

BRIATHAR DÉ MO LÓCHRANN



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MARY IMMACULATE COLLEGE
COLÁISTE MUIRE GAN SMÁL

POLICY:	Safeguarding Vulnerable Persons Policy
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ADOPTED:	Approved UR 2019#01
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AMENDMENTS:	
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REVIEW:	March 2024
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Promoting the Welfare of Vulnerable Persons:

Safeguarding Policy and Procedures

This Policy applies to all members of Mary Immaculate College including Trustees, An tÚdarás Rialaithe (Governing Authority), all staff, students, volunteers and persons who encounter vulnerable persons in the context of classes, tuition or services at Mary Immaculate College.

Key Personnel

Designated Officer

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Designated Officer

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Designated Liaison Person -Thurles

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Vetting Liaison Officer

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Director of Human Resources

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Senior Manager (Responsibility for Safeguarding)

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Authorisation for Immediate Action

In exceptional circumstances

Name: Prof Gary O'Brien

Title: Vice President

Address: Room 109, Mary Immaculate College

Email: gary.obrien@mic.ul.ie

Phone: 061 204332

Is authorised where circumstances warrant it, as an essential precautionary measure in order to protect a vulnerable person, to direct an employee or volunteer to immediately absent himself or herself from any activity or programme, without loss of pay if applicable, until the matter causing concern has been assessed.

Such action is a precautionary measure and is not disciplinary in nature and will be for the shortest possible period.

Contact Details for College Support Services - Limerick

Student Counselling Service	-	Room T.3.11/T.3.12 – 061 204948/19
Student Medical Centre	-	Room T.3.07 – 061 204343
Chaplaincy Service	-	Room G.48 – 061 204331 / 086 2550436

Contact Details for College Support Services - Thurles

Student Counselling Service	-	Room P219 – 0504 32033 / 087 9088710
Student Medical Service -		Dr Liam Collins, The Surgery, Fianna Rd., Thurles - 050421155
Chaplaincy Service	-	joe.walsh@mic.ul.ie - 086 7714888

Contact Details for Statutory Services

HSE – Safeguarding and Protection Team

Principal Social Worker, Tyone Health Centre, Tyone, Nenagh, Co. Tipperary

Tel: 067 46470

Email: Safeguarding.cho3@hse.ie

An Garda Síochána
Protective Services Unit,
Henry Street Garda Station,
Limerick.

061 212448

Limerick.psu@garda.ie

Glossary of Terms

Designated Officer (DO): The person nominated as the Designated Officer for the College. The DO acts as a resource person for any member of the college community who wishes to source information and advice regarding any concerns relating to safeguarding vulnerable persons. The DO will provide support in assessing responsibilities and liaising with relevant agencies. In this document reference to the DO will include Deputy DO.

Risk Assessment: Risk assessment means an assessment of any potential for harm to a vulnerable person while availing of the provider's service

Responsible Person: The person appointed by a Head of Department to ensure appropriate safeguards and practices in their area of responsibility including risk assessment and management of all relevant activities/programmes

Member of the College: For the purposes of this document, the term "member of the College" includes Trustees, persons involved in governance, An tÚdarás Rialaithe, members of the academic or support staff, students of the College and/or those working on a voluntary/unpaid basis on behalf of the College.

Head of department: This term is taken to include Heads of Academic, Administrative and Service Departments and manager of any facilities administered by the College.

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1. Introduction

1.1. Statement

Mary Immaculate College wishes to ensure that it maintains the highest possible standards in all its interactions with vulnerable persons. This policy and procedures document aims to ensure that vulnerable persons are not placed at risk while involved in College activities. It outlines the steps to be taken when there is a concern about a vulnerable person's welfare, or when a complaint is made about a member of the College Community. It is designed to protect both those in a position of trust and those for whom they have responsibility. All policies, guidelines and protocols of Mary Immaculate College, will reflect the Colleges commitment to the promotion of equality and will be fully compliant with the provisions of prevailing equality legislation.

1.2. Compliance

1.2.1. This policy is the official Safeguarding Vulnerable Persons Policy of Mary Immaculate College. It should be considered in association with all other relevant College policies, and in particular with the Safeguarding Children Policy.

1.2.2. This policy is intended for all members of the College Community and particularly those who have contact with vulnerable persons in pursuance of their duties or in fulfilment of the requirements of programmes of study, and who wish to address any concerns they may have in relation to safety and wellbeing. It provides guidance on their responsibilities in relation to vulnerable persons and on safe practices when working with vulnerable persons.

1.2.3. It is the duty of each member of the College Community be familiar with and adhere to this policy and procedure.

1.3. Review

1.3.1. This Policy and Procedures will be reviewed on a three-yearly basis, or as may otherwise be appropriate in the context of any changes in legislation or policy and based on experience and feedback.

1.3.2. Responsibility for the review of the policy will be held by the Executive Team of the College.

1.3.3. This Policy and Procedure and associated Child Safeguarding Statement may be amended as required by law. Changes of a non-substantial procedural nature may be made on occasion by the College authorities.

1.4 Principles

1.4.1 The welfare of vulnerable persons will always be the paramount consideration.

1.4.2 The rights of any person who is the subject of an abuse complaint will be respected.

1.4.3 The safest possible practices must be adopted in all programmes and activities in order to minimize the risk of harm.

1.4.4 All member of the College Community share a responsibility to promote welfare, avoid causing harm, and to not place themselves or others in situations of unnecessary risk.

1.5 Responsibilities

1.5.1 An tÚdarás Rialaithe

1.5.1.1 Approve Safeguarding Policy

1.5.1.2 Consider periodic reports of the Safeguarding Arrangements

1.5.1.3 Direct any appropriate action based on such consideration

1.5.1.4 Consider three-yearly review of Policy and Procedures.

1.5.2 President

1.5.2.1 Appoint a Senior Manager with overall responsibility for Safeguarding within the College.

1.5.2.2 Propose the Safeguarding Policy to An tÚdarás Rialaithe.

1.5.2.3 Ensure that the Safeguarding Policy is reviewed on a three-yearly basis, or as may otherwise be appropriate

1.5.2.4 Consider any reports provided to him/her by the Senior Manager and ensure appropriate action is taken.

1.5.3 Senior Manager, appointed by the President of the College, to have overall responsibility for Safeguarding

1.5.3.1 Formal delegated responsibility, by the President of the College, in all Safeguarding matters.

1.5.3.2 Ensure appropriate organisations arrangements are maintained

1.5.3.3 Appoint a Designated Officer and Deputy Designated Officer.

1.5.3.4 Submit an annual (or on such other occasions as may be appropriate and agreed) report on Safeguarding to the President.

