\*\*Child Abuse Substantiation Procedure \(CASP\)\*\*](#). The descriptions provided below are a simplified version to help you understand your general reporting responsibilities.

If the child/children are:	This is:
<b>Identified</b>	children whose details are known. For example, their name or relationship to the person subject of the allegation of abuse is known or can be easily found out. Even if you do not know their exact details at the time of reporting, Tusla can find out this information.
<b>Identifiable</b>	<p>children who may be at risk but whose details are not known by the person reporting the concern. They may be part of a group or setting where the person subject of the allegation of abuse has contact with children.</p> <p>For example, the children are in a school, sports club, or youth group. In these cases, a third party (such as the school or organisation) may need to take steps to protect them, based on the information provided to Tusla.</p>
<b>Yet-to-be identified</b>	<p>where there may be no specific information about who these children are but, based on information that is known, there is a reasonable concern that children may be at risk of abuse now or in the future.</p> <p>For example, where there is a concern about an adult who may pose a risk to any child they come into contact with.</p>

Ignoring what may be indicators of abuse, harm or a child welfare concern could result in ongoing harm to the child. It is your responsibility to recognise and report any reasonable concerns in relation to the safety or welfare of a child. It is not your responsibility to prove if the abuse has occurred or not.

## 7.2 HSE Child Protection and Welfare Reporting Procedure

The procedure for reporting child protection and welfare concerns is outlined in the steps below. Detailed guidance is given in Guide 2: Recognising and Reporting Child Protection and Welfare Concerns. A PDF printable version of this table is available on the HSE Children First website: [www.hse.ie/childrenfirst](http://www.hse.ie/childrenfirst)

Recognise a child protection or welfare concern	
<b>Respond to a concern</b>	<b>Essential contacts</b>
<p><b>When there is immediate risk to a child</b> Respond to any immediate safety needs. Contact Tusla without delay. If unavailable, contact An Garda Síochána.</p> <p><b>No immediate risk</b> Where there is no immediate risk but you have reasonable grounds for concern, you should report to Tusla.</p> <p><b>Consult</b> Where necessary, consult with your line manager or most appropriate senior member of staff. If you remain unsure, you can contact your local Tusla Dedicated Contact Point for advice.</p> <p><b>Inform</b> Inform your line manager or most appropriate senior member of staff of any concerns, reports and actions taken.</p> <p><b>Reminder:</b> If you are a <b><u>mandated person</u></b>, you are <b>legally required</b> to report a concern that reaches the threshold for a mandated report.</p>	<p><b>Tusla Dedicated Contact Points</b> <a href="https://www.tusla.ie/get-in-touch/duty-social-work-teams/">https://www.tusla.ie/get-in-touch/duty-social-work-teams/</a></p> <p><b>Tusla National out-of-hours mandated persons call:</b> <b>0818 776 315</b> 6pm to 6am every night, also 9am to 5pm Saturdays, Sundays and Bank Holidays.</p> <p><b>Other professionals call:</b> <b>0818 800 210</b> 6pm to 7am every night, also 9am to 5pm on Saturdays, Sundays and Bank Holidays.</p>
<p><b>If the person subject of abuse allegations is a member of staff, make sure to follow this reporting procedure and the HSE Trust in Care Policy.</b></p>	

<b>Inform</b>
<p>Inform the service users and/or parents of any child protection or welfare concerns and tell them if a report is being made to Tusla or An Garda Síochána or both.</p> <p>There are <b>exceptions to informing</b> service users and/or parents of a report being made. Always consult your line manager in this situation.</p>
<b>Report</b>
<p><b>If you decide to report</b>, you should submit a report using the Tusla portal: <a href="https://portal.tusla.ie/">https://portal.tusla.ie/</a></p> <p>If the Tusla portal is not available, you may send paper reports by registered post or in person. If you make a verbal report, you must submit a written report to Tusla within three days.</p> <p><b>If you decide not to report</b>, you should consult with your line manager or most appropriate senior member of staff, and/or Tusla to identify possible supports for the child and family to prevent the situation from getting worse.</p>
<p><b>Reminder:</b> You should report a Schedule 1 offence under The <a href="#">Criminal Justice (Withholding of Information on Offences against Children and Vulnerable Persons) Act 2012</a> to An Garda Síochána using the HSE Notification Form for reporting to An Garda Síochána.</p>
<b>Record</b>
<p>You must record all relevant information in relation to child protection or welfare concerns. This includes concerns that were not reported.</p>
<b>Assist</b>
<p>You must assist Tusla when they ask you to do so, as necessary and proportionate.</p>
<b>Monitor</b>
<p>You must monitor the situation, if possible. Do not assume that a child is safe because a report has been made.</p> <p>You should pay close attention to any ongoing needs of children and families.</p> <p>If there is a new concern or the current concern gets worse, follow this reporting procedure again.</p>

## 7.3 Line manager assistance

You must inform your line manager or most appropriate senior member of staff when you have a child protection or welfare concern. Where necessary, your line manager or most appropriate senior member of staff can provide consultation and assistance to you when you have a concern and support you in following the reporting procedure.

