

*Aoifes Clown Doctors Ireland*

**CHILD PROTECTION POLICY**

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**Overview and Introduction**

One of the main objectives of the Children First Act 2015 is to ensure that each  
organisation keeps children safe while availing of its services. We should know how to  
recognise and respond to the possibility of abuse or neglect, so as to ensure that the most  
effective steps are taken to protect a child and to contribute to the ongoing safety of children.  
The process of identifying and reporting suspected child abuse and neglect can be difficult for  
both the person making the report and the families involved.

However, a failure to act when abuse or neglect is occurring can result in a child being left in a harmful situation and could potentially result in long term damage to their well-being.

You should always inform Tusla when you have reasonable ground for concern that a child may have been, is being or is at risk of being abused or neglected. It is not necessary for you to prove that abuse has occurred to report a concern to Tusla. All that is required is for you have reasonable grounds for concern.

The legislation and the Children First: National Guidance for the Protection and  
Welfare of Children relate to the obligations of relevant services to prevent, as far as  
practicable, deliberate harm or abuse to children availing of services.

While it is not possible to remove all risks, Aoifes Clown Doctors has in place policies and procedures to manage and reduce risk to the greatest possible extent.

**This document will set out:  
1.** How Aoife’s Clown Doctors keep children safe from harm while availing of its services.  
2. The identified risk and assessment tool to identify whether a child or young person  
could be harmed while availing of services  
3. Child Safeguarding Statement that outlines the policies and procedures in place to  
manage risk.  
4. The appointed relevant person(s).  
5. Aoife’s Clown Doctors Confidentiality

**Legal Framework**

Child Protection and Welfare policy is based on a legal framework provided primarily by the Child Care Act 1991 and the Children First Act 2015.

The policy and practice that applied in this area is outlined in Children First: National Guidance for the Protection and Welfare of Children. This indicates the statutory obligations for those individuals and organisations under the Act. There are a number of other pieces of legislation that relates to child protection and welfare. These include the Protection for Persons Reporting Child Abuse Act 1998, this Act protects the person making the report as long as the report is made in good faith.

The Criminal Justice Act 2006, section 176 of this Act created an offence of reckless endangerment of children. This means that an offence may be committed by a person who has authority or control over a child or abuser who intentionally or recklessly endangers a child e.g. failing to take reasonable 4 ground to protect a child from risk, harm or neglect.

The Criminal Justice (withholding of information on offences against children and vulnerable persons) Act 2012, where a person willingly withholds information about a serious offence against a person under 18 years or a vulnerable person.

The National Vetting Bureau (Children and Vulnerable Persons) Acts 2012- 2016, under these Acts it is compulsory for employers to obtain vetting disclosures in relation to anyone who is carrying out relevant work with children or vulnerable adults.

**Aim of Procedures and Guidance**  
This document sets out Aoife’s Clown Doctors role and responsibility for safeguarding children. A definition of the child and harm will be outlined. The document will outline how the policy is applied to safeguarding children in different settings. The role and responsibilities of the Mandated Person and the Designated Liaison Person will be outlined as directed by Children First Act 2015.

Definition of child and reasonable grounds ‘A child’ means a person under the age of 18 years, who is not or has not been married.

**Child abuse can be categorised into four different types.**

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

**Neglect**: when a child does not receive adequate care or supervision to the extent that the child is harmed physically or developmentally. This might include the omission of food, clothing, warmth, medical care, intellectual stimulation or supervision and safety.

**Emotional abuse**: occurs when a child’s basic need for attention, affection, approval, consistency and security are not met due to the incapacity or indifference from their parent or caregiver.

**Physical abuse:** when someone deliberately hurts a child physically or puts the child at risk of being physically hurt.

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

**Retrospective abuse**

Clown doctors not only interact with the children but also with the parents, siblings of the children and staff.

Some adults may disclose abuse that took place during their childhood. This information must be reported to Tusla as the alleged abuser may pose a current risk to children.

**Concerns about an adult who may pose a risk to children**

Sometimes concerns arise about whether an adult may pose a risk to a children, even if there is no specific child named in relation to the concern. For example based on known or suspected past behaviour, a concern could exist about the risk an individual may pose to children with whom they have contact with. We should report any such reasonable concerns to Tusla or the Gardaí, who will try to establish whether or not any child is currently at risk from the individual in question.