1.5.4. Members of the College Community

1.5.4.1 Comply with, and support, the policy and procedure

1.5.5 Head of Department

1.5.5.1 Appointment of Responsible Persons to undertake risk assessment and management for each identified programme or activity.

1.5.5.2 Support Compliance with Policy and Procedures

1.5.6 Responsible Person: Approved by Head of Department

1.5.6.1 Ensure appropriate safeguards and practices in their areas of responsibility, including risk assessment of all activities/programmes (see Appendix 1).

1.5.7 Designated Officer

1.5.7.1 Receive all Safeguarding complaints/concerns.

1.5.7.2 Act as a resource person to any staff member or volunteer who has Safeguarding concerns and as liaison with outside agencies.

1.5.7.3 Ensure that all appropriate notifications and reports are made in respect of any suspected case of abuse of a vulnerable person.

1.5.7.4 Ensure appropriate support to complainants.

1.5.7.5 Ensure they are knowledgeable about Safeguarding and undertake any training considered necessary to keep themselves informed on relevant developments.

1.5.8 Screening Group

1.5.8.1 Authorised, by the President, to undertake a preliminary screening of a complaint.

1.5.9 Director of HR

1.5.9.1 Ensure best practices in all relevant HR areas.

1.5.9.2 Ensure legal obligations are met in all appointments.

1.5.9.3 Ensure the provision of induction and ongoing training.

1.5.9.4 Ensure that any disciplinary related issues are addressed.

1.5.10 Assistant Registrar, Garda Vetting

1.5.10.1 Ensure all legal and related obligations arising from College policies are met.

1.5.11 Responsible Person: Approved by Head of Department

1.5.11.1 Ensure appropriate safeguards and practices in their areas of responsibility, including risk assessment and management of all relevant activities/programmes

2. Definitions

2.1. Definition of Vulnerable Persons in legislation

The National Vetting Bureau (Children & Vulnerable Persons) Act 2012 to 2016 provides the following definition:

“Vulnerable Person” means a person, other than a child, who—

- (a) is suffering from a disorder of the mind, whether as a result of mental illness or dementia,
- (b) has an intellectual disability,
- (c) is suffering from a physical impairment, whether as a result of injury, illness or age, or
- (d) has a physical disability, which

is of such a nature or degree—

- (i) as to restrict the capacity of the person to guard himself or herself against harm by another person, or
- (ii) that results in the person requiring assistance with the activities of daily living including dressing, eating, walking, washing and bathing.

The Criminal Justice (Withholding of Information of Offences against Children and Vulnerable Persons Act 2012 provides the following definition.

“Vulnerable Person” means a person (including, insofar as the offences specified at paragraph 8 of Schedule 2 are concerned, a child aged 17 years old)—

(a) who—

(i) is suffering from a disorder of the mind, whether as a result of mental illness or dementia, **or**

(ii) has an intellectual disability

which is of such a nature or degree as to severely restrict the capacity of the person to guard himself or herself against serious exploitation or abuse, whether physical or sexual, by another person,

or

(b) who is suffering from an enduring physical impairment or injury which is of such a nature or degree as to severely restrict the capacity of the person to guard himself or herself against serious exploitation or abuse, whether physical or sexual, by another person or to report such exploitation or abuse to the Garda Síochána or both.

2.2. Persons in Authority and Relevant Persons

2.2.1. The Criminal Law (Sexual Offences) Act 2017 introduces the concept of a “person in authority” and the concept of “relevant person”. This “relevant person” should not be mistaken for the position of “relevant person” in the Children First Act 2015.

2.2.2. The legislation defines a “person in authority”, in relation to a relevant person against whom an offence is alleged to have been committed, means any person who as part of a contract of service or a contract for services is, for the time being, responsible for the education, supervision, training, treatment, care or welfare of the relevant person

2.2.3. “relevant person” means a person who has—

(a) a mental or intellectual disability, or

(b) a mental illness,

which is of such a nature or degree as to severely restrict the ability of the person to guard himself or herself against serious exploitation

2.3. Definition of Abuse

Abuse of a vulnerable person may be defined as any act, or failure to act, which results in a breach of a vulnerable person's physical and mental integrity, dignity or general wellbeing, whether intended or through negligence, including sexual relationships or financial transactions to which the person does not or cannot validly consent, or which are deliberately exploitative. Abuse may take a variety of forms.

Although this abuse definition focuses on acts of abuse by individuals, abuse can also arise from inappropriate or inadequacy of care or programmes of care.

2.4. Types of Abuse and Relation Considerations

There are several forms of abuse, any or all of which may be perpetrated as the result of deliberate intent, negligence or lack of insight and ignorance. A person may experience more than one form of abuse at any one time. The following are the main categories/types of abuse.

Physical abuse includes hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate sanctions.

Sexual abuse includes rape and sexual assault, or sexual acts to which the vulnerable person has not consented, or could not consent.

Psychological abuse includes emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks.

Financial or material abuse includes theft, fraud, exploitation, pressure in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.

Neglect and acts of omission includes ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of the necessities of life such as medication, adequate nutrition and heating.

Self-Neglect includes a spectrum of behaviours involving the failure to self-care or

prevent conditions or situations that adversely affect a vulnerable person's health and safety.

Discriminatory abuse includes ageism, racism, sexism, slurs or similar treatment.

Institutional abuse may occur within institutional settings, and may involve poor standards of care, rigid routines and inadequate responses to complex needs.

2.4.1. Who may abuse?

Anyone who has contact with a vulnerable person may be abusive, including a member of their family, community or a friend, informal carer, healthcare/ social care or other worker.

Familial Abuse

Abuse of a vulnerable person by a family member.

Professional Abuse

Misuse of power and trust by professionals and a failure to act on suspected abuse, poor care practice or neglect.