You and your line manager or most appropriate senior member of staff may not always agree in relation to reporting a concern to Tusla. In this instance, either party may make a report to Tusla. Line managers or most appropriate senior member of staff, should not prevent you from submitting a child protection or welfare report to Tusla if you believe that you have reasonable grounds for concern for the welfare or protection of a child.

## 7.4 Mandated persons and mandated reporting

If you are a **mandated person** and you have reasonable grounds for concern, you are required to determine if that concern meets the threshold for a mandated report.

### Note:

- The legal obligation to report concerns that reach the threshold of mandated reporting rests with the mandated person. Mandated persons cannot delegate the responsibility to report to anyone else.
- See Section 3 in Guide 2: Recognising and Reporting Child Protection and Welfare Concerns for reporting thresholds information.

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

When you make a report to Tusla, you must consider if the concern also requires a report to An Garda Síochána. If you have information that could be of material assistance in securing the apprehension, prosecution or conviction of a person for a serious offence, as listed in [Schedule 1 of the Criminal Justice \(Withholding of Information on Offences against Children and Vulnerable Persons\) Act 2012](#), you must report that information to An Garda Síochána.

When HSE staff want to report to An Garda Síochána, they must use the form in [Appendix 1](#) of this Policy.

### **If you are unsure whether a report to An Garda Síochána is required or not**

If you are uncertain about whether information you have, or receive via a third party, should be reported under this Act, you can contact An Garda Síochána for advice.

The best way to do this is to email your query, without including identifying confidential details, to the relevant Garda district office. Address the email for the attention of the Superintendent. The email address for the relevant district office is provided in the details for each Garda station which can be found here: <https://www.garda.ie/en/contact-us/station-directory/>

# 8.0 Managing child protection and welfare records

Guide 3: Managing Child Protection and Welfare Records provides detailed information and clear advice regarding responsibilities relating to child protection and welfare record management.

## 8.1 HSE child protection and welfare record management practices

Given the complex nature and variety of services in the HSE, there is no one size fits all approach to child protection and welfare record keeping. However, all service managers, line managers and staff must recognise the importance of appropriate record management practices for child protection and welfare records.

Appropriate access controls and data minimisation principles must be considered when handling and storing personal and sensitive child protection and welfare data. This applies equally to both paper-based and electronic records. All principles of General Data Protection Regulation (GDPR) must be adhered to when processing personal sensitive data. As technology and best practices are constantly changing, services should consider a range of options. They need to do this in liaison with local data protection and ICT supports to decide the most appropriate child protection and welfare record management system.

Service managers are required to ensure that their individual services have:

- a child protection and welfare record management process in line with the principles of this Policy and Guide 3: Managing Child Protection and Welfare Records
- a local written procedure in place that meet the needs of the service and data protection requirements.

This includes services where there is no direct service provision to children, for example, adult support services. Services that are not service user facing, for example, corporate services, must also consider that their staff may, on occasion, identify a child protection or welfare concern and need to make a report to Tusla.

Service managers and line managers have a responsibility to ensure that their staff are aware of how to appropriately maintain copies of child protection and welfare records.

All staff have a responsibility to create and maintain appropriate child protection and welfare records in line with the principles of this Policy and local written procedures. Where necessary, consult with your line manager.

## 8.2 HSE Child Protection and Welfare Record Management Checklist

A PDF printable version of this checklist is available on the HSE Children First website:  
[www.hse.ie/childrenfirst](http://www.hse.ie/childrenfirst).

**1. Does your service have a documented child protection and welfare (CPW) record management process in place for paper-based and/or electronic records?**

Yes  No

**If you answered 'No', this is what you need to do**

A CPW record may need to be created by a staff member even if your service does not provide services to children. You need to have a secure filing system available to retain a CPW record.

**1.1 Are CPW records held in a separate file from the service user's main healthcare record?**

Yes  No

**If you answered 'No', this is what you need to do**

Keep CPW records so that they can be easily separated from the service user's main healthcare record to maintain restricted access and to facilitate the permanent storage of such records.