**A concern could come to your attention in a number of ways:**1**.** A child tells you or indicates that she/he is being abused. This is called a disclosure.   
2. An admission or indication from the alleged abuser.

3. A concern about a potential risk to children posed by a specific person, even if the children are unidentifiable.   
4. Information from someone who saw the child being abused.

**Safe Recruitment**

We ensure that all clown doctors and volunteers are carefully selected and we adhere to the following:  
1. Providing role descriptions which outline the qualifications, skills and experience required

2. Interviews   
3. Reference checks, verified and kept on file   
4. Garda vetting checks, verified and kept on file by us and each hospital they visit.

5. Clown Doctor Handbook reviewed with new clown doctor

**Code of Behaviour**

Adherence to good practice, aligned with open communication with children and parents (as appropriate) should   
ensure that a safe and enjoyable environment is established and maintained.

We are committed to:

* Valuing and respecting all children
* Listening to children
* Promoting positive behaviour
* Implementing and adhering to all relevant policies to keep children safe

Clown doctors always work in pairs in every hospital and liaise with nursing staff before entering the ward.

Should a child approach a clown doctor with concerns, they are trained to refer the child to a hospital member   
of staff.

**Risk Assessment**

**Risk is measured in terms of:**

* Likelihood or probability
* Consequences or impact

**Probability / Likelihood of Occurrence**

* What is the chance that this risk is going to happen
* Measured on a scale from low to high

**Consequences / Impact of Occurrence**

* If it does occur, what will be the likely impact on the organisation?
* Measured on a scale from low to high

Likelihood / Probability Scoring

Low

Medium

High

**Treatment of Risk**

Risks are treated according to the three T’s as follows:

**Tolerate** – accept the risk (*Risks that are low and require no further action)*

**Treat** – controls to address problems*(Manage and contain the risk to an acceptable level)*

* Reduce – likelihood of occurrence
* Reduce – consequences of occurrence

**Terminate** – withdraw from activity (where the only appropriate way of managing the risk is to   
 terminate it)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Risk Description** | **Procedures in Place** | **Risk**  **Rating** | **Risk**  **Owner** | **Immediate / Future Action** |
| Risk of harm to a child from a clown doctor. | Pre‐employment checks – vetting for all clown doctors by each participating hospital and by Aoifes Clown Doctors Ireland.  Online Children First training for all clown doctors.   Code of Conduct for clown doctors.   Clown doctors always work in pairs.  Local procedures in each hospital for management of allegations against a staff member, in line with Trust in Care Policy requirements. | **Low** | Board of Directors | Review Garda Vetting Policy and Procedures.  R Review Recruitment and Selection Policy and Procedures.  Collaborate with participating hospitals regarding their individual child protection policies and protocols.  Review list of all designated mandated persons for each participating hospital/service |
| Non reporting of concerns due to risk of harm not being recognised by the clown doctors | Induction for all clown doctors.  Child protection training for all clown doctors  Circulation of Safeguarding Statement to all clown doctors and directors. | **Low** | Board of Directors and Clown Doctors | Review Safeguarding Statement and Risk Register every two years.  Ongoing Child Protection training for new and current clown doctors and directors . |
| **Risk Description** | **Procedures in Place** | **Risk**  **Rating** | **Risk**  **Owner** | **Immediate / Future Action** |
| Appropriate management of allegations of abuse or misconduct against clown doctors, volunteers or directors. | Child protection training for directors    Collaborate with the hospital /service where the allegation of misconduct took place  Clearly defined CP and HR policies and procedures that include the role and responsibilities of the directors. | **Medium** | Management | Regular review of policy and procedures,  Ongoing training in HR and CP. |

In undertaking this risk assessment, Aoife’s Clown Doctors has endeavoured to identify as far as possible the risks of harm that are relevant to working with young people and to ensure that adequate procedures are in place to manage all risks identified. While it is not possible to foresee and remove all risk of harm, Aoife’s Clown Doctors has in place the procedures listed in the risk assessment to manage and reduce risk to the greatest possible extent.

*Aoifes Clown Doctors Ireland*

**CHILD SAFEGUARDING STATEMENT**

Aoife’s Clown Doctors Ireland is a Company Limited by Guarantee.   
Aoifes Clown Doctors Ireland facilitates the visits of the clown doctors to the children's wards of the hospitals/childcare settings.  
The clown doctors are self employed and come from theatrical and musical backgrounds.  
Aoife’s Clown Doctors visit the children in the hospital setting and provide entertainment and fun through improvisation, parodying medical procedures helping to ease the fear of the children and their families.