Peer Abuse

Abuse, for example, of one adult with a disability by another adult with a disability.

Stranger Abuse

Abuse by someone unfamiliar to the vulnerable person.

2.4.2. Where might abuse occur?

Abuse can happen at any time in any setting.

2.4.3. Accidents, incidents and near misses

Lessons can be learned from accidents, incidents and/or near misses. As a result, accidents, incidents and near misses that occur should be reported to the Designated Officer and to the Responsible Person for the activity or Programme. Accidents, incidents and near misses, particularly those which are recurring, can be indicators of organisational risk, including risk to Safeguarding, which needs to be managed.

2.4.4. Vulnerable persons – special considerations

Abuse of a vulnerable person may be a single act or repeated over a period of time. It may comprise one form or multiple forms of abuse. The lack of appropriate action can also be a form of abuse. Abuse may occur in a relationship where there is an expectation of trust and can be perpetrated by a person who acts in breach of that trust. Abuse can also be perpetrated by people who have influence over the lives of vulnerable persons, whether they are formal or informal carers or family members or others. It may also occur outside such relationships.

Abuse of vulnerable persons may take somewhat different forms and therefore physical abuse may, for example, include inappropriate restraint or use of medication.

Vulnerable persons may also be subject to additional forms of abuse such as financial or material abuse and discriminatory abuse.

It is critical that the rights of vulnerable persons to lead as normal a life as possible is recognised, in particular deprivation of the following rights may constitute abuse:

- Liberty
- Privacy
- Respect and dignity
- Freedom to choose
- Opportunities to fulfil personal aspirations and realise potential in their daily lives
- Opportunity to live safely without fear of abuse in any form
- Respect for possessions

People with disabilities and older people may be particularly vulnerable due to:

- diminished social skills
- dependence on others for personal and intimate care
- capacity to report
- sensory difficulties
- isolation
- power differentials

Adults who become vulnerable have the right to:

- be accorded the same respect and dignity as any other adult, by

recognising their uniqueness and personal needs.

- be given access to knowledge and information in a manner which they can understand in order to help them make informed choices.
- be provided with information on, and practical help in keeping themselves safe and protecting themselves from abuse.
- live safely without fear of violence in any form.
- have their money, goods and possessions treated with respect and to receive equal protection for themselves and their property.
- be given guidance and assistance in seeking help as a consequence of abuse.
- be supported in making their own decisions about how they wish to proceed in the event of abuse and to know that their wishes will be considered paramount unless it is considered necessary for their own safety or the safety of others to take an alternate course, or if required by law to do so.
- be supported in bringing a complaint.
- have alleged, suspected or confirmed cases of abuse investigated promptly and appropriately.
- receive support, education and counselling following abuse.
- seek redress

2.4.5. Consent/Capacity and Confidentiality

A key challenge arises in relation to work with vulnerable persons regarding capacity and consent. It is necessary to consider if a vulnerable person gave meaningful consent to an act, relationship, or situation, which is being considered as possibly representing abuse. While no assumptions must be made regarding lack of capacity it is clear that abuse occurs when the vulnerable person does not or is unable to consent to an activity or other barriers to consent exist, for example, where the person may be experiencing intimidation or coercion.

It is important that a vulnerable person is supported in making their own decisions about how they wish to deal with concerns or complaints and are assured that their wishes will only be overridden if it is considered necessary for their own safety or the

safety of others or arising from legal responsibilities.

In normal circumstances observing the principle of confidentiality will mean that information is only communicated to others with the consent of the person involved. However, all vulnerable persons and, where appropriate, their carers or representatives need to be made aware that the operation of Safeguarding procedures will, on occasion, require the sharing of information in order to protect a vulnerable person or others.

2.4.6. Non Engagement

Particular challenges arise in situations where concerns exist regarding potential abuse of a vulnerable person and that person does not want to engage or co-operate with interventions. This can be complex particularly in domestic situations. Where an adult indicates that they do not wish to engage and concerns continue, the College will need to consider the issue of capacity and in that regard the following will be noted:

- There is a presumption that all adults have capacity.
- An adult who has capacity has the right not to engage with services, if they so wish.
- If there is a concern that an adult is vulnerable and may or may not have the capacity to make decisions, the Health Service Executive may well have obligations towards them.
- Non-cooperation may be due to issues of capacity or may stem from for example some form of coercion.

Decisions as to the appropriate steps to deal with such situations need to be made on a case by case basis and with appropriate professional advice. It is also important to identify the respective functions and contributions of relevant agencies which include An Garda Síochána and the HSE.

Inter-agency collaboration is particularly important in these situations.

3. Recognising/Responding/Recording

3.1. Guidelines for recognition

3.1.1. Disclosing abuse is traumatic for everyone. Particular barriers can arise for vulnerable persons in disclosing abuse. These can include issues of understanding, and capacity to communicate. Vulnerable persons may also share the fears and ambivalence which can arise for everyone, in such situations

3.1.2. The ability to recognise abuse can depend as much on a person's willingness to accept the possibility of its existence as it does on knowledge and information. There are commonly three stages in the identification of neglect or abuse:

- Considering the possibility
- Looking out for signs of neglect or abuse
- Recording of information and reporting

3.1.3. Stage 1: Considering the possibility

The possibility of abuse should be considered if a vulnerable person appears to have suffered a suspicious injury for which no reasonable explanation can be offered. It should also be considered if the vulnerable person seems distressed without obvious reason or displays persistent or new behaviours that challenge. The possibility of abuse should also be considered if the vulnerable person displays unusual or fearful responses to other people. A pattern of ongoing neglect should also be considered even when there are short periods of improvement.

3.1.4. Stage 2: Looking out for signs of neglect or abuse

Signs of neglect or abuse can be physical, behavioural or developmental. They can exist in the relationships between vulnerable persons and other family members/other persons. A cluster or pattern of signs may be likely to be indicative of neglect or abuse. Vulnerable person who are being abused may hint that they are being harmed and sometimes make direct disclosures. Disclosures should always be taken seriously and should be acted upon.

3.1.5. Stage 3: Recording of information and reporting

Record-keeping is of critical importance. Unless accurate records are maintained, the ability to adequately protect vulnerable persons may be severely compromised. It is essential that contemporaneous records of all reported concerns are kept in a safe place. These should include details of contact, consultations and any actions taken.