**If you answered 'Yes', go to question 2.**

**1.2 Are CPW records held in a dedicated or separate section of the service user's main healthcare record?**

Yes  No

**If you answered 'No', this is what you need to do**

You need to make sure CPW records can be easily separated from the service user's main healthcare record so you can maintain restricted access and facilitate the permanent storage of such records.

**2. Is there a flag or alert system to clearly indicate on the main healthcare record that a CPW record exists and where and how it can be accessed?**

Yes  No

**If you answered 'No', this is what you need to do**

You need to organise your files so that a staff member can see from a main healthcare record that a CPW record exists, and how to access it for information, if needed.

**3. Are CPW records accessible to a staff member in your service on a need-to-know basis only? Remember CPW records may need to be accessed out-of-hours.**

Yes  No

**If you answered 'No', this is what you need to do**

Consider which staff in your service need to have access to the CPW record. Make sure that CPW records can be consulted if and when they need to, for the purpose of child safeguarding.

**4. Are concerns that did not reach the threshold for a CPW report to Tusla recorded and held on file?**

Yes  No

**If you answered 'No', this is what you need to do**

You should record CPW concerns that do not reach the threshold for a report to Tusla. You should hold them as evidence of any patterns of concerns that may be identifiable over time and later need a report to Tusla.

**5. Is there a filing procedure for storing CPW records relating to adults or children who are not service users?**

Yes  No

**If you answered 'No', this is what you need to do**

Set up a non-service user CPW records file to store records of CPW concerns involving non-service users.

**6. Are CPW records transferred, closed and archived appropriately, to ensure they can be kept permanently?**

Yes  No

**If you answered 'No', this is what you need to do**

You must put in place a local written record management procedure in accordance with the HSE National Records Retention Policy and other relevant policies, legislation and guidance.

## 9.0 Sharing information for child safeguarding and protection purposes

The safety and welfare of children are paramount. You should always consider the safety and welfare of a child when deciding what information can or should be shared. [Guide 4: Sharing Child Safeguarding and Protection Information](#) provides information about:

- making decisions about sharing personal information
- who you may need to share information with
- lawful information sharing
- best practices for the purpose of safeguarding children
- sharing information with the service user and/or parent
- talking with children in relation to information sharing
- the principles for sharing information.

### Limits to Confidentiality

As soon as possible, you should explain to the service user that there are limits to confidentiality. This means explaining that when any staff are concerned about the protection or welfare of a child, they must report their concerns to Tusla, or An Garda Síochána, or both. This is so Tusla can identify any children who are at current risk now or may be in the future.

There is a [HSE Limits to Confidentiality leaflet](#) which can be provided to service users for their information.

It is acceptable to share a service user's information if you need to do so to ensure the welfare of any child or to protect any child. You should only share information in a proportionate and need-to-know basis, and you must have a legal basis to do so. While it is always best practice to seek consent to do so, you do not need consent where sharing information is necessary to protect a child from serious harm. For further information, see Section 3.3 of Guide 4: Sharing Child Safeguarding and Protection Information for further information.