Aoifes Clown Doctors visit sick children regardless of their race, nationality, religion, beliefs, values or sexual identity.

**Services**

**Our Lady's Hospital Crumlin**The clown doctors visit OLCHC twice a week. The first weekly visit is on a Tuesday to St Johns ward/Oncology ward. Many children are in treatment for a number of months to years and the presence of the clown doctors are a welcome distraction for them from their regular medical procedures.

Thursday’s clown doctor visit can alternate between the cardiology ward/the burns ward and the medical tower which is the outpatient area.

The hospital setting is in a state of constant change so the clown   
doctors take the lead from the nursing and medical practitioners.

**Temple Street Children's Hospital**At present the clown doctors visit Temple street hospital once a fortnight.  
In this case the play therapist   
stays with the clown doctors and leads them through the entire hospital to the wards and children that are well enough for the visit.

Temple Street also run a Saturday Club once a month with a variety of different   
entertainments for the children. The clown doctors are also a regular feature of this.

It is our principle to entertain children while safeguarding them from harm and this is reflected within our Mission, Vision and Values.

**Mission Statement**

Our mission is to bring joy to children in Ireland's hospital wards and to momentarily offer an escape from the stress and anxiety of the hospital setting for families through laughter and games.

**Vision**

Our vision is to extend our services in Our Ladys Childrens Hospital Crumlin and Temple Street Children's University Hospital to maximise contact with sick children in more hospital wards. To expand our service to other local and national hospitals and hospices where sick children are treated.

**Values**

At the heart of our work in Aoife's Clown Doctors Ireland is a set of 5 core values.

• Compassion and kindness

• Respect

• Openness

• Collaboration

• Fun

In accordance with the requirements of the Children First Act 2015, Children First: National Guidance for the Protection and Welfare of Children 2017 and Tusla’s Child Safeguarding: A Guide for Policy, Procedure and Practice, Aoife’s Clown Doctors Ireland has agreed the Child Safeguarding Statement as set out.   
Aoife’s Clown Doctors Ireland will:

* Recognise that the protection and welfare of children is of paramount importance, regardless of all other considerations;
* Fully comply with its statutory obligations under the Children First Act 2015 and other relevant legislation relating to the protection and welfare of children;
* Fully co-operate with the relevant statutory authorities in relation to child protection and welfare matters;
* Adopt safe practices to minimise the possibility of harm or accidents happening to children and protect the clown doctors from the necessity to take unnecessary risks that may leave themselves open to accusations of abuse or neglect;
* Fully respect confidentiality requirements in dealing with child protection matters.

Aoife’s Clown Doctors Ireland have carried out an assessment of any potential risk of harm to a child while availing  
 of a clown doctor visit.

**Key risks identified:**

1. Risk of harm to a child from a clown doctor.
2. Non-reporting of concerns due to risk of harm not being recognised by the clown doctors.

|  |  |
| --- | --- |
| **RISK IDENTIFIED** | **PROCEDURE TO MANAGE RISK** |
| Risk of harm to a child from a clown doctor. | Pre‐employment checks – vetting for all clown doctors by each participating hospital and by Aoifes Clown Doctors Ireland.  Online Children First training for all clown doctors.   Code of Conduct for clown doctors.   Clown doctors always work in pairs.  Local procedures in each hospital for management of allegations against a staff member, in line with Trust in Care Policy requirements. |
| Non reporting of concerns due to risk of harm not being recognised by the clown doctors | Induction for all staff.  Child protection training for all staff.  Circulation of Safeguarding Statement to all clown doctors and directors. |

The following procedures support our intention to safeguard children while they are availing of our services:

* Procedure for the management of allegations of abuse or misconduct of a director/clown doctor against a child  
   availing of our services;
* Procedure for the safe recruitment and selection of clown doctors and volunteers to work with children;
* Procedure for the provision of and access to child safeguarding training and information;
* Procedure for the reporting of child protection or welfare concerns to Tusla;
* Procedure for maintaining a list of the individuals in the relevant hospitals who are designated mandated persons.

Aoife’s Clown Doctors Ireland is committed to the implementation of this Child Safeguarding Statement and the procedures that support our intention to keep children safe from harm while availing of our services.

The Child Safeguarding Statement will be reviewed in March, 2020, or as soon as practicable after there has been a material change in any matter to which the statement refers.