Care should be taken as to how such information is stored and to whom it is made available.

It is important that members of the College Community reporting suspected abuse should set out the basis for their concerns, note and record the conversations/observations accurately and then inform the Designated Officer. People who have not received appropriate training should not conduct any interview in any detail about the alleged abuse.

3.2. Responding to Concerns

3.2.1. Any person who has a concern regarding possible or actual abuse must contact the Designated Officer. The Designated Officer will be responsible for providing support and advice ensuring that all appropriate actions are taken. In case of an emergency, where it is believed that a Vulnerable Person is at serious and imminent risk of harm An Garda Síochána must be contacted. The Designated Officer shall notify any suspicion or allegation of abuse to:

- The Senior Manager With Responsibility for Safeguarding where the allegation is made against a student of the College or other member(s) of the College Community
- The Director of Human Resources where the allegation is made against a College employee, service provider, or an individual working on a voluntary basis on behalf of the College.

3.2.2 While the basis for concern must be established, the following advice is offered

DO:	DO NOT
<ul style="list-style-type: none">• Stay calm, listen and offer assurance	<ul style="list-style-type: none">• Panic
<ul style="list-style-type: none">• Record in writing	<ul style="list-style-type: none">• Promise to keep secrets
<ul style="list-style-type: none">• Let the person speak at their own pace	<ul style="list-style-type: none">• Ask leading questions
<ul style="list-style-type: none">• Ask questions only for clarification	<ul style="list-style-type: none">• Make them repeat the story unnecessarily
<ul style="list-style-type: none">• Give assurance that help is available	<ul style="list-style-type: none">• Delay
<ul style="list-style-type: none">• Say that you will need to take advice on how best to help the person.	<ul style="list-style-type: none">• Start to investigate
<ul style="list-style-type: none">• Record the words that are spoken and distinguish between these and your impressions/views	<ul style="list-style-type: none">• Probe for unnecessary details
	<ul style="list-style-type: none">• Do not make assumptions or speculate
	<ul style="list-style-type: none">• Make comments about the person named as being abusive
	<ul style="list-style-type: none">• Disclose details other than to those people identified in this policy.

3.3. Sources of disclosure

3.3.1. Directly from a vulnerable person: If a complaint of abuse is disclosed directly from a vulnerable person to a member of the College Community, the vulnerable person is likely to be under severe emotional stress and the member of the College may be the only adult whom the vulnerable person is prepared to trust. Great care should be taken not to damage this trust. When information is offered in confidence, the member of the College will need tact and sensitivity in responding to the disclosure.

3.3.3 Retrospective disclosures by adults of childhood sexual abuse: it is important not only to consider the needs of the person making the disclosure but also to consider whether there is any current risk to any vulnerable person who may be in contact with the alleged abuser who is identified in such disclosures. An increasing number of adults are disclosing abuse that took place during their childhoods. The person who receives the disclosure

cannot maintain secrecy and must report the information to the Designated Officer.

3.3.4 Information received from a third party or worrying behaviour witnessed: it is important to listen and take note of the information which the person has but not to probe or attempt to assess or judge the situation. Take note, in particular, of objective or factual information. Inform the person of the obligation to report the information to the Designated Officer and potentially to the statutory authorities.

3.3.5 Person admitting abuse: a person disclosing involvement in abusive behaviour must be informed that regardless of when such behaviour occurred the information disclosed must be reported to the Designated Liaison Officer and ultimately to the statutory authorities. This should be made clear to the person at the earliest possible time. The person should also be informed that advice will be sought on the availability of appropriate support services.

3.3.6. Anonymous Referrals -information received anonymously can create considerable difficulty in meeting responsibilities arising. All anonymous referrals must be reported to the Designated Officer. If the information is received anonymously, through for example a letter, it will be considered by the Screening Group (see 3.4).

3.3.7. All complaints or suspicions of abuse must be notified to the Designated Officer.

3.3.8. In situations of immediate risk, the Designated Officer is authorised to immediately notify the relevant statutory authority.

3.3.9. The Designated Officer will convene a meeting of the Preliminary Screening Group, and agree the appropriate participants with the Senior Manager.

3.4. Screening Group

3.4.1. The Screening Group is authorised by the President to undertake a preliminary screening of a complaint and identify all necessary actions and who will be responsible for such actions.

3.4.1. It is important that a vulnerable person is supported in making their own decisions about how they wish to deal with concerns or complaints and are assured that their wishes will only be overridden if it is considered necessary for their own safety or the safety of others or arising from legal responsibilities.

3.5. Preliminary Screening

3.5.1. The Screening Group will comprise of:

- Senior Manager (Chair)
- Designated Officer

and the following, as may be considered appropriate by the Senior Manager and Designated Officer

- Head of Area in which complaint/concerns arises (if appropriate)
- Other officer of the College as may be appropriate.
- Relevant advisors as determined by the Chair.

3.5.2. The preliminary screening will:

- establish the available information
- ascertain if reasonable grounds for concern exist and if it is possible that an abusive interaction could have occurred (this should not attempt to establish whether or not the abuse actually occurred)
 - Identify all necessary actions and identify who will be responsible for such action.

3.5.3. In considering the available information regarding the complaint, the objective is to establish if reasonable grounds for concern exist. Before deciding whether or not to make a formal report it may be appropriate to discuss the concerns with a relevant professional and/or directly with the statutory agencies. Decisions, including decisions to report to the statutory authorities must be based on an opinion formed 'reasonably and in good faith'.

3.5.4. The outcome of the Preliminary Screening Group will determine what further action, if any, is to be undertaken. Any person dissatisfied with this outcome may themselves report the matter the statutory agencies.

3.5.5. If satisfied that an abusive interaction could not have occurred and that no reasonable grounds for concern exist, and no further action is required, the screening group will ensure that a record of the concern and the outcome of the preliminary

screening process are maintained securely. The person reporting the concern will be informed of this decision.

3.5.6. If satisfied that an abusive interaction could have occurred, and that reasonable grounds for concern exists, the screening group will ensure

- Consultation occurs with the statutory agencies
- All necessary actions are identified, and a named person will be responsible for each action.
- If immediate risk arises a report should be made immediately to An Garda Síochána.