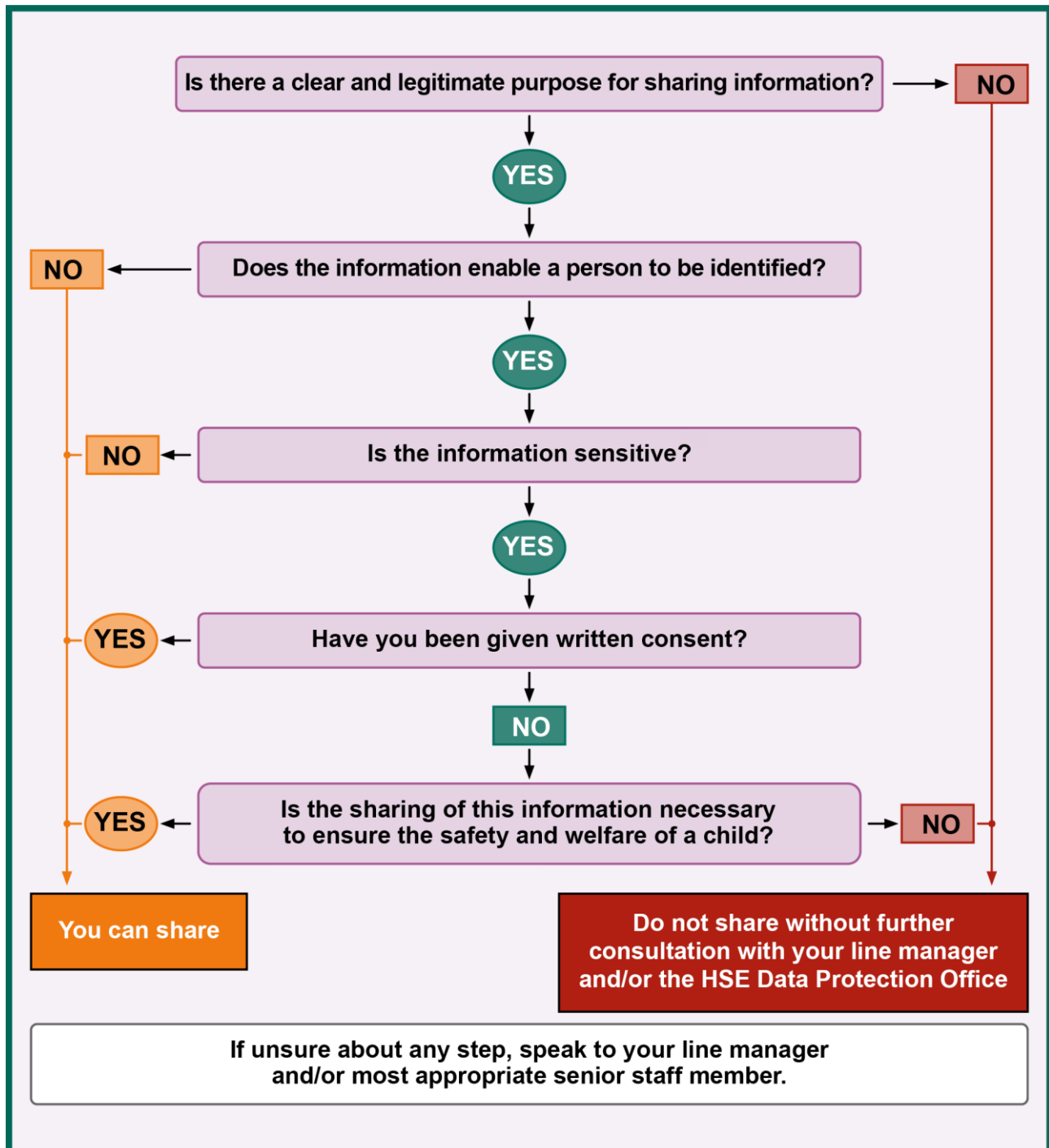
## Section 17 of the Children First Act 2015

Tusla may share information with you in the course of carrying out an assessment of a mandated report. Under [Section 17 of the Children First Act 2015](#), it is a criminal offence for you to disclose the information to a third party unless in accordance with law or unless there is written authorisation from Tusla. This applies to all staff, not just mandated persons. Third party here means someone outside of the HSE, for example, HSE funded services or other organisations. This means that if a staff member of the HSE receives the information from Tusla, they can share that information with another person in the HSE and that would not be considered an offence under section 17 of the Act. This is because it is not being shared with a third party. As part of general data protection and legislation however, HSE staff should still only share the information to limited persons on a need-to-know basis. When it comes to sharing information with a Third party you must have a clear legal basis for sharing it.

The offence under Section 17 of the Act only covers information shared by Tusla during the period of an assessment of a mandated report. Any other information sharing is covered by data protection legislation.

## 9.1 HSE Child Protection and Welfare Information Sharing Framework

This framework focuses on five key questions that will help you decide if there is a lawful basis for sharing information in situations that apply to child protection and welfare. When you wish to share information or you are asked to share information, you should consider the below:



A PDF printable version of this framework is available on the HSE Children First website: [www.hse.ie/childrenfirst](http://www.hse.ie/childrenfirst).

# 10.0 Consultation, implementation and review plan

In this section, we provide more detail about the consultation process that informed how we developed this Policy. We also outline the key features of its implementation, monitoring and review plan.

## This Policy informs:

- our internal procedures to support our work to implement Children First legislation and national guidance
- our roles and responsibilities to support full implementation and compliance with Children First legislation and national guidance across all HSE, HSE funded and contracted service
- guidance that is required to support staff understanding of how to fulfil their roles and responsibilities in line with safeguarding children.

## 10.1 Evidence search

### Laws, guidance and other documents

We reviewed legislation, guidance, literature and HSE Policies to develop this Policy.

These are listed in Appendix 2 of this Policy.

### Our learnings from serious case enquiries, reports and reviews

Many of the principles of best practice which underpin this Policy are informed by our learning from serious case enquiries, reports and reviews.

This learning has also influenced legislation and national guidance in relation to child safeguarding policy in Ireland. This is primarily based on a legal framework provided by the [Child Care Act 1991](#) and the [Children First Act 2015](#).

We get feedback from service users through serious cases, reports and reviews. We also learned from stakeholders' feedback.