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

Aine Hendrick, Director, Aoife’s Clown Doctors Ireland, 1a New Street, Skerries, Co. Dublin   
Tel: 087-9802436

Confidentiality:

The clown doctor must keep all information which he/she receives from the hospital staff in support of their work at the patient’s bed in absolute confidence. This may include the condition of health and the personal background of the patient. It is forbidden for the clown doctor to give this information on to third parties. Patient/physician confidentiality and discretion is the utmost duty not only within but also outside of the hospital.

Aoife’s Clown Doctors aims to ensure that no information relating to an individual is shared with anyone outside the organisation without the prior consent of the child and parent/guardian. However, in the case of a child protection issue, Aoife’s Clown Doctors has a responsibility to pass information on to TUSLA.

Also, in the event of an organisation asking for a reference on the suitability of an individual (to work with children or vulnerable groups) known to be unsuitable, the Organisation will state that the individual is “not suitable to work with children or vulnerable individuals”.

Relevant Person (Mandated Persons and Designated Liaison Person)

The designated liaison person is responsible for ensuring that reporting procedures within the hospital/service are followed. The designated liaison person should record all concerns or allegations of child abuse brought to his or her attention and the actions taken in relation to a concern or allegation. Mandated persons are people who have contact with children and or families and who because of their qualification, training and/or employment role, are in a key position to help protect children from harm. The mandated person has two main legal obligations under the Children First Act 2015.   
These are:  
 To report the harm of children  
 To assist Tusla if requested in assessing a concern which has been the subject of a mandated person.

#### **Mandated Persons in Temple Street are**

* + Registered Medical Practitioners (Consultants and NCHDs)
  + Registered Nurses
  + Physiotherapists
  + Speech and Language Therapists
  + Occupational Therapists
  + Social Workers
  + Psychologists and Psychotherapists
  + Member of the Clergy (Chaplaincy Team)

#### **Mandated Persons in Our Lady's Hospital, Crumlin are:**

* + Registered Medical Practitioners (Consultants and NCHDs)
  + Registered Nurses
  + Physiotherapists
  + Speech and Language Therapists
  + Occupational Therapists
  + Social Workers
  + Psychologists and Psychotherapists
  + Member of the Clergy (Chaplaincy Team)
  + Ms. Sheila McCrory, Head Social Worker for any queries.

**Reporting Guidelines**

The following are guidelines for what to do if a clown doctor suspects a child is being abused or if an allegation is brought to their attention:

If a clown doctor suspects an individual is being abused:

* + **Immediately** inform the Designated Contact Person of the hospital/service and the CEO of Aoife’s Clown Doctors Ireland
* Record the **facts only** as known by them in writing and give a copy to the Designated Contact Person.   
   Do not investigate or speculate
* Ensure that no situation arises which could cause further concern
* The clown doctor **must** refer, **must not** investigate

If a child discloses abuse to the clown doctor by someone else:

* Allow the child to speak without interruption, accepting what is said
* Alleviate feelings of guilt and isolation, while passing no judgement
* Advise that the child will be offered support, but that you must pass on the information to the appropriate authority (**never** promise a child that you will not tell anyone)
* Record the **facts only** as you know them in writing and give a copy to the Designated Contact Person. Do not investigate or speculate and use the child’s language word for word
* Do not press the child for further information and keep questions to a minimum
* Ensure that no situation arises that could cause any further concern
* The clown doctor **must** refer, **must not** investigate

If the clown doctor receives an allegation against themselves or against any adult:

* I**mmediately** inform the Designated Contact Person and the CEO of Aoife’s Clown Doctors regarding an incident having occurred.
* Record the facts only as you know them in writing and give a copy to the Designated Contact Person and inform the CEO of Aoife’s Clown Doctors that an incident has occured.   
  Do not investigate or speculate
* Try to ensure that no-one is placed in a position that could compromise them further
* The clown doctor **must** refer, **must not** investigate

**In all cases:**

Record the facts only as soon as possible and pass immediately to the Designated Contact Person and inform the CEO of Aoife’s Clown Doctors that an incident has occured.

**Appendix (i) Children First National Guidance 2017**

**Appendix (ii) A Guide for the Reporting of Child Protection and Welfare Concern**

**Appendix (iii) Child Safeguarding: A Guide for Policy, Procedure and Practice**

See http://www.tusla.ie/children-first