3.5.7. If the Screening Group believes that further information is required before reaching a decision then;

- The specific information should be identified
- The person/s responsible for securing the information should be identified
- And the necessary information should be gathered as quickly as possible

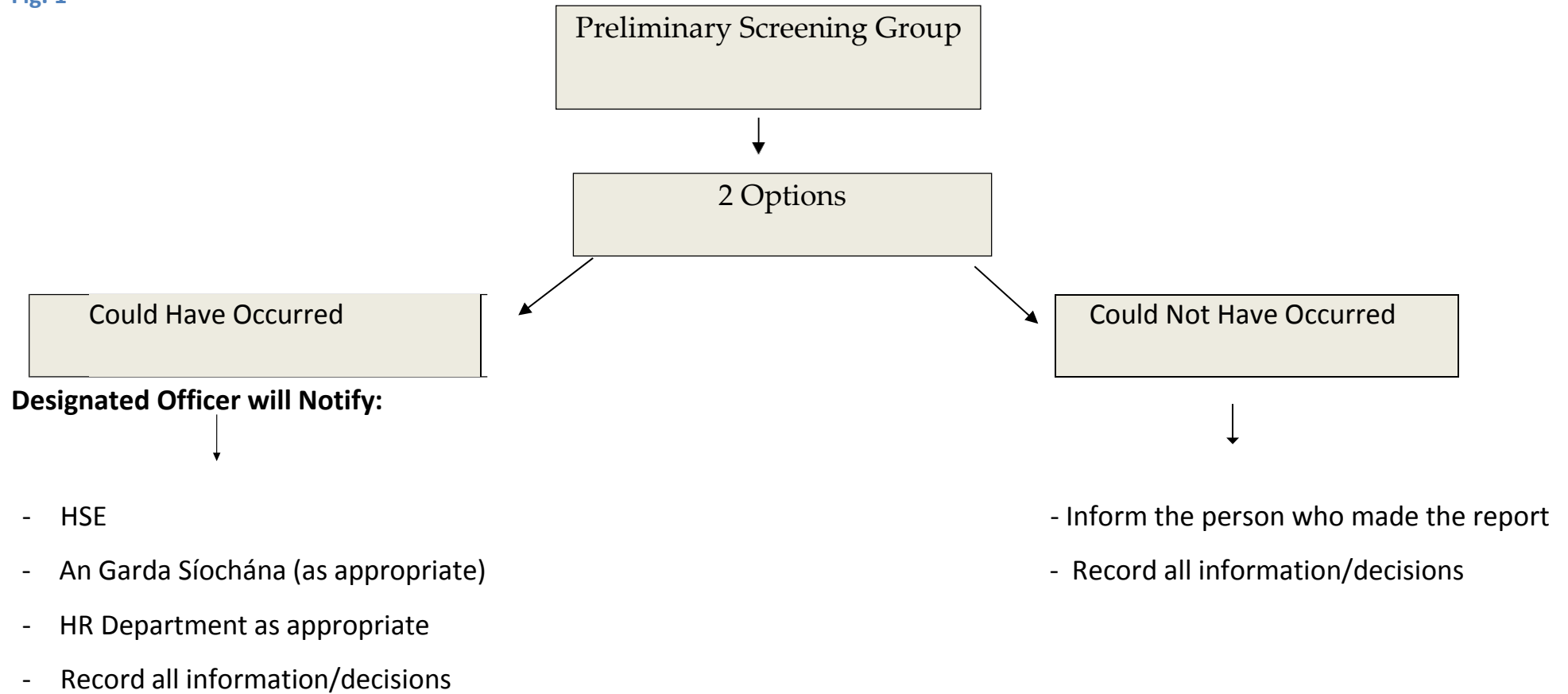
3.6. Reporting neglect or abuse

3.6.1. The Designated Officer acting as the liaison with outside agencies will, when appropriate, make reports to relevant statutory agencies. All persons involved must be mindful of the obligations to make reports to An Garda Síochána if a crime may have been committed and also mindful of the obligation not to interfere in its statutory processes.

3.6.2. The Senior Manager, with the support of the Screening Group, will determine the necessary arrangement for ongoing management and communication.

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Fig. 1



- Any Person dissatisfied may report directly to An Garda Síochána/HSE
- Senior Manager may overrule decision of Screening Group not to report the allegation

3.7. Deciding to 'Report'

3.7.1. Dealing with abusive situations can create uncertainty and fear. Real fears can exist regarding repercussions. These can lead to minimising and even denial of the abusive situation. Reporting a concern is not concluding or determining that abuse has occurred – this is the task of the appropriate statutory authorities.

The threshold for reporting is ***'are these reasonable grounds for concern?'***

3.7.2. In the event of an emergency where a vulnerable person is in immediate danger contact must be made with An Garda Síochána. This may be done through any Garda station. See list of Key Contacts

3.7.3. The College will provide appropriate support to any member of the College Community who, in good faith, reports an abuse concern.

4. Legal Framework

4.1. Withholding of information

4.1.1. The Criminal Justice (Withholding of Information on Offences against Children and Vulnerable Persons) Act 2012 came into force on 1 August, 2012. It is now an offence to withhold information on certain offences against children and vulnerable person from An Garda Síochána.

4.1.2. The main purpose of the Act is to create a criminal offence of withholding information relating to the commission of a serious offence, including a sexual offence, against a person who is under 18 years or an otherwise vulnerable persons, ensuring more effective protection of children and other vulnerable persons from serious crime.

4.1.3. The ‘certain offences’ against children and vulnerable persons are set out in the Act and include offences such as murder, commission of a serious offence, including a sexual offence, against a person who is under 18 years or an otherwise vulnerable person, ensuring the more effective protection of children assault, false imprisonment, rape, sexual assault and incest. An offence is committed when a person who knows or believes that one or more of these offences has been committed by another person against a child or vulnerable person, and the person has information which they know or believe might be of material assistance in securing apprehension, prosecution or conviction of that other person for that offence, and fails without reasonable excuse to disclose that information as soon as it is practicable to do so to a member of An Garda Síochána.

4.1.4. The offence applies to a person acquiring information after the passing of the Act on 18 July, 2012 and it does not apply to the victim. The offence exists even if the information is about an offence which took place prior the Act being enacted, and even if the child or vulnerable person is no longer a child or vulnerable person.