## 10.2 Stakeholders we consulted with

### HSE staff

We requested completed questionnaires about the previous version of this Policy from:

- HSE staff
- HSE funded services
- HSE Children First Oversight Committee
- Networks such as Health and Social Care Providers Network
- Office of the Nursing and Midwifery Services Director
- National Doctors Training and Planning Office
- HSE Children First Operational Steering Committees.

### Analysing the consultation feedback

The Development Group collated and reviewed all feedback and recommendations during this evaluation process. All of its decisions to accept or reject feedback are documented and saved in the Children First National Office.

### Applying what we learned from consultations

In terms of applying what we learned, including new evidence of best practice, much of this version of the Policy and its suite of guides has been informed by legal requirements and national guidance.

Where matters relate to legislation, we reviewed procedures in accordance with the law.

Where matters relate to guidance, we considered and applied procedures in the context of best practice principles. We did this to ensure the effective implementation of Children First legislation and national guidance.

### Key HSE operational services

We developed this version of the Policy in consultation with key operational services within the HSE and in liaison with Tusla on key practice areas.

Upon completing the final draft of this version of the Policy and its suite of guides, we circulated to some key staff for feedback.

### Office of the Ombudsman for Children

We engaged with the Ombudsman for Children on this Policy and its suite of guides.

## Trade unions

We consulted health service trade unions and staff associations through the National Joint Council (NJC) on this version of the Policy and its suite of guides.

## Governance, sign off on this Policy

The HSE Senior Leadership Team approved this Policy on the 13 January 2026. Once approved, the final version was uploaded to the HSE National Central Repository.

The HSE Children First National Office is responsible for amendments to this Policy and its suite of guides. It is also responsible for its reviews. More about this below.

## 10.3 Implementation

Senior management will be responsible for ensuring implementation of this Policy, its suite of guides and any necessary local written procedures required. It is an ongoing task to ensure that Children First legislation, national guidance and this Policy is effectively implemented within the HSE.

Senior management will need help to do this.

It will get this help from:

- this Policy's suite of guides
- all HSE staff, including other HSE managers
- Children First Governance Structures
- the HSE Children First National Office.

## How we communicate and share this Policy

We will:

- publish this Policy on the HSE National Central Repository
- circulate it widely across the HSE
- have an online briefing of the Policy on the HSE Children First website
- have a general broadcast to all HSE staff
- inform HSE funded and contracted services via existing communication processes.

## 10.4 Sustain, monitor and review plan

### Sustain – maintain and support

The HSE Children First National Office will help to sustain this Policy and continue to monitor it.

### Monitoring

Individual services will monitor compliance with this Policy under the overall operational monitoring and compliance arrangements already established within the services. Services can use the HSE National Child Protection and Welfare Policy Audit Tool in Appendix 5 to monitor compliance with the key requirements of this Policy

The HSE Children First National Office will monitor this Policy in the context of relevant legislative, guidance or policy changes. The Office will also monitor how well services comply with this Policy. It will do so by overseeing and/or taking part in audits and receive staff feedback in different ways, including through the Children First Governance Structures

HSE Internal Audit may conduct thematic audits focused on Children First compliance.

See Section 5.3 of this Policy for further information.

### Review plan

Three years after this Policy is published, the HSE Children First National Office will do a full review. A review may happen sooner if there is a significant material change relevant to this Policy. A material subject change could mean there is a change in the relevant law, and we need to update guidance.

# Appendix 1: Notification form for reporting to An Garda Síochána

An editable version of this form is available on the HSE Children First website:

[www.hse.ie/childrenfirst](http://www.hse.ie/childrenfirst).



## HSE Safeguarding Vulnerable Persons at Risk of Abuse Policy

## HSE National Child Protection and Welfare Policy

### Notification to An Garda Síochána

#### (HQ Directive 07/2017)

This form is for use by HSE personnel for reporting potential offences to An Garda Síochána under the **Criminal Justice (Withholding of Information on Offences against Children and Vulnerable Persons) Act 2012**, in relation to serious specified offences against a child or adults at risk of abuse. Full list of offences are specified in [Schedule 1](#) and [Schedule 2](#) of the Act.

This form is also for use by HSE personnel reporting potential offences to An Garda Síochána under the HSE Safeguarding Vulnerable Persons at Risk of Abuse Policy.

