

Child Safeguarding Statement

Name of Service: CHI at Crumlin providing acute medical and surgical care for children on a secondary, tertiary and quaternary basis.

Nature of service and principles to safeguard children from harm:

CHI at Crumlin is an acute paediatric teaching hospital. It is Ireland's largest paediatric hospital and is responsible for providing high quality safe care to children from birth to 16 years, across a variety of complex medical and surgical conditions. CHI at Crumlin is also the national centre in Ireland for a large number of clinical specialities. The hospital sees 150,000 children annually as inpatients, day cases, outpatients and attendances to the Emergency Department.

CHI at Crumlin is committed to safeguarding children while they attend our services. There is a Child Protection Committee in place and CHI at Crumlin is part of the three children's hospitals Joint Child Protection Committee.

It is our principle to safeguard children from harm and this is reflected within our Values, Vision and Mission.

In living our Values, we will be child-centred, compassionate, progressive and act with respect, excellence and integrity.

Our Vision is healthier children and young people in Ireland.

Our Mission is to promote and provide child-centred, research-led and learning informed healthcare, to the highest standards of safety and excellence, in partnership with each other, with children, young people and their families through a network of children's services in Ireland.

CHI at Crumlin is committed to fulfilling its obligations as an organisation by implementing and complying with The Children First Act 2015. CHI at Crumlin as an organisation is obliged to:

- Keep children safe from harm while in our care
- Complete a risk assessment
- Prepare this safeguarding statement
- Appoint a relevant person

Risk assessment

CHI at Crumlin has carried out a risk assessment in the context of the risk of any potential for harm to a child from abuse while in our care. This risk assessment does not include risks to general health and safety.

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This risk assessment evaluated safeguarding risks of potential for harm to a child attending CHI at Crumlin. Harm is as defined by the Children's First Act 2015 (Sections 11(1) (a) and Section 2), in relation to a child as:

(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 combination of acts, omissions or circumstances, or otherwise.

Safeguarding risks will be outlined in the context of the following elements of service provision.

- In-patient and day care
- Outpatient care
- Emergency Department care
- Home care carried out by CHI at Crumlin staff
- Transport to other hospitals / services where a member of CHI at Crumlin staff is present
- Interactions with other services.

Key Risks Identified

1. Risk of harm to a child from a member of staff¹
2. Risk of harm to a child from another patient, parent or member of the public
3. Risk of harm or concerns not being recognised or reported by staff
4. Potential for patient harm if a child is inappropriately placed in an acute hospital as a place of safety for a significant period of time

	Risk identified	Procedure in place to manage risk identified
1	Risk of harm to a child from a member of staff	<ul style="list-style-type: none"> • Pre-employment checks – vetting for all staff • On-line Children First training for all staff • CPAT Training available for frontline staff • System to monitor compliance with mandatory training in place, assurance provided to Board of Directors • Professional standards for healthcare staff • Professional registration / Code of Conduct for healthcare professionals • Children First National Guidance on hospital intranet • Trust in Care (2005) policy reflected in local guidelines for Good Practice, available on intranet

¹ Reference to "Staff" in this document includes all employees or agents of the hospital.

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		<ul style="list-style-type: none"> Local algorithm on reporting suspected child protection concerns (available on intranet) Local procedures for management of allegations against a staff member, in line with Trust in Care Policy requirements Information sessions for all staff on requirements of new legislation All healthcare providers who interact with CHI at Crumlin are required to ensure local compliance with the National Guidance, including non-public organisations
2	Risk of harm to a child from another patient, parent or member of the public	<ul style="list-style-type: none"> Staff supervision and training Many hospital areas not accessible to members of the public after 6pm Wards locked after 10pm. Audit of same bi-annually, and should be parent-only access Parents encouraged to stay in ward or hospital Medical Social Work support available in routine working hours Supervision of patient by sibling allowed only if over 18 years old Patient without a parent in attendance flagged at Safety Pause Local policy and guidance on supervision /accompaniment Additional safety measures in place for a child with behaviour that challenges Reporting procedure in place Parental supervision in OPD/ED Staff/Parental supervision during a transfer Security
3.	Risk of harm or concerns not being recognised or reported by staff	<ul style="list-style-type: none"> Staff information, supervision and training Oversight of same by CPC Reporting procedure Legal and administrative consequences for non-reporting specified in Children First on-line training and information session
4.	Potential for patient harm if a child is inappropriately placed in an acute hospital as a place of safety for a significant period of time.	<ul style="list-style-type: none"> Medical Social Work support Referral statistics monitored via the CPC Tusla/HSE representation on Joint Hospitals CPC Escalation of placement

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Procedures

Our Child Safeguarding Statement has been developed in line with requirements under the Children First Act 2015, the Children First: National Guidance, and Tusla's Child Safeguarding: A Guide for Policy, Procedure and Practice.

In addition to the procedures listed in our risk assessment, the following procedures and processes support our intention to safeguard children while they are attending our services:

- Procedure for the management of allegations of abuse or misconduct against workers/volunteers of a child attending our services,
- Procedure for the safe recruitment and selection of workers and volunteers to work with children,
- Provision of and access to child safeguarding training and information, including the identification of the occurrence of harm,
- Procedure for the reporting of child protection or welfare concerns to Tusla,
- Maintain a list of the persons (if any) in the relevant service who are mandated persons,
- Appoint a relevant person.

Implementation

We recognise that implementation is an ongoing process. Our service is committed to the implementation of this Child Safeguarding Statement and to the procedures that support our intention to keep children safe from harm while availing of our services.

This Child Safeguarding Statement will be reviewed on 01/04/2020 (24 months), or as soon as practicable following a material change in any matter to which the statement refers.



Prof Sean Walsh
Site Chief Executive

--For queries, please contact: Ms. Sheila McCrory, Head Medical Social Worker, Tel: (01) 409 6356