4.2. The National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016

4.2.1. This Act places legal responsibility on organisations to apply for Garda Vetting prior to employing/permitting/contracting persons to undertake relevant work or activities with children/vulnerable persons.

4.3. Criminal Law (Sexual Offences) Act 2017

4.3.1. This legislation introduces the concept of a “person in authority” and the concept of “relevant person”. This “relevant person” should not be mistaken for the position of “relevant person” in the Children First Act 2015.

4.3.2. The legislation defines a “person in authority”, in relation to a relevant person against whom an offence is alleged to have been committed, means any person who as part of a contract of service or a contract for services is, for the time being, responsible for the education, supervision, training, treatment, care or welfare of the relevant person

4.3.3. “relevant person” means a person who has—

(a) a mental or intellectual disability, or

(b) a mental illness,

which is of such a nature or degree as to severely restrict the ability of the person to guard himself or herself against serious exploitation.

4.4. Freedom of Information

4.4.1. Notwithstanding the requirement of all professionals involved in Safeguarding cases to share relevant information, records are nevertheless confidential. They do not belong to individuals (except for independent practitioners) and are the property of the organisations that keep them. Under the Freedom of information Acts 1997 and 2003, members of the public have a right of access to records concerning them held by any public body and a right to have official information about themselves amended where it is incorrect, incomplete or misleading. Members of the public also have a right to be given reasons for decisions made concerning themselves. Requests to see records are processed in the first instance through the public body that holds the records. In the event of refusal of access, the decision may be appealed, and the ultimate arbiter is the Information Commissioner. At present, these Acts apply to the HSE and TUSLA, but not to An Garda Síochána.

4.4.2. The Data Protection Acts 1988 and 2003 afford similar rights to individuals to access personal data held about them by any entity whether in the public or private sector. The right to access applies to records held by the HSE and TUSLA and An Garda Síochána. However, the right to access does not apply in a number of circumstances.

4.4.3. The EU General Data Protection Regulation (GDPR) came into force on the 25th May 2018, updating the existing data protection framework.

4.5. Assisted Decision Making (Capacity) Act 2015

4.5.1. The Assisted Decision Making (Capacity) Act 2015 is in the process of implementation. This will affect issues of capacity and consent.

5. Good Practice

5.1. General

5.1.1. Good Safeguarding practice is about protecting vulnerable persons and those in positions of trust in respect of vulnerable persons.

5.1.2. Interaction with vulnerable persons in programmes and activities may even inadvertently have adverse consequences and compromise a vulnerable person's welfare. Consequently, it is important that all members of the College Community consider how vulnerable person's welfare can be promoted by anticipating the potential for risk and taking appropriate mitigating actions to address such risks in all programmes and activities

5.1.3. The College will provide information and training to all relevant members of the College Community to ensure that they are aware of the standards of behaviour that are expected and will support safe systems of work that will minimise the potential of abuse and harm.

5.2 Code of Behaviour for members of the College Community

A code of behaviour serves to protect vulnerable persons and members of the College Community, by ensuring clarity regarding unacceptable behaviour and boundaries. Each individual is accountable for his/her own actions, and members of the College Community are collectively accountable for upholding standards of behaviour and for compliance with all applicable laws and policies. Raising concerns about the welfare of vulnerable persons is a service to the College Community.

5.1.4. All members of the College Community should:

- Maintain the highest standards of personal behaviour when interacting with vulnerable persons and maintain boundaries appropriate to the professional relationship.
- Treat vulnerable persons with respect and dignity and in a consistent and fair manner.
- Avoid one to one interaction in non-public environments.
- Avoid developing relationships beyond the professional roles or interaction which breaches the boundaries of such roles, such as private communication or personal relationships.

- Not provide or use alcohol or drugs while involved with vulnerable persons
- Not communicate or behave in a discriminatory manner.
- Not participate in or condone behaviour that is illegal, unsafe or abusive, or could be construed as bullying or could put anyone at risk.
- Not allow or engage in any form of inappropriate touching or suggestive comments.
- Report any Safeguarding concern or complaint to the Designated Officer.

This Code of Behaviour should be considered in association with Human Resource and other relevant policies of the College. Please also refer to Appendix 3 - Protocols for Activities with Vulnerable Persons.

5.3. Students on Placement

5.3.1. Students who are on placement (e.g. teaching practice, work experience, off campus placement etc.) in schools, colleges or other organisations where there is access to vulnerable persons must comply with the Vulnerable Persons policies of those organisations and have a responsibility to inform themselves of such policies.

5.4. Research/Best Practice

5.4.1. In addition to this Policy and Procedures research involving vulnerable persons must comply with the College's research ethics procedures see - <http://www.mic.ul.ie/research/Pages/researchpolicy.aspx>

5.5. Safety, Health & Welfare

5.5.1. All member of the College community have a duty to understand the requirements relating to health and safety in advance of commencement of any programme or activity involving vulnerable persons. Consequently risk assessment and related procedures, and reporting of accidents and incidents should be dealt with in accordance with the College's safety statement - www.mic.ul.ie/adminservices/healthsafety/Documents/SafetyStatementofMIC.pdf.

5.6. Internet/Social Media

5.6.1. All members of the College Community must comply with the Policy for Responsible Computing and the associated Code of Conduct.

5.6.2. While the Internet provides many positive opportunities, there is also the potential for vulnerable persons to be put at risk by their exposure to material and/or individuals which may be harmful.

5.7. Internet Safety

5.7.1. The Office for Internet Safety is an office of the Department of Justice and Equality, and takes lead responsibility for internet safety particularly as it relates to vulnerable persons. The office has produced a number of helpful resources, which are accessible on <http://www.internetsafety.ie/>. It also provides links to material which deals with issues such as cyber bullying, social networking and mobile phone safety.

5.8. Personal and Intimate Care

5.8.1. Personal Care refers to activities associated with a person's personal presentation, and associated tasks. It can incorporate, for example, skin care, applying external medication, feeding and dressing (outer wear).

5.8.2. Intimate Care refers to activities of an intimate nature associated with bodily functions and which may involve contact with or exposure of private body parts. It can incorporate, for example, assisting with toilet use, bathing or showering and changing continence wear.

