

Child Safeguarding Statement

1. Name of the service

Community Therapy Ireland

2. Location of the service

77 Camden Street Lower,
Dublin 2
D02 XE80

3. Nature of the service being provided

Community Therapy Ireland is an independent, national membership organisation representing community therapeutic service providers across Ireland. Through our work, our national membership is enabled to deliver sustainable professional therapeutic services to those who need them, when they need them, where they need them. Community therapy services include professional counselling and psychotherapy, governed by strict clinical governance standards, ranging from early intervention to support in highly complex situations, responsive to emerging local needs, for everyone in the community, culturally appropriate, welcoming, affordable, rights-based and person-led, delivered by non-profit service providers, and complementing statutory and private service providers.

Through the nature of Community Therapy Ireland's work, we don't provide any direct services to children. Work with children is carried out directly by the services who are our members. Community Therapy Ireland members are non-profit service providers.

4. Commitment to safeguarding children from harm

- Child safeguarding is a responsibility of Community Therapy Ireland to ensure we do no harm to children. This means doing all we can to prevent neglect and abuse, and if either occurs, to respond appropriately. Community Therapy Ireland is fully committed to the safeguarding of children who come in contact with our service.
- We are committed to upholding the rights of every child including the right to be safe and protected from harm, to be listened to and to be heard through our engagement with our national membership and all other stakeholders
- Management and staff in this organisation recognise that the welfare of children is paramount and aim to protect children from physical, sexual, and emotional harm and neglect.
- We acknowledge our duty of care to safeguard and promote the welfare and development of children.
- We have developed a clear and comprehensive Child Safeguarding policy that places the rights of the child at the centre. We consider the welfare of the child as paramount, and are committed to child-centred safeguarding practice, which reflects our statutory responsibilities, complies with best practice, and is in accordance with the Children First Act 2015.
- Our policy and procedures to safeguard children reflect national policy and legislation and are underpinned by Children First: National Guidance for the Protection and Welfare of Children 2017, the Tusla Children First - Child Safeguarding Guide 2024, and the Children First Act 2015.
- Our Child Safeguarding Statement and Child Safeguarding Policy apply to all paid employees, volunteers, board/committee members and any interns on work placement within our organisation. All staff, volunteers, board/committee members, and interns must sign up to and abide by the policies, procedures and guidance encompassed by our Child Safeguarding Statement and Child Safeguarding Policy

- We will review our Child Safeguarding Statement and accompanying Child Safeguarding Policy every 2 years, or sooner, if necessary, due to service issues, changes in legislation or national policy.

DLP	Deputy DLP
Brid Meighan clinical.lead@communitytherapy.ie	Maria Cleary ceo@communitytherapy.ie

5. Risk Assessment

In accordance with the Children First Act 2015, Community Therapy Ireland has carried out an assessment of any potential for harm to children while engaging with the service or participating in service activities. A written assessment setting out the areas of risk identified and the service procedures for managing those risks is summarised below:

Risk Identified	Policies and/or Procedures in place to manage Risk
1. The risk of a child contacting Community Therapy Ireland and disclosing neglect, abuse, or risk of neglect or abuse to their rights, welfare and development being experienced.	<ul style="list-style-type: none"> • Responding to the child to assess their current level of safety. • Explanation to the child of the purpose and procedure of the need to make a report to Tusla as appropriate. • Potential Involvement of parents or guardians if information provided and deemed necessary. • Contact made to the duty social worker if clarification or guidance is required in how to proceed with particular instance. • Child protection report to be made to Tusla via portal, as appropriate. • Training for staff regards managing communications from children that may carry risk.

<p>2. Fear and distress expressed by the child involved in relation to Community Therapy Ireland making a mandated report.</p>	<ul style="list-style-type: none"> • Support and reassurance by the Community Therapy Ireland team member. • Explanation of the procedure and purpose in relation to reporting and our mandated role. • Involvement of parents and guardians as appropriate.
<p>3. Community Therapy Ireland’s lack of direct contact with children in their employed roles may make employees hesitant in reporting any identified child safeguarding concerns.</p>	<ul style="list-style-type: none"> • A clear understanding of the DLP within the organisation who will provide direct support in these instances. • A clear understanding of the Child Safeguarding Statement and Child Safeguarding Policy in place. • A clear understanding of how to access the Tusla duty social worker, in case further clarification and support is required with a potential child safeguarding concern.

6. Child Safeguarding Policies and Procedures

Our Child Safeguarding Statement has been developed in line with requirements under the Children First Act 2015, Children First: National Guidance for the Protection and Welfare of Children 2024, and Tusla’s Child Safeguarding: A Guide for Policy, Procedure and Practice 2nd Edition. The procedures listed in our Risk Assessment and the Procedures below support our intention to safeguard children who come in contact with our service.

Reporting

Where a mandated person knows, believes or has reasonable grounds to suspect, based on information that they have received or acquired; or where a mandated person becomes aware of in the course of their employment, that a child has been neglected or

harmed, is being neglected or harmed, or is at risk of being neglected or harmed, the mandated person shall report.

Where a child believes that they have been neglected or harmed, are being neglected or harmed, or are at risk of being neglected or harmed, and the child discloses that belief to a mandated person during the mandated person's employment, the mandated person shall report.

Regardless of how a concern comes to a Community Therapy Ireland's staff member's attention it must be reported to the DLP. The Designated Liaison Person (DLP), in consultation with the person who raised the concern, will decide if reasonable grounds for concern exist. If reasonable grounds for concern exist, the DLP will report to the Tusla Duty Social Worker. Under Children First Guidelines, for all cases of children under 18, Community Therapy Ireland will notify Tusla.