**This box is for Garda use only – to be completed on receipt of notification:**

**Record No.:**

**PULSE ID:**

**Garda Name:**

**Rank:**

**Garda Functional Area:**

**Contact No:**

**NOTIFICATION DETAILS**

**Client Ref I.D.:** \_\_\_\_\_

**To Superintendent:**

\_\_\_\_\_ (Insert Garda Functional Area Name)

**Alleged or Suspected Offence relates to**

**Child**

**Adult at risk of abuse**

**Staff member making report**

**Name:**

**Title/Grade:**

**RHA/National Service:**

**Name of Service:**

**Location Address:**

**Contact Number:**

**Contact Email:**

**Line manager informed:**

**If yes, please state name:**

**Relationship to Child/Vulnerable Adult:**

**Child/ Adult at risk of abuse to whom report relates (if known)**

**Name:**

**Male/Female:**

**Date of Birth:**

**Address:**

**Contact No (For adult at risk only):**

**Contact Email (For adult at risk only):**

**Parent/Guardian/Carer(s) (\*if known, and in relation to child protection issues only)**

**Name 1:**

Relationship to child:

Address:

Contact No:

Contact Email:

**Name 2:**

Relationship to child:

Address:

Contact No:

Contact Email:

**In relation to adult safeguarding concern: Decision supporter appointed under Assisted Decision Making legislation: (\*if known, and if appropriate)**

For An Garda Síochána consideration when making enquiries - the person may lack capacity to make certain decisions or they might need support to make certain decisions.

<b>Name:</b>	
Relationship to child:	
Address:	
Contact No:	
Contact Email:	
Decision-making arrangement in place, (tick as appropriate):	Co decision making arrangement <input type="checkbox"/>
	Decision making representative <input type="checkbox"/>
	Enduring Power of Attorney <input type="checkbox"/>

**Please answer all questions:**

In relation to a child, has a report been submitted to the Child and Family Agency (Tusla)?  If yes, Online, by post or in person?  ..... (Tusla Office)	<b>Yes</b>	<b>No</b>	<b>Not applicable</b>
In relation to an adult, has a report been made to the HSE Safeguarding and Protection Team?  If yes, online, by post or in person?  ..... (Safeguarding & Protection Team)	<b>Yes</b>	<b>No</b>	<b>Not applicable</b>

Has the report been discussed with the child or adult at risk of abuse?	Yes	No	Not applicable
In relation to a child have parents/guardians/carer(s)* been informed?	Yes	No	Not applicable

**Details of alleged or suspected offence and relevant information:**

**Describe the alleged or suspected abuse/ incident/ behaviour of concern**

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**The context in which the reporter became aware or believed an offence took place (specify date, location and any other relevant information)**

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**Details of the person of concern – if known, to include name, address, other known contact details and any other relevant information**

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*Please continue on another sheet if required*

HSE Staff Member Signature:.....

Date:.....

This is a controlled document and must always be accessed from the [HSE National Central Repository](#). Whilst printing is permitted, printed copies are not controlled. Controlled documents must never be saved to secondary electronic/other locations which are accessible by staff or the public.