5.8.3. Intimate care will be ordinarily be provided only by an appropriate professional.

5.8.4. Any involvement in the provision of personal or intimate care must respect each person's right to personal privacy and dignity. The possible need to provide personal or intimate care must be anticipated as part of the planning process for all relevant activities.

5.8.5. Each person, as appropriate, should be asked for their views on:

- their personal and intimate care needs
- their wishes on how this should be provided

5.8.6. These should be recorded and will inform the approach to be taken in the provision of personal and intimate care in any activity and to any specific person.

5.8.7. Each person, as appropriate, should be informed of procedure regarding any complaints or concerns.

5.8.8. Persons who may be involved in providing personal and intimate care must be authorised to provide such care by the Responsible Person and endeavour to deliver such care in a manner that is not open to misinterpretation.

5.8.9. Understanding how a person communicates is particularly important in this context and a person providing personal or intimate care must be alert to signals that communicate discomfort. The provision of a medical or nursing service must only be provided by appropriately qualified professionals.

5.8.10. If the provision of intimate care is of a significant nature, it must be the subject of an Intimate Care Support Plan – See Template in Appendix 2.

6. Use of College Facilities

6.1. Use of College facilities by organisations and individuals who are not members of the College Community

6.1.1. Any use of College facilities which may involve vulnerable persons will be dependent on compliance with the following requirements:

- Formal approval by Head of Department or other authorised manager.
- Written confirmation of appropriate insurance, which indemnifies the College from all liability, other than those arising from the physical environment of the College.
- Written confirmation of existence of Safeguarding Vulnerable Persons Policy.
- Written confirmation that persons involved have completed Garda Vetting.
- Complaints arising - If a complaint is made to the College regarding a person who is not a member of the College Community, but who used College facilities, the matter will be reviewed by the Preliminary Screening Group, who will determine the appropriate response, and necessary actions.

7. Risk Assessment – Activities and Programmes

7.1.1. When planning a programme or activity which will involve the participation of vulnerable persons it is necessary that;

- The Head of Department/Person Authorising the Activity or Programme appoint a responsible person.
- This process will be recorded on the Risk Assessment form.
- The Responsible Person conducts a risk assessment process as an integrated part of the planning process.
- Informed by the risk assessment the management arrangements for the programme or activity must include appropriate risk management arrangements.

7.1.2. It should be noted that risk in this context is the risk of abuse and not general health and safety risk.

7.1.3. A risk assessment is an exercise which examines all aspects of the activity/programmes from a Safeguarding perspective to establish whether there are any practices or features of the service that have the potential to put children at risk.

7.1.4. The risk assessment process is intended to:

- Identify potential risks
- Develop policies, procedures and arrangements to minimise and manage the risks

7.1.5. Review whether adequate precautions have been taken to eliminate or reduce these risks.

7.1.6. Carrying out a risk assessment - As part of the risk assessment process, the organisation should reflect on what specific risks arise as a result of the activity/programme they provide and how these risks can be managed. The following steps are a guide which may help the organisation consider where the potential for risk lies and how these risks can be managed.

STEP 1 - Identify Potential risks;

Think about who or what might cause harm to vulnerable persons involved in the activity/programme.

Involve a variety of persons in this process, as different people will have different perceptions of what is a risk.

STEP 2 - Rank each risk

Rank each risk in terms of low, medium and high risks.

To help rank each risk, consider the likelihood of the risk occurring and how serious the consequences could be.

STEP 3 - Control and manage the risks

Who owns the risk? Assign risk owners.

What current controls are in place to reduce the risk?

What future actions must be done to reduce the risk?

What else do you need to do about the risk?

STEP 4 - Monitor and review

Are the controls effective?

Are the actions effective?

7.1.7. It is not possible to eliminate risk completely, but risks can be significantly reduced if they are properly managed.

8. Data Protection

8.1 General

8.1.1. Data protection legislation is designed to protect the rights of individuals with regard to personal data. The Data Protection Acts 1988 and 2003 defines personal data as “data relating to a living individual who is or can be identified from the data or from the data in conjunction with other information that is in, or is likely to come into, possession of the data controller”.

8.1.2. The Acts give a right to every individual, irrespective of nationality or residence, to establish the existence of personal data, to have access to any such data relating to him or her and to have inaccurate data rectified or erased. It requires data controllers to make sure that the data they keep are collected fairly, are accurate and up-to-date, are kept for lawful purposes, and are not used or disclosed in any manner incompatible with those purposes. It also requires both data controllers and data processors to protect the data they keep and imposes on them a special duty of care in relation to the individuals about whom they keep such data.

8.1.3. The EU General Data Protection Regulation (GDPR) came into force on the 25th May 2018, updating the existing data protection framework.

8.1.4. Freedom of Information Acts 1997, 2003 & 2014 - Any reports which are made to Tusla may be subject to the provisions of the Freedom of Information Acts, which enable members of the public to obtain access to personal information relating to them which is in the possession of public bodies. However, the Freedom of Information Acts also provide that public bodies may refuse access to information obtained by them in confidence.

8.2. Confidentiality

- Any person discussing any information regarding possible vulnerable person abuse or neglect must not be given an assurance of confidentiality or secrecy.
- In sharing information, it is important to establish that the person or agency to which it is provided has a right to know the information. The question which needs to be asked is whether or not the person or agency has any legitimate involvement or role in dealing with the matter.
- Providing information to a person or agency that has a legitimate, usually

statutory, involvement or role in the matter is not a breach of professional confidentiality.

- It is important to note that the reporting of a disclosure or concern is not making an allegation or an accusation.

8.3. Record Keeping

8.3.1. It is essential to have a written record of all the information available regarding abuse or neglect. All persons shall note carefully what they have observed and when they observed it. Signs of physical injury shall be described in detail and, if appropriate, sketched.

8.3.2. Any comment by the vulnerable person concerned, or by any other person, about how an injury occurred shall be recorded, preferably quoting words actually used, as soon as possible after the comment has been made. The record of the discussion shall be signed, dated and given to the Designated Officer who shall retain it.

8.3.3 The Designated Officer shall record all concerns or allegations of abuse of a vulnerable person brought to his or her attention, and the actions taken following receipt of a concern or allegation of abuse.