Reasonable Grounds for Concern

- Specific indication that a child has been neglected or abused either currently or historically.
- An account from the person who was neglected or abused or another who witnessed the neglect or harm.
- Evidence, for example an injury or behaviour, that is consistent with neglect or abuse.
- Admission or indication by an adult or a child of an alleged neglect or abuse they committed.
- Consistent signs that a child is suffering from emotional or physical neglect.

The DLP acting in the capacity of a mandated person will notify Tusla. The priority is always the safety and welfare of the child. If there is doubt about whether the concern reaches the legal definition of harm for making a mandated report, Tusla can provide advice. Parents/Guardians of the child may be informed of the allegation if concern or disclosure, unless by doing so is likely to endanger the child.

Retrospective Disclosure

Where such a disclosure is made, it is essential to establish whether there may be current risk to any child who may be in contact with the alleged person that caused the neglect or abuse revealed in the disclosure. This is important even where the child about whom there may be a concern, are still to be identified.

Adults disclosing abuse may not choose to come forward personally to report their concerns. If the DLP is made aware that there may be an ongoing risk to a child from an identified alleged abuser, they will make a report to Tusla.

Allegation against a Staff Member

In the case of an allegation of neglect or abuse being made against a Staff member, the DLP will immediately take any measures necessary to protect the child. These should be proportionate to the level of risk.

The Co-CEO will privately inform the Staff member that an allegation has been made against them and the nature of the allegation. They will give the employee copies of any written records relating to the allegation and inform them if a report is going to be made to Tusla.

The Staff member will then be afforded an opportunity to respond. The Co-CEO should note the response and pass on this information if making a formal report to Tusla. The Staff member has the option to have representation at this stage.

If the complaint is against the DLP or Co-CEO, a Board Member will deal with the complaint.

Supervision

Whilst Community Therapy Ireland currently operates a remote working model, in the unlikely event that a situation arose where a child had to engage in a physical office space with Community Therapy Ireland, they will never be left unsupervised. Should an accident occur, the child will be attended to and the appropriate treatment offered. An incident report would be created to detail this.

Records

Any information held by Community Therapy Ireland is held in line with the principles of Data Protection and the Data Protection Act 2018, which recognise that in certain circumstances, information can be shared in the interest of child safeguarding.

Additional procedures

In addition to the procedures listed in our organisation's risk assessment, the following specific procedures support our commitment to safeguard children while they are availing of our service:

- Training and information: staff, volunteers, board/committee members, and interns are provided with access to child safeguarding training and information
- A code of behaviour exists for staff, volunteers, board/committee members, and interns
- A procedure to respond to accidents is in place
- A procedure to respond to complaints is in place
- The management of allegations of neglect, abuse, and misconduct on the part of staff and against a child engaging with our services is held by the Co-CEO and procedures have been put in place in relation to this
- Safe recruitment and selection policies procedures for staff are in place
- The Clinical Lead has been appointed as the Relevant Person to ensure that procedures are followed appropriately
- An updated list of all mandated persons in the service is kept by the Service
- Tusla as our funders, require notification in the following instances:

Notification of any alleged misconduct:

“Community Therapy Ireland must within 2 working days notify your Local Commissioner/Funding Manager by phone call if the allegation involves misconduct or dishonesty concerning You, Your Services or Your finances

- In all cases, report the allegation to a relevant authority, such as An Garda Síochána, as soon as possible and keep Tusla updated on outcomes of same
- If the alleged misconduct involves the harming of children, by the inappropriate conduct or illegal behaviour of any employee, officer,



volunteer or agent of the Organisation you must provide the local Tusla Commissioner/Funding Manager with specific confirmation that relevant child safeguarding obligations, including reporting, have been complied with in accordance with the Children First Act 2015 Act and Children First National Guidance, and that you will review policy, procedure and practice related to the failure to safeguard relevant to the allegation.”

Notification of any major Incidents:

“Community Therapy Ireland must within 2 working days notify your Tusla Local Commissioner/Funding Manager by phone call, in addition to any other appropriate and relevant authority, such as An Garda Síochána, and keep Tusla updated on outcomes of same; after you become aware of:

- an incident that involves misconduct or dishonesty concerning You, Your Services or Your finances
- an incident that relates to any of the Services or Service Users and that requires an emergency response
- an incident that may relate to any Service Users subject to interventions by You, Your staff, volunteers and any associated personnel
- a matter where significant media attention has occurred or is likely to occur
- incidents in relation to child safeguarding practice issues or an incident in relation to unsafe child safeguarding practice or an incident in relation to breaches of child safeguarding procedures that may lead to actual or potential harm to a child
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7. Implementation and review

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

The Child Safeguarding Statement is displayed clearly on our website and will be reviewed in April 2027, or as soon as practicable after there has been a material change in any matter to which the statement refers.

Provider of Relevant Service under the Children First Act, 2015: Maria Cleary, Co-CEO, 77 Camden Street Lower, Dublin 2, D02 XE80; ceo@communitytherapy.ie

Signed: _____

Date: 02 April 2026

For further information on this Statement please contact

Relevant Person as required under the Children First Act, 2015: Bríd Meighan, Clinical Lead, 77 Camden Street Lower, Dublin 2, D02 XE80; clinical.lead@communitytherapy.ie

Signed: _____

Date: 02 April 2026