# Appendix 2: References

- Child and Family Agency Act 2013 -  
<https://revisedacts.lawreform.ie/eli/2013/act/40/front/revised/en/html>
- Child Care Act 1991 -  
<https://revisedacts.lawreform.ie/eli/1991/act/17/front/revised/en/html>
- Child Protection and Welfare Practice Handbook (HSE) 2011 -  
[https://www.tusla.ie/uploads/content/CF\\_WelfarePracticehandbook.pdf](https://www.tusla.ie/uploads/content/CF_WelfarePracticehandbook.pdf)
- Child Protection and Welfare Practice Handbook 2 (Tusla) 2019 -  
[https://www.tusla.ie/uploads/content/Tusla\\_Child\\_Protection\\_Handbook2.pdf](https://www.tusla.ie/uploads/content/Tusla_Child_Protection_Handbook2.pdf)
- Child Safeguarding Guidance issued by Tusla -  
<https://www.tusla.ie/children-first/support-documents/>
- Children First Act 2015 -  
<https://revisedacts.lawreform.ie/eli/2015/act/36/revised/en/html>
- Children First Act 2015 Schedule 1 -  
<https://revisedacts.lawreform.ie/eli/2015/act/36/revised/en/html#SCHED1>
- Children First Act 2015 Schedule 2 -  
<https://revisedacts.lawreform.ie/eli/2015/act/36/revised/en/html#SCHED2>
- Children First Act 2015 Schedule 3 -  
<https://revisedacts.lawreform.ie/eli/2015/act/36/revised/en/html#SCHED3>
- Children First Act 2015 Section 11 -  
<https://revisedacts.lawreform.ie/eli/2015/act/36/revised/en/html#SEC11>
- Children First Act 2015 Section 16 -  
<https://revisedacts.lawreform.ie/eli/2015/act/36/revised/en/html#SEC16>
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<https://revisedacts.lawreform.ie/eli/2015/act/36/revised/en/html#SEC17>
- Children First National Guidance for the Protection and Welfare of Children 2017 -  
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- Criminal Justice Act 2006 -  
<https://revisedacts.lawreform.ie/eli/2006/act/26/front/revised/en/html>
- Criminal Justice (Female Genital Mutilation) Act 2012 -  
<https://revisedacts.lawreform.ie/eli/2012/act/11/front/revised/en/html>
- Criminal Justice (Withholding of Information on Offences against Children and Vulnerable Persons) Act 2012 -  
<https://revisedacts.lawreform.ie/eli/2012/act/24/schedule/1/revised/en/html>
- Data Protection Act 1988 -  
<https://revisedacts.lawreform.ie/eli/1988/act/25/front/revised/en/html>
- Data Protection (Amendment) Act 2003 -  
<https://www.irishstatutebook.ie/eli/2003/act/6/enacted/en/html>
- Data Protection Act 2018 -  
<https://revisedacts.lawreform.ie/eli/2018/act/7/front/revised/en/html>
- Department of Health Supporting a Culture of Safety, Quality and Kindness: A Code of Conduct for Health and Social Service Providers 2018 -  
<https://www.hse.ie/eng/staff/resources/hrppg/code-of-standards-and-behaviour.html>
- Digital for Care — A Digital Health Framework for Ireland 2024 – 2030 -  
<https://www.gov.ie/en/publication/0d21e-digital-for-care-a-digital-health-framework-for-ireland-2024-2030/>
- Equal Status Act 2000 -  
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<https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:02016R0679-20160504>
- Health Act 2004 -  
<https://revisedacts.lawreform.ie/eli/2004/act/42/front/revised/en/html>
- HSE Child Safeguarding Risk Assessment Template and Child Safeguarding Template -  
[www.hse.ie/childrenfirst](http://www.hse.ie/childrenfirst)

- HSE Children First Implementation and Compliance Self-Audit Checklist - [www.hse.ie/childrenfirst](http://www.hse.ie/childrenfirst)
- HSE Children First National Office – [www.hse.ie/childrenfirst](http://www.hse.ie/childrenfirst)
- HSE Data Protection Website - <https://healthservice.hse.ie/staff/procedures-guidelines/data-protection/>
- HSE Data Protection Officer - <https://www.hse.ie/eng/gdpr/data-requests/data-protection-officer-and-deputy-data-protection-officer-contact-details.html>
- HSE e-Learning ‘An Introduction to Children First’ - [www.hse.ie/childrenfirst](http://www.hse.ie/childrenfirst)
- HSE Enterprise Risk Management Policy and Procedures - <https://www2.healthservice.hse.ie/organisation/national-pppgs/hse-enterprise-risk-management-policy/>
- HSE Information Classification and Handling Policy - <https://www2.healthservice.hse.ie/organisation/national-pppgs/information-classification-and-handling-policy/>
- HSE Limits to Confidentiality Leaflet – [www.hse.ie/childrenfirst](http://www.hse.ie/childrenfirst)
- HSE National Child Protection and Welfare Policy: Guide 1: Developing and Reviewing Child Safeguarding Statements 2025 - [www.hse.ie/childrenfirst](http://www.hse.ie/childrenfirst)
- HSE National Child Protection and Welfare Policy: Guide 2: Recognising and Reporting Child Protection and Welfare Concerns 2025 - [www.hse.ie/childrenfirst](http://www.hse.ie/childrenfirst)
- HSE National Child Protection and Welfare Policy: Guide 3: Managing Child Protection and Welfare Records 2025 - [www.hse.ie/childrenfirst](http://www.hse.ie/childrenfirst)
- HSE National Child Protection and Welfare Policy: Guide 4: Sharing Child Protection and Welfare Information 2025 - [www.hse.ie/childrenfirst](http://www.hse.ie/childrenfirst)