8.3.4 The Designated Officer shall retain a copy of every report submitted by him or her to a statutory agency and shall keep a record of any further actions to be taken by the Designated Officer and of any further communications with the HSE, An Garda Síochána or other parties in relation to that report.

8.3.5 All records created shall be regarded as highly confidential and placed in a secure location.

8.3.6 To allow for the effective recording and tracking of relevant records and actions, all Safeguarding case files and any parties referenced in such files shall be assigned a unique code or serial number by the Designated Officer.

9. Allegations against Staff Members

9.1. The first priority is to ensure that a vulnerable person is not exposed to ongoing or unnecessary risk when a complaint or concern arises. It is, therefore, necessary to consider if protective measures need to be taken which are proportionate to the assessment of risk. Any such action taken should be guided by the relevant College policies and procedures.

9.2. If an allegation is made against a member of staff, the College will ensure that everyone involved receives an appropriate response. The College has a dual responsibility in respect of both the vulnerable person and the member of staff. This involves ensuring that two separate procedures are followed:

- The reporting procedure in respect of the vulnerable person (Responsibility of the Designated Officer).
- The procedure for dealing with a member of Staff (Responsibility of Director of HR).

9.3 The same person within the College will not have responsibility for the two procedures outlined above.

9.4 The welfare of a vulnerable person will always be considered of paramount importance with due regard to the rights of staff members which includes the right to protection of their good name and reputation, and their rights to appropriate support.

9.5 The College will ensure that any proportionate protective measures considered necessary to ensure the safety and wellbeing of a vulnerable person are taken without prejudice to any staff member's right to the presumption of innocence.

9.6 It is also essential that the College liaises with the relevant statutory agency in order to ensure that its action do not interfere with any function of a statutory agency.

9.7 The College should seek to be informed of the outcome of investigations or assessments by the statutory authorities in order to assist in decision making regarding the Colleges responsibilities.

9.8 If a complaint is not sustained the College will as far as possible ensure that the person's reputation, and career prospects are not adversely affected and ensure that support is provided to help restore confidence and morale.

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Appendices

Appendix 1 – Risk Assessment and Management– Activities & Programmes

To be completed by the person in charge of the activity/programme (Responsible Person)

Description of the activity/programme
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Participants

Personnel (incl. Volunteers)

Names	Contact Details	Roles

Nature of any risk which may arise (consider physical emotional sexual neglect and bullying). Consider who will be interacting with vulnerable persons, and the nature and location of the interaction.

Preventative/Protective measures taken to address any risks arising, including for example, training/supervision, complaints procedure, identification of a person to whom concerns can be addressed, feedback, questionnaires.

Note. The person responsible will maintain this risk assessment form and keep it available for audit.

Signed:

Name _____ **Date:** _____

Responsible person
Title/position_Contact details

Signed:

Name _____ **Date:** _____

Head of Department
Title/position_Contact details

Appendix 2 – Intimate Care Support Plan

Name of Person:

Address:

Date of Birth:

Nature of Disability:

Areas of Intimate Care for which assistance is required:

Specific issues/concerns including communication issues:

Signed: _____ **Date:** _____
Service User

Signed: _____ **Date:** _____
Parent/Guardian (as appropriate)

Signed: _____ **Date:** _____
Responsible Person
(On behalf of the College)

Appendix 3 - Protocols for Activities with Vulnerable Persons

The protocols set out below complement the Code of Behaviour and related policies and provide further guidance on how to behave when engaged in activities related to vulnerable persons.

Protocol	Examples
<ul style="list-style-type: none">- Conduct interactions in the presence of other adults	<ul style="list-style-type: none">- To help vulnerable persons feel safe, avoid being alone with them. Ensure that another adult is present, or close by and able to observe interactions when providing one-on-one services to vulnerable persons.- Wherever possible, conduct interactions in professional spaces and not in a home environment.- Do not transport unaccompanied vulnerable persons unless appropriate consent is provided.- Do not initiate, encourage or accommodate unnecessary physical contact.- Deal sensitively with inappropriate physical contact and report it to a supervisor.
<ul style="list-style-type: none">- Avoid unnecessary physical contact	<ul style="list-style-type: none">- Ensure that any physical contact with a vulnerable person is appropriate and can be explained in terms of the appropriate activity and needs of the vulnerable adult.
<ul style="list-style-type: none">- Behave professionally at all times	<ul style="list-style-type: none">- Only make contact in an official capacity and as part of duties.- Avoid discussing personal details.- Be a positive role model.- Do not show favouritism and treat all

vulnerable persons equitably and respectfully.

- Any steps taken to manage disruptive or unsafe behaviour should not be humiliating or isolating.
- While in hearing range of vulnerable persons, avoid conversations with other adults on adult or personal subject matter (e.g. relationships, lifestyle, alcohol consumption).
- Ensure that photographing, audio recording or filming via any medium is authorised in writing, and is used solely for the purposes for which they have been authorised.
- Ensure that there is no identifying personal information in photographs or film footage of vulnerable persons, e.g. name tags
- Take steps to encourage the responsible use of personal equipment e.g. mobile devices should not be used to photograph, record or film.
- Do not provide personal contact details and always use MIC email and telephone for communication.
- Do not “friend” or “connect” via social media unless for purposes related to the work and with the consent of the guardian.
- Be aware of issues associated with online safety.
- If a vulnerable person raises a concern, ask open questions, listen patiently, be compassionate and reassure them; and then take appropriate action to report and address the concern.

Use technology appropriately

Listen and act

- **Seek consent and assent from the vulnerable person, where appropriate**
 - If a vulnerable person reports concerning behaviour which has occurred at MIC or elsewhere, take action to report the behaviour in accordance with this Policy.
 - Seek consent from a guardian of a vulnerable person where prudent to do so.
 - Where appropriate, seek assent written from the vulnerable person to participate in an activity e.g. a research study.
- **Planning of college spaces**
 - Select venues and spaces for activities and events which facilitate the personal safety and access of vulnerable person
 - Ensure that principles of personal safety are a requirement in design briefs for new and refurbished spaces (e.g. visibility into rooms accessed by vulnerable persons).
- **Planning an activity**
 - Engage in risk planning and management