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<https://www2.healthservice.hse.ie/organisation/national-pppgs/hse-national-consent-policy/>
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- HSE Safety Incident Management Framework 2020 -  
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- HSE Sexual Safety Framework for Approved and Designated Centres 2025 -  
<https://www.hse.ie/eng/services/publications/sexual-safety-framework.pdf>
- HSE Trust in Care Policy 2005 -  
<https://www.hse.ie/eng/staff/resources/hrppg/trust-in-care.html>
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<https://revisedacts.lawreform.ie/eli/1998/act/49/front/revised/en/html>
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<https://www.tusla.ie/children-first/support-documents/>
- Tusla Child Abuse Substantiation Procedure (CASP) 2024 -  
<https://www.tusla.ie/CASP/>
- Tusla Dedicated Social Work Contact Points -  
<https://www.tusla.ie/services/child-protection-welfare/contact-a-social-worker/>
- Tusla Reporting Guidance -  
<https://www.tusla.ie/children-first/support-documents/>
- Tusla Web Portal -  
<https://www.tusla.ie/children-first/web-portal/>
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<https://www.tusla.ie/children-first/tusla-web-portal-user-guide/>
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<https://www.unicef.org.uk/what-we-do/un-convention-child-rights/>
- Webb J 'Safeguarding and Protecting Children: The Roles and Responsibilities of the Emergency Department Practitioner' in K. Cleaver, and J. Webb, eds. The Emergency Care of Children: An Evidence Based Approach. Blackwell Science 2016.

# Appendix 3: Membership of development group

## Membership of the HSE Children First National Office Child Protection and Welfare Policy development group

Name	Role and position
Marion Martin	HSE Children First Lead and Group Chairperson
AnneMarie Doyle	HSE Children First Training and Development Officer
Eva Alford	HSE Children First Training and Development Officer
Yvonne Lennox	HSE Children First Training and Development Officer

# Appendix 4: Policy approval and sign off

Name	Role and position
<b>Name: (print)</b>	Dr Colm Henry
<b>Title:</b>	Chief Clinical Officer
<b>Signature:</b> (e-signatures accepted)	
<b>Registration number:</b> (if applicable)	

# Appendix 5: HSE National Child Protection and Welfare Policy Audit Tool

## Methodology

**Population:** A sample of staff

**Sampling:** A total of 10% or 10 staff members, whichever is greater, should be selected.

**Frequency:** To be determined locally, recommended at least annually.

**Method:** Record Y for Yes, if the criteria are met. Record N for No, if criteria are not met or N/A for Not applicable.

**Compliance requirement:** 100%

Is standard/criteria being met for the following statements:	Yes	No	N/A	Evidence
<p><b>Statement 1</b></p> <p>All staff have read and agree to adhere to this Policy (this will be evidenced by the certificate received following completion of the mandatory eLearning training module 'An Introduction to Children First' on HSeLanD). Staff in HSE funded services must access their own organisation's policy and confirm that they have done so in the assessment section of the eLearning module.</p>				
<p><b>Statement 2</b></p> <p>All <u>relevant services</u> have undertaken an assessment of risk i.e. any potential for harm to a child while availing of the service.</p>				

Is standard/criteria being met for the following statements:	Yes	No	N/A	Evidence
<p><b>Statement 3</b></p> <p>All relevant services have prepared a Child Safeguarding Statement that complies with <a href="#"><u>Section 11 of the Children First Act 2015</u></a> and it is on display in a prominent place where the relevant service concerned relates.</p>				
<p><b>Statement 4</b></p> <p>All relevant services review their Child Safeguarding Statement at intervals of not more than 24 months or as soon as practicable after there has been a material change in any matter to which the statement refers. A copy of the Child Safeguarding Statement is available on request, to parents, guardians, members of the public and Tusla – Child and Family Agency.</p> <p>A copy of the Child Safeguarding Statement must be furnished to all staff.</p>				
<p><b>Statement 5</b></p> <p>All staff have completed all relevant mandatory Children First training on HSeLanD, and any refresher training as necessary.</p>				
<p><b>Statement 6</b></p> <p>All services have developed a local written record keeping procedure for child protection and welfare records in line with this Policy and its suite of guides and it is being implemented.</p>				

Is standard/criteria being met for the following statements:	Yes	No	N/A	Evidence
<p><b>Statement 7</b></p> <p>The HSE Child Protection and Welfare Reporting Procedure is in place and is fully implemented and being adhered to.</p>				
<p><b>Statement 8</b></p> <p>The HSE Children First Implementation and Compliance Self-Audit Checklist is being completed annually and made available on request in all services.</p>				
<p><b>Date of Audit:</b></p> <p><b>Audited by (name/title):</b></p> <p><b>Compliance Rate %:</b></p>				
<p><b>Calculation of Compliance Rate %:</b></p> <p>The score, expressed as a percentage, is calculated by dividing the number of “yes” and “no” answers. “Not applicable” answers are excluded from the calculation of the percentage score.</p> <p><b>Example:</b> If there are 6 “yes” and 2 “no” answers, the score is calculated as follows:  <math>6 \text{ (yes answers)} \div 8 \text{ (total of yes and no answers)} \times 100 = 75\%</math></p>				









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National Office

**HSE National Child Protection and Welfare